



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:
Increase to Amlodipine 10mg
- Step 3** After 30 days measure BP again. If still high:
Add Telmisartan 40mg
- Step 4** After 30 days measure BP again. If still high:
Increase to Telmisartan 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 to Chlorthalidone 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.

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.

Chronic kidney disease

- ACEI or ARB preferred if close clinical and biochemical monitoring is possible.

Lifestyle advice for all patients

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 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.

** Hydrochlorothiazide can be used if Chlorthalidone is not available (25 mg starting dose, 50 mg intensification dose). Recommended investigations at initiation of therapy: Haemoglobin, blood sugar, urine analysis for proteinuria, serum creatinine.

Eat 5 servings of fruits and vegetables per day.
 Avoid papads, chips, chutneys, dips, pickles etc
 Use healthy oils: E.g. sunflower, mustard, groundnut, etc
 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.