

# Hypertension Protocol

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



High BP: **SBP  $\geq$  140** or **DBP  $\geq$  90** mmHg

Step  
**1**

If BP is high:\*

**Prescribe Amlodipine 5mg**

Step  
**2**

After 30 days<sup>#</sup> measure BP again. If still high:

**Increase to Amlodipine 10mg**

Step  
**3**

After 30 days<sup>#</sup> measure BP again. If still high:

**Add Telmisartan 40mg**

Step  
**4**

After 30 days<sup>#</sup> measure BP again. If still high:

**Increase to Telmisartan 80mg**

Step  
**5**

After 30 days<sup>#</sup> measure BP again. If still high:

**Add Chlorthalidone 12.5mg<sup>\*\*</sup>**

Step  
**6**

After 30 days<sup>#</sup> measure BP again. If still high:

**Increase to Chlorthalidone 25mg<sup>\*\*</sup>**

...

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.

## 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.

## Lifestyle advice for all patients



Avoid tobacco and alcohol



Exercise 2.5 hr/week



Reduce salt, under 1 tsp/day



Eat less fried foods

\* 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.

# Dose of anti-hypertension medications can be titrated at 15 days frequency if required.

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

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 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.