

Hypertension Guideline (2024)

Annual Quality Measures and Targets:

- **Target age:** 18-85 y/o
- **BP goal:**
 <130/80 mm Hg
 (p. e167, p. e209)
 <140/90 mm Hg (all AHN value-based contracts)

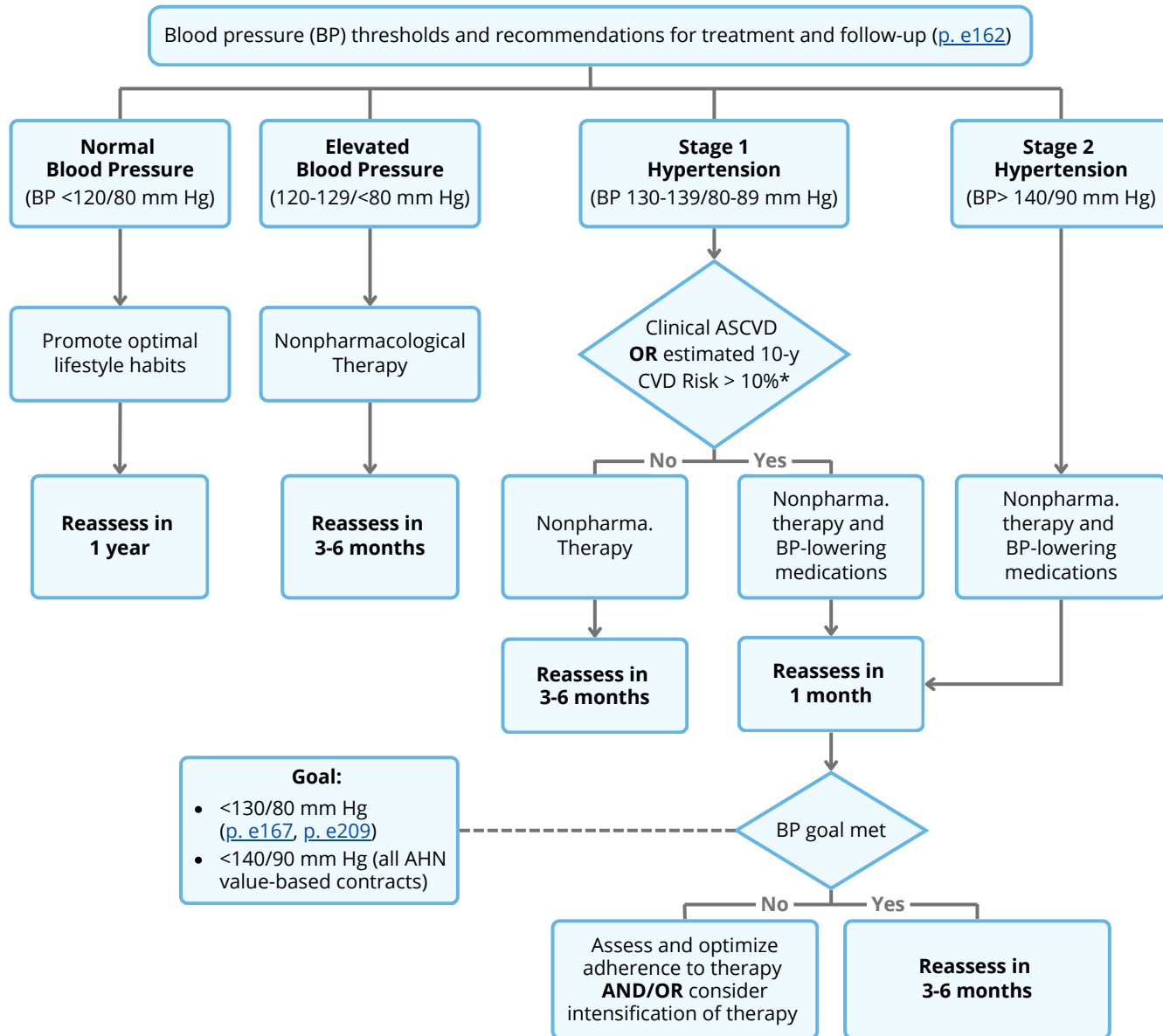
Nonpharmacological Interventions: (p. e156)

