Hypertension Protocol

Measure blood pressure of all adults over 18 years.

If patient is ≥ 80 years old, please refer to Protocol 2.

High BP: SBP ≥ 140 or DBP ≥ 90 mmHg

If BP is high:
Prescribe losartan 50 mg + amlodipine 5 mg*.

After 30 days, measure BP again. If still high:
Increase to losartan 100 mg + amlodipine 10mg

After 30 days, measure BP again. If still high:
Increase to losartan 100 mg + amlodipine 10mg + hydrochlorothiazide 25 mg

After 30 days, measure BP again. If still high:
Increase to losartan 100 mg + amlodipine 10mg + hydrochlorothiazide 50 mg

After 30 days, measure BP again. If still high:
Refer to hypertension specialist

Pregnant women and women who may become pregnant

⚠️ DO NOT give telmisartan

- Statins, ACE inhibitors, angiotensin receptor blockers (ARBs), and thiazide/thiazide-like diuretics should not be given to pregnant women or to women of childbearing age not on effective contraception.
- Calcium channel blocker (CCB) can be used. If not controlled with intensification dose, refer to a specialist.

Patients with diabetes

- Treat diabetes according to protocol.
- Target BP <130/90 mmHg.
- ACEi or ARB preferred if close clinical and biochemical monitoring possible.

Heart attack in last 3 years

- Add beta blocker to amlodipine with initial treatment.
- Target BP <130/90 mmHg.

Heart attack or stroke, ever

- Begin low-dose aspirin (75mg) and statin.
- Target BP <130/90 mmHg.

People with high CVD risk

- Consider aspirin and statin.
- Target BP <130/90 mmHg.

Chronic kidney disease

- ACEi or ARB preferred if close clinical and biochemical monitoring is possible.
- Target BP <130/90 mmHg.

Note:

- Monitor potassium and kidney function when starting or changing the dose of ACEi/ARB or thiazide/thiazide-like diuretic, if testing is readily available and does not delay treatment.

* For elderly patients, please refer to treatment protocol for elderly patients ≥ 80 years of age.

** The medications mentioned can be replaced with any two medications from any of the three drug classes (ACEis/ARBs, CCBs or thiazide/thiazide-like diuretics). Start two individual pills or, if available, both in a single-pill combination (fixed-dose combination).

Lifestyle advice for all patients

- Eat 5 servings of fruits and vegetables per day.
- Avoid papads, chips, chutneys, dips, and pickles.
- Use healthy oils like sunflower, mustard, or groundnut.
- Limit consumption of foods containing high amounts of saturated fats.
- Reduce fat intake by changing how you cook:
  - Remove the fatty part of meat
  - Use vegetable oil
  - Boil, steam, or bake instead of fry
  - Limit reuse of oil for frying
- Avoid processed foods containing trans fats.
- Avoid added sugar.

Avoid tobacco and alcohol
Exercise 2.5 hours/week
Reduce weight, if overweight
Reduce salt, under 1 tsp/day
Eat less fried foods