

Types of hypertension

Primary Secondary

Risk Factors

Sodium consumption	Inflam- mation
Natriuretic peptide abnorm- alities	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
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Hypertension

AE:

Hypo-K/Na	Ototoxicity
Dehydration	Hyperglycemia/u- remia

Thiazide

Decrease reabsorption of Na, Cl, K, H ₂ O	early distal convoluted tubule
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Maximal diuresis less than loop

Not effective with scant u/o

Uses

HTN	Edema
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Diabetes insipidus

AE

Hypo-Na/Cl/K	Dehydration
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Hyperglycemia/uricemia

Diuretics - AE

Hypovolemia

Acid-base imbalance

Electrolyte imbalances

Potassium-sparing

does not increase u/o	Not used alone
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Prevents cardiac remodelling

Blocks aldosterone in nephron

Uses

HTN (initially)	HF
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AE

Hyper K	Tumors
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Endocrine effects



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