

Although clinical manifestations associated with hypertension depend largely on the underlying cause, some observations can provide clues to the examiner that an elevated BP may be a factor ([Box 23-11](#)). In infants and very young children who cannot communicate symptoms, observation of behavior may provide clues, although gross behavioral changes may not be apparent until complications are present.

Box 23-11

Clinical Manifestations of Hypertension

Adolescents and Older Children

Frequent headaches

Dizziness

Changes in vision

Infants or Young Children

Irritability

Head banging or head rubbing

Waking up screaming in the night

No definitive cutoff values are used in the diagnosis of hypertension in the pediatric patient. The Expert Panel on Integrated Guidelines for Cardiovascular Health and Risk Reduction in Children and Adolescents ([National Heart, Lung, and Blood Institute, 2011](#)) endorsed the National Heart, Lung, and Blood Institute's *Fourth Report on the Diagnosis, Evaluation, and Treatment of High Blood Pressure in Children and Adolescents* ([National High Blood Pressure Education Program Working Group on High Blood Pressure in Children and Adolescents, 2004](#)). Both documents provide normative data for children. BP tables include the 50th, 90th, 95th, and 99th percentiles for BP readings based on age, gender, and height percentiles. These guidelines are based on