Focus on the ABCS BLOOD PRESSURE

The Take Home Message:
The “Silent Killer” affects nearly 35 percent of Delawareans. While the guidelines may quibble over exact goals, we know we can do better helping our patients manage their hypertension. Get them to their goals, encourage treatment when needed, and encourage lifestyle modifications to support a heart healthy life!

GET THE PATIENT TO THE RIGHT GOALS

Although there was no actual “JNC8” in December 2013, there were updated guidelines published in the Journal of the American Medical Association. These guidelines did have some significant changes from JNC7, most notable for the relaxing of some goals using age and co-morbidity cut-offs:

- **For younger patients (age <60)**, drug therapy should be considered for diastolic BP ≥90 mm Hg or systolic BP ≥140 mm Hg. The goal is <140/90 mm Hg.

- **For older patients (age ≥60)**, drug therapy should be considered for diastolic BP ≥90 mm Hg or systolic BP ≥150 mm Hg. The goal is <150/90 mm Hg.

- **For patients with diabetes and for patients with chronic kidney disease**, the threshold to initiate drug therapy is 140/90 mm Hg. The goal is <140/90 mm Hg.

Empower patients with their personal blood pressure goal and encourage home blood pressure monitoring. Emphasize the importance of taking their blood pressure medications regularly.

CUSTOMIZE INITIAL THERAPY BASED ON RACE AND ETHNICITY
(Regardless of diabetes)

<table>
<thead>
<tr>
<th>General Non-Black Population</th>
<th>General Black Population</th>
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<tbody>
<tr>
<td>Thiazide-type diuretic;</td>
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<tr>
<td>Calcium channel blocker (CCB);</td>
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<tr>
<td>Angiotensin-converting enzyme inhibitor (ACEI); or,</td>
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<tr>
<td>Angiotensin receptor blocker (ARB)</td>
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</tbody>
</table>

⇒ MODERATE RECOMMENDATION - GRADE B
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⇒ With diabetes:
⇒ WEAK RECOMMENDATION - GRADE C

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