Hypertension Protocol

Measure blood pressure of **all adults** over 30 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 Amlodipine to 10mg

**Step 4**
After 30 days measure BP again. If still high:
Increase Telmisartan to 80mg#

**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.

**Pregnant women and women who may 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 ≥ 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.

Recommended investigations at initiation of therapy: Haemoglobin, blood sugar, urine analysis for proteinuria, serum creatinine.

**Hydrochlorothiazide can be used if Chlorthalidone is not available (25mg starting dose, 50mg intensification dose)**

# Ensure serum creatinine result before increasing Telmisartan to 80mg

---

**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, pickles etc
- Use healthy oils like sunflower, safflower, groundnut, etc
- Limit consumption of foods containing high amounts of saturated fats (cheese, ice-cream, fatty meat)
- 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 excess sugar, carbonated/packaged drinks.

---

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