

# 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: <sup>\*</sup>  
**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 (25mg starting dose, 50mg intensification dose).

## Lifestyle advice for all patients



Avoid tobacco and alcohol



Exercise 2.5 hr/week



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: sunflower, mustard, or groundnut.
- Limit consumption of foods containing high amounts of saturated fats.
- Reduce weight if overweight.
- 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.