

HYPERTENSION

(High Blood Pressure)

NOLENSVILLE FAMILY MEDICINE
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BASIC INFORMATION

DESCRIPTION

Blood pressure measures the force of blood as it flows through the arteries. Adult blood pressure is considered normal at 120/80. The first number is systolic pressure, which measures pressure as the heart contracts (pumps). The second number is diastolic, which measures pressure when the heart is relaxed (between beats). If blood pressure stays high over time (140/90 or above), it is called high blood pressure or hypertension. It is a common disorder and often affects adults over 60. Prehypertension is when the blood pressure is between 120/80 and 140/90. The risk of stroke and heart attack begins to rise as the blood pressure goes above 115/75.

FREQUENT SIGNS AND SYMPTOMS

- Usually no symptoms occur. It is often discovered when blood pressure is measured.
- Vague, mild symptoms such as headache, dizziness, blurred vision, or nausea may occur.

CAUSES

Mostly unknown (called primary hypertension). In some cases, it results from certain medical problems (called secondary hypertension).

RISK INCREASES WITH

- Aging and hardening of the arteries.
- Prehypertension.
- Chronic kidney disease or thyroid dysfunction.
- Narrowing of the aorta (major artery of the heart).
- Adrenal gland disorders.
- Alcoholism.
- Hormone problems of adrenals or pituitary glands.
- Overweight; smoking; stress.
- Sedentary (lack of physical activity) lifestyle.
- Sensitivity to sodium (salt).
- Genetic factors (it is common in African Americans).
- Family history of hypertension.
- Use of certain drugs. These include birth-control pills, steroids, diet pills, and decongestants.

PREVENTIVE MEASURES

No specific preventive measures. Avoid risk factors where possible. Maintain a healthy weight, be physically active, eat a healthy diet (limit salt), drink little or no alcohol, and don't smoke. If you have a family history of hypertension, have frequent blood-pressure checks.

EXPECTED OUTCOMES

Outlook is good if blood pressure can be controlled.

POSSIBLE COMPLICATIONS

Without treatment, high blood pressure can lead to heart attack, stroke, congestive heart failure, pulmonary edema, and kidney failure. High blood pressure is called the "silent killer."



DIAGNOSIS & TREATMENT

GENERAL MEASURES

- Your health care provider will do a physical exam, measure your blood pressure, and ask questions about your lifestyle and family medical history. Medical tests may include blood and urine studies. Other tests may be done to find a cause for the high blood pressure or to determine if there are any complications.
- Treatment steps will depend on each individual. You and your health care provider will decide on a treatment plan. Steps may involve diet changes, weight loss, stopping smoking, increasing exercise, limiting alcohol use, reducing stress, and taking drugs.
- Take your blood pressure at home each day. Write down the results. Have your blood pressure checked regularly by a health professional.
- Counseling, meditation, biofeedback, relaxation techniques, or other therapies can help you reduce stress.
- Talk to your health care provider before trying alternate forms of treatment such as acupuncture, diet supplements, and others.

MEDICATIONS

- One or more antihypertensive drugs to reduce blood pressure may be prescribed. Do not stop taking them unless advised by your health care provider.
- Avoid nonprescription cold, allergy, and sinus decongestant drugs. They may raise blood pressure.

ACTIVITY

Increase physical activity. Exercise moderately hard for 30 minutes, most, if not all, days of the week. It helps reduce stress, control body weight, and lowers blood pressure. Get medical advice about an exercise plan.

DIET

Eat a healthy diet, high in fiber, fruits and vegetables. Limit fat and salt use. If overweight, limit calories.



NOTIFY OUR OFFICE IF

- You or a family member has blood pressure concerns.
- Blood pressure increases or drugs used for treatment cause unexpected side effects.
- Call 911 if symptoms of a heart attack or stroke occur.

Special notes:

More notes on the back of this page