- Healthy Diet (DASH dietary pattern)
- Limit alcohol consumption (see limits below)
- Reduce sodium intake, optimal goal <1500 mg/day
- Increase potassium intake to 3500 - 5000 mg/day (Unless with CKD)
- Moderate-to-vigorous activity of 90-150 min/wk
- Smoking cessation (p.e202)
- Weight loss, goal ideal body weigh

Daily Alcohol Limit: (p. e156)

- Men = 2 drinks
- Women = 1 drink

(1 drink = 12oz. beer, 5 oz. wine, 1.5 oz. of distilled spirits)



Basic Testing for Primary Hypertension: (p. e156)

- Fasting blood glucose
- Complete blood count
- Lipid profile
- Annual serum creatinine with eGFR
- Serum sodium, potassium, calcium
- Thyroid-stimulating hormone
- Urinalysis
- Electrocardiogram

Optional Testing:

- Echocardiogram
- Uric acid
- Urinary albumin to creatinine ratio

ASCVD Risk Estimator: (p. e160)

tools.acc.org/ASCVD-Risk-Estimator

Goal:

- <130/80 mm Hg (p. e167, p. e209)
- <140/90 mm Hg (all AHN value-based contracts)

Reference: [American College of Cardiology, Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults](#)

Disclaimer: This guideline is not intended to dictate or substitute for the professional judgment of a health care practitioner in a particular case. The present guideline is intended to be a resource for the clinical and public health practice communities. It is designed to be comprehensive but succinct and practical in providing guidance for prevention, detection, evaluation, and management of high BP. (p. e134)

Additional Information

First line agents for drug therapy: Thiazide diuretics, CCBs, ACE inhibitors, and ARBs ([p. e168](#))

Initial Therapy: Mono-Therapy vs Combination Therapy (p. e169)		
Stage 1 w/ goal <130/80	Angiotensin-converting enzyme	Dosage titration and additional agent 2 first line BP drugs as needed to achieve BP
Stage 2 w/ >20/10 above BP goal	Angiotensin-converting enzyme inhibitor	Separate agents or fixed dose combination

Abbreviations	
ACE	Angiotensin-converting enzyme
ACEi	Angiotensin-converting enzyme inhibitor
ARB	Angiotensin receptor blocker
ASCVD	Atherosclerotic cardiovascular disease
BB	Beta blocker
BP	Blood pressure
CCB	Calcium channel blocker
CKD	Chronic kidney disease
CVD	Cardiovascular disease
DBP	Diastolic blood pressure
DASH	Dietary Approaches to Stop Hypertension
HR	Heart rate
mm Hg	Millimeter mercury
OZ	Ounces
SBP	Systolic blood pressure

Co-morbid conditions	Initial Recommendations in Therapy for HTN
African american	Thiazide diuretic or CCB (p. e189)
Atrial fibrillation	ACE Inhibitor or ARB (p. e184)
Chronic aortic insufficiency	ARB, CCB (p. e186 , CCB - Hypertension Committee Recommendation)
Chronic kidney disease	Diuretics then ACE or ARB and BB (p. e174)
Diabetes	Thiazide diuretic, ACE inhibitor, or ARB, or combination (p. e182)
Diabetes with presence albuminuria	Diuretics, ACE inhibitors, ARBs, OR CCBs (p. e184)
Heart failure with preserved ejection fraction	Guideline-directed management and therapy (p. e174)
Older persons	Risk/benefit assessment to determine intensity of BP lowering and choice of antihypertensive (p. e191)
Pregnancy	Methyldopa, nifedipine, and/or labetalol (p. e190)
Secondary stroke prevention	ACE inhibitor or ARB (p. e175)
Stable ischemic heart disease	BB, ACE inhibitors, or ARB (p. e172)
Thoracic aortic disease	Avoid beta blockers and other agents that slow HR (p. e187)