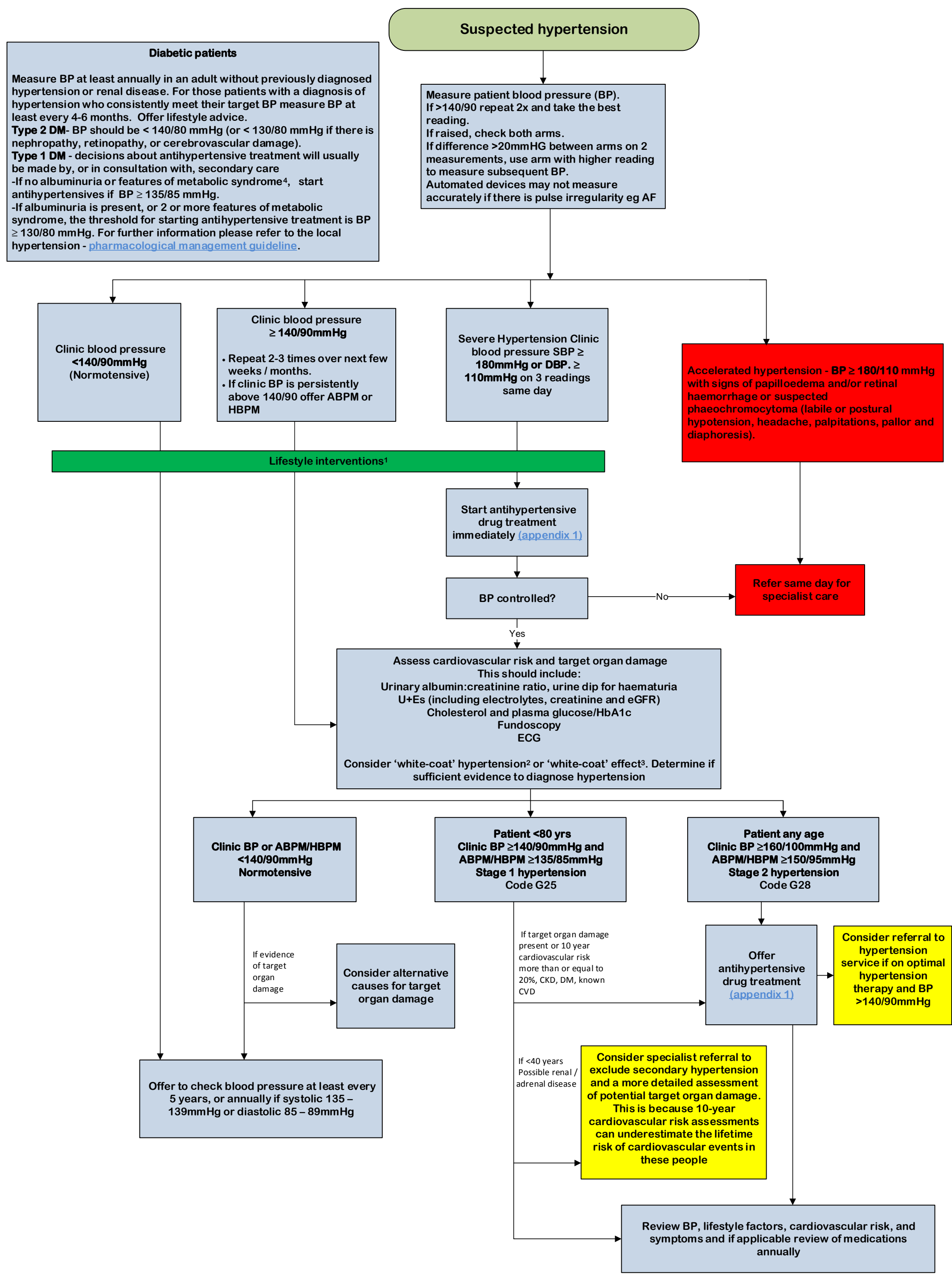


Hypertension Pathway

This pathway has been developed from published guidance, in collaboration with local cardiologists.

This guidance is to assist GPs in decision making and is not intended to replace clinical judgment.



Key

2. White Coat Hypertension in patients whose HBPM or ABPM is <135/85mmHg with no sign of target organ damage and who anticipate increased clinic BP due to anxiety

3. White coat effect where clinic BP is disproportionately higher than HBPM or ABPM averages

4 Features of metabolic syndrome include:

- Increased waist circumference.
 - This is ethnicity specific, e.g.
 - ≥ 94 cm in Caucasian men and
 - ≥ 90 cm in South Asian men.
 - If BMI > 30 kg/m², central obesity can be assumed, and waist circumference does not need to be measured.
- Raised triglycerides (or on Rx for this lipid abnormality).
- Reduced HDL-cholesterol (or on Rx for this lipid abnormality).
- Raised blood pressure (or on RX for previously diagnosed hypertension).
- Raised blood glucose.

[Patient information leaflet](#)

1 Offer:

- Lifestyle interventions (healthy diet, regular exercise, relaxation therapies, avoid excessive alcohol or caffeine, reduce dietary sodium, stop smoking.)
- Patient education and interventions to support adherence to treatment

Inform patient of the need to inform the DVLA if they hold a licence for driving a bus, coach or lorry. Form available at the following [link](#). The DVLA do not need to be informed if the patient holds a car or motorcycle licence.

