Types of hypertension

Primary	Secondary

Risk Factors

Sodium consumption	Inflammation
Natriuretic peptide abnormalities	Obesity
Insulin resistance	

Complications

Myocardial hypertrophy	CHF
CKD	Stroke
Retinopathy	

Arterial pressure regulation

ANS	RAAS
Baroreceptor reflex	Kidneys
Natriuretic peptides (dilation)	

HTN medications

Diuretics	ACE-i
ARB	

Loop diuretics

Acts on ascending loop	
Blocks reabsorption of Na	
Uses:	
Pulmonary edema	Edematous states
Hypertension	
AE:	
Hypo-K/Na	Ototoxicity
Dehydration	Hyperglycemia/uricemia

Thiazide

Decrease reabsorption of Na, Cl, K, H2O	early distal convoluted tubule
Maximal diuresis less than loop	
Not effective with scant u/o	
Uses	
HTN	Edema
Diabetes insipidus	
AE	
Hypo-Na/Cl/K	Dehydration
Hyperglycemia/uricemia	

Diuretics - AE

Hypovolemia
Acid-base imbalance
Electrolyte imbalances

Potassium-sparing

does not increase u/o	Not used alone
Prevents cardiac remodelling	
Blocks aldosterone in nephron	
Uses	
HTN (intially)	HF
AE	
Hyper K	Tumors
Endocrine effects	

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Not published yet.
Last updated 24th December, 2022.

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