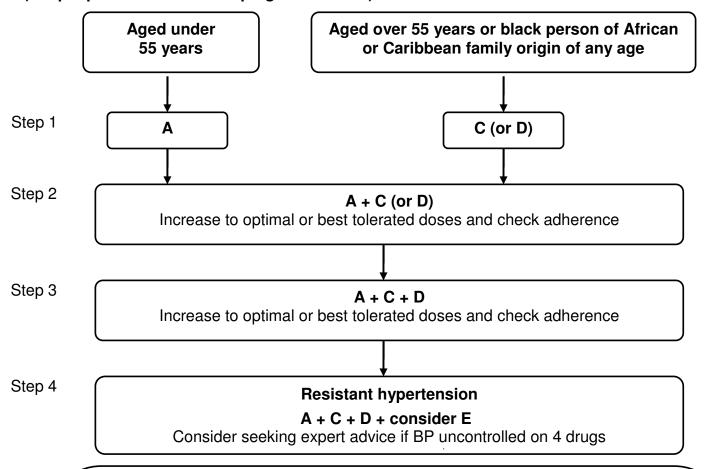
Summary of adult antihypertensive drug treatment (not people with diabetes or pregnant women)





Key – Drug Therapy

- A ACE inhibitor (**lisinopril or ramipril**) OR
 If ACE inhibitor not tolerated or contraindicated low cost angiotensin II receptor blocker (**losartan**).
- C Calcium-channel blocker (amlodipine).
- D Thiazide-like diuretic (indapamide as 2.5mg standard tablet if not tolerated consider bendroflumethiazide 2.5mg)
- (or D) consider a thiazide-like diuretic if a calcium-channel blocker is not tolerated or the person has oedema, evidence of heart failure or a high risk of heart failure.
- **A + C** consider a low cost angiotensin II receptor blocker (**losartan**) in preference to an ACE inhibitor in combination with a calcium-channel blocker in black people of African or Caribbean family origin.
- E Blood potassium ≤4.5 mmol/L consider **spironolactone 25mg daily** (unlicensed).
 - Blood potassium >4.5 mmol/L consider higher dose thiazide.

OR if further diuretic therapy is not tolerated or is contraindicated or ineffective:

- Alpha-blocker (eg doxazosin standard tablets) OR
- Beta-blocker (eg atenolol).
- Do <u>NOT</u> switch patients stable and well controlled on bendroflumethiazide or hydrochlorothiazide to alternative treatments.
- Indapamide MR is <u>NOT</u> recommended for prescribing.
- ACE inhibitors and angiotensin II receptor blockers should NOT be used in combination.
- Aliskiren is **NOT** recommended for prescribing.

Blood pressure targets

Clinic blood pressure

People aged under 80 years: lower than 140/90 mmHg
 People aged over 80 years: lower than 150/90 mmHg

<u>Daytime home readings (or ABPM)</u> – where white coat hypertension (>20/10 mmHg difference between clinic & home)

People aged under 80 years:People aged over 80 years:

lower than 135/85 mmHg lower than 145/85 mmHg

Diagnosis and Care Pathway for Hypertension (from NICE Guideline)

