

### What is it?

*High blood pressure. It is a condition where the force of blood against the walls of the arteries is consistently too high. If left untreated, hypertension can lead to complications like a heart attack or failure, stroke, vision loss and kidney damage – all due to damage to the blood vessels.*

### Blood pressure RR = 120-129/80-89

Grade	SBP (mmHg)	DBP (mmHg)
High-normal	130-139	85-89
Grade 1 (mild)	140-159	90-99
Grade 2 (moderate)	160-179	100-109
Grade 3 (severe)	180-209	110-119

### Risk factors

Modifiable	Non-Modifiable
↑ weight	Age >55 (M), >65 (F)
↑ blood lipids	CKD
↑ alcohol & smoking	Low socio-ec
Metabolic syndrome/diabetes	Psychosocial stress
↑ Na consumption	
Low PA	
<i>Consider stress &amp; any recent crisis</i>	

### Complications

Heart	Enlarged heart w/ thickened L.ventricle	Cardiac failure
Vessels	↑ pressure, turbulent blood flow, plaque	Stroke, dementia, TIA
Kidney	Poor regulation of salt-retaining hormones	CKD, microalbuminuria, proteinuria

### Complications (cont)

Eyes Papilledema = ↑ pressure in eye causing swelling of optic discs

### Medications that affect BP

HRT (hormone replacement therapy)  
OCP (oral contraception pill)  
Corticosteroids  
MAOIs (Monoamine Oxidase Inhibitors – antidepressant): can cause both hypertension and hypotension  
NSAIDs (anti-inflammatory drugs) Eg. ibuprofen, Naproxen (Aleve), Diclofenac (Voltaren), Celecoxib (Celebrex)

### Biochem

renal and electrolytes (microalbuminuria), glucose, lipid profiles, urine profile, TSH – use these to prioritise nutrition strategies

### Intervention

DASH/similar - wholefoods, plants, reduced sat fat etc  
Overweight/obese = gradual weight loss  
Reduced Na (max 2000-2300mg)  
<120mg/100g for low salt  
PA: 150min/week  
<10 standard drinks/week & <4/day

### Strategies

Lower Na swaps & recipes  
Flavour enhancers: herbs, citrus, spices etc  
Educate: label reading (Na)  
No added salt or salt reduced products  
↓ deli meats, sausages, olives, gravy, sauces, chips, salted nuts/pretzels  
Educate: **Taste buds 4-6 weeks to adapt to a lower salt diet**

### Nut Reqs

Fibre F: 25, M: 30g  
K: 4,700mg/day (consider renal function)  
Na: 1500-2300mg/day

### DASH (Dietary approach to stop hypertension)

↑ plant foods, wholegrains, ↓ red meat and sat fat  
Na 2300mg/100mmol/day  
Na 1500mg/65mmol/day - diabetes, CKD, >51 years or African descent  
p141 handbook

### Example PESS

P	E
Excessive mineral intake (sodium)	Strong preference for salty foods
Excessive energy intake	Lack of knowledge on healthy/low Na food choices
Inadequate potassium intake	Lack of motivation
Food and nutrition related knowledge deficit	No previous nutrition education

### Consider

Renal function & urine profile	Daily stress level
Any recent crisis?	Social support - alcohol & smoking

### Guidelines & References

Handbook p140  
2014 evidence-based guideline for the management of high blood pressure in adults  
2018 ESC/ESH Guidelines for the management of arterial hypertension



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