



Nagaland

Hypertension Protocol



Measure blood pressure of **all adults** over 18 years

High BP: **SBP \geq 140** or **DBP \geq 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**



After 30 days measure BP again. If still high:

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 intensification 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 \geq 180 or DBP \geq 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 papads, 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