**Nagaland Hypertension Protocol**

Measure blood pressure of all adults over 18 years

High BP: SBP ≥ 140 or DBP ≥ 90 mmHg

Check for compliance at each visit before titration of dose or addition of drugs

---

**Step 1**
If BP is high:
**Prescribe Amlodipine 5mg**

**Step 2**
After 30 days measure BP again. If still high:
**Add Telmisartan 40mg**

**Step 3**
After 30 days measure BP again. If still high:
**Increase Telmisartan to 80mg**

**Step 4**
After 30 days measure BP again. If still high:
**Increase Amlodipine to 10mg**

**Step 5**
After 30 days measure BP again. If still high:
**Add Chlorthalidone 12.5mg**

**Step 6**
After 30 days measure BP again. If still high:
**Increase Chlorthalidone to 25mg**

Check if the patient has been taking medications regularly and correctly. If yes, refer to a specialist.

---

**Women who are or could become pregnant**

▲ DO NOT give Telmisartan or Chlorthalidone.
- Statins, ACE inhibitors, angiotensin receptor blockers (ARBs), and thiazide/thiazide-like diuretics should not be given to pregnant women or to women of childbearing age not on effective contraception.
- Calcium channel blocker (CCB) can be used. If not controlled with intensified dose, refer to a specialist.

**Diabetic patients**
- Treat diabetes according to protocol.
- Aim for a BP target of < 140/90 mmHg.

**Heart attack in last 3 years**
- Add beta blocker to Amlodipine with initial treatment.

**Heart attack or stroke, ever**
- Begin low-dose aspirin (75mg) and statin.

**People with high CVD risk**
- Consider aspirin and statin.

**Chronic kidney disease**
- ACEI or ARB preferred if close clinical and biochemical monitoring is possible.

---

* If SBP ≥ 180 or DBP ≥ 110, refer patient to a specialist after starting treatment.
* If SBP 160-179 or DBP 100-109, start treatment on the same day.
* If SBP 140-159 or DBP 90-99, check on a different day and if still elevated, start treatment.
* Hydrochlorothiazide can be used if Chlorthalidone is not available (25 mg starting dose, 50 mg intensification dose).

---

**Lifestyle advice for all patients**

- Avoid tobacco and alcohol
- Exercise 2.5 hours/week
- Reduce weight, if overweight
- Reduce salt, under 1 tsp/day
- Eat less fried foods
- **Eat 5 servings of fruits and vegetables per day.**
- **Avoid pappads, chips, chutneys, dips, and pickles.**
- Use healthy oils: E.g. sunflower, mustard, or groundnut.
- **Limit consumption of foods containing high amounts of saturated fats.**
- **Reduce fat intake by changing how you cook:**
  - Remove the fatty part of meat
  - Use vegetable oil
  - Boil, steam, or bake instead of fry
  - Limit reuse of oil for frying
- Avoid processed foods containing trans fats.
- Avoid added sugar

---

* Dispense drugs for 30 days and give appointment after 4 weeks
* Medications should be taken at the same time each day