

HYPERTENSION, THE SILENT KILLER

This article has been written for your benefit. Take good care of yourself.

How common is hypertension?

About one third of the population of the United States has hypertension.

Control of hypertension is not adequate as people do not take their medications properly.

What is normal blood pressure?

Systolic below 120 mm Hg

Diastolic below 80 mm Hg

What is prehypertension?

Systolic 120 to 139 and diastolic 80 to 89 mm Hg

What is hypertension?

Stage 1. Systolic 140 to 159 mm Hg

Diastolic 90 to 99 mm Hg

Stage 2. Systolic over 160 or diastolic 100



How do you diagnose hypertension?

Ambulatory blood pressure monitoring system is the best way to diagnose hypertension but it is not available in the many doctors' practices. Home monitoring of the blood pressure is the next best. It is important to measure blood pressure several times in the doctor's office. You have to remember that there is something called "white coat syndrome". People have higher BP recordings in doctors' offices.

What is malignant hypertension?

This is an emergency situation. Blood pressure usually is over 180/120 mm of Hg. This causes visual problems, headache, nausea, vomiting, restlessness and confusion. It can lead to seizures and coma. Malignant hypertension can cause acute kidney injury and acute injury to the retina.

What is hypertensive urgency?

If the diastolic pressure is about 120 mm Hg the blood pressure should be brought down immediately to avoid an organ damage.

What is the cause of essential or primary hypertension?

Genetic factors are involved in about one third of people. If one or both parents are hypertensive then the individual has twice the risk. There are other operating mechanisms also.

What are the risk factors?

Excess salt intake, alcohol intake, obesity, physical inactivity, dyslipidemia, vitamin D deficiency, personality problems like hostility or depression.

What are the disorders that cause secondary hypertension?

These include kidney disease, oral contraceptives, anti-inflammatory drugs, antidepressants, pheochromocytoma, endocrine disorders, sleep apnea, coarctation of aorta in children.

What are the complications?

Hypertension is a major risk factor for premature heart disease, heart failure, thickening of the left ventricle, ventricular arrhythmias, death following myocardial infarction, sudden cardiac death, stroke, intracerebral hemorrhage, chronic kidney disease and renal failure, retinal hemorrhages.

What is the treatment?

Drug therapy significantly decreases the incidence of heart failure, heart attacks, stroke, retinal hemorrhages, and kidney failure. Treatment should be started if the 24-hour ambulatory monitoring reveals elevated blood pressure readings in the morning and evening daily for seven days. If the blood pressure is persistently elevated at six doctor visits then antihypertensive therapy should be started.

What are the other measures to be taken?

Salt intake should be reduced. In obese individuals weight-loss will bring the blood pressure down. The DASH diet with increased intake of fruits and vegetables and low-fat dairy products will also help. Regular aerobic exercise will keep the blood pressure down. Alcohol intake should be reduced or eliminated. Blood level of vitamin D should be checked and if low, vitamin D supplementation will be needed. Lifestyle modification will also reduce blood pressure. Meditation has been shown to decrease blood pressure. Increased potassium in the diet can reduce blood pressure and examples of food items rich in potassium include lima beans, papaya, cantaloupe, banana, mango, tomato, artichoke, oat bran and cucumber.

Every family should have a sphygmomanometer at home. There are very small blood pressure wrist units available in the drug stores and online stores that cost around \$40. Screening and treatment of hypertension will prevent many other disorders and prolong life. If you have a positive family history, start checking your BP!

Source: Grandhe.org

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