References
<https://www.nice.org.uk/guidance/cg127>

<https://cks.nice.org.uk/diabetes-type-2>

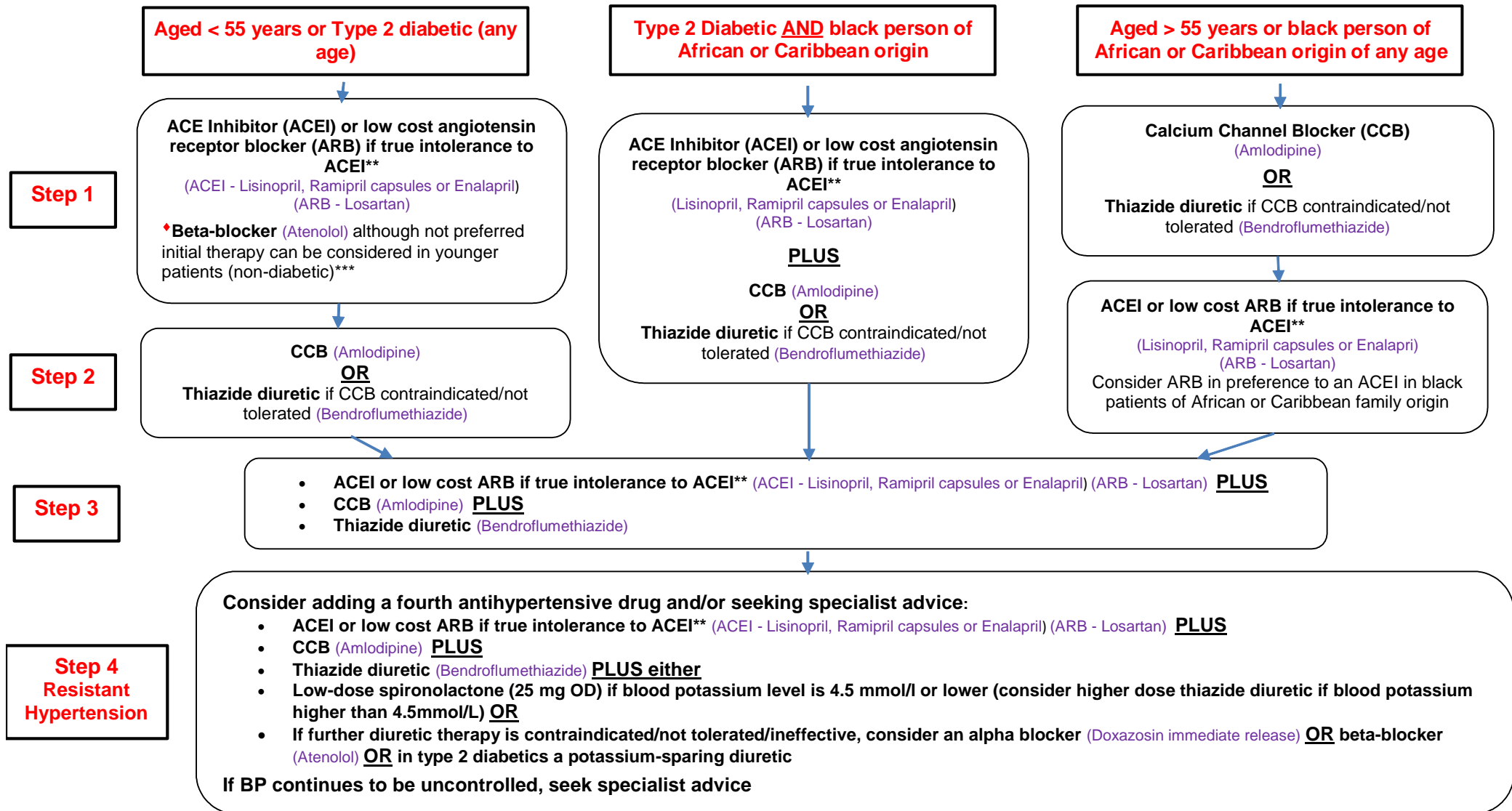
<https://cks.nice.org.uk/diabetes-type-1>

Comments & enquiries relating to medication:
 CCCG Medicines Management Team mmt.camdenccg@nhs.net
 Refer to current BNF or SPC for full medicines information

Clinical Contact for pathway queries: Camden.pathways@nhs.net

Pathway created by NCL
 Approved by Clinical Cabinet
 November 2017
 Review due November 2020

Antihypertensive drug treatment flowchart*



* Adapted from Barnsley CCG 'Choosing drugs to lower blood pressure and reduce cardiovascular risk' August 2012.¹¹

** If an ACE inhibitor is prescribed and not tolerated e.g. due to an intolerable cough, a low cost ARB can be offered as an alternative.

*** Younger patients include; those with an intolerance or contraindication to ACEIs or ARBs, women of child-bearing potential or those with evidence of increased sympathetic drive.