Measure blood pressure (BP) of all adult patients



#### If BP $\geq$ 140 or $\geq$ 90<sup>1</sup>

Start amlodipine 5 mg<sup>2</sup> once daily + statin in eligible patients



### Review after 1-4 weeks, if BP still high

Increase to amlodipine 10 mg<sup>2</sup> once daily



#### Review after 1-4 weeks, if BP still high

Add losartan 50 mg Continue amlodipine 10 mg once daily



#### Review after 1-4 weeks, if BP still high

Add hydrochlorothiazide 12.5mg Continue amlodipine 10mg and losartan 50mg once daily



### Review after 4 weeks, if BP still high

Check that patient has been taking drugs regularly and correctly. If this is the case, refer patient to a specialist.

1 If ≥160/100, start same day and consider initiating 10 mg of amlodipine daily. If SBP 140–159 or DBP 90–99, check on a different day and if still elevated, start.

2 Elderly, fragile patients should be started on 2.5 mg per day.

# **Provision for Special Populations**

# Pregnant women and women who may become pregnant

**DO NOT GIVE** losartan or hydrochlorothiazide to pregnant women nor to women of childbearing age who are not on effective contraception.

#### **Diabetic patients**

Treat according to protocol including statin for all patients with both diabetes and hypertension.

Heart attack in past 3 years Add beta blocker to amlodipine with initial treatment.

**Heart attack or stroke, ever** Begin low-dose aspirin (75 mg) and statin.

**Chronic kidney disease with heavy proteinuria** ACE inhibitor or ARB preferred if close clinical and biochemical monitoring is possible.

#### Statin recommendation

Start atorvastatin 20 mg for HTN plus:

- Diabetes—age 40 or older
- Smoker—age 50 or older
- All—age 60 or older
- Any age with previous heart attack, stroke, total cholesterol ≥ 8mmol/L or LDL cholesterol ≥ 5 mmol/L

#### Advice for lifestyle modification for all patients



Stop all tobacco use, avoid second-hand tobacco smoke, and avoid unhealthy alcohol intake.



Increase physical activity to equivalent of brisk walk 150 minutes per week.

If overweight, lose weight.

Eat 5 servings of fruits and vegetables per day.

Eat nuts, legumes, whole grains and foods rich in potassium.

Eat fish at least twice per week.

Use healthy oils like

Eat a low salt

diet (under

1tsp/day)

sunflower, flax seed, soybean, peanut and olive.

Limit red meat to once or twice per week.

Avoid added sugar.

Limit consumption of fried foods and foods with high amounts of saturated fats.

Measure blood pressure (BP) of all adult patients



### If BP $\geq$ 140 or $\geq$ 90<sup>1</sup>

Start amlodipine 5 mg<sup>2</sup> once daily + statin in eligible patients



### Review after 1-4 weeks, if BP still high

Increase to amlodipine 10 mg<sup>2</sup> once daily



#### Review after 1-4 weeks, if BP still high

Add losartan 50 mg Continue amlodipine 10 mg once daily



### Review after 1-4 weeks, if BP still high

Add hydrochlorothiazide 12.5mg Continue amlodipine 10mg and Iosartan 50mg once daily



### Review after 4 weeks, if BP still high

Check that patient has been taking drugs regularly and correctly. If this is the case, refer patient to a specialist.

# 1 If ≥160/100, start same day and consider initiating 10 mg of amlodipine daily. If SBP 140–159 or DBP 90–99, check on a different day and if still elevated, start.

#### 2 Elderly, fragile patients should be started on 2.5 mg per day.

## **Provision for Special Populations**

# Pregnant women and women who may become pregnant

**DO NOT GIVE** losartan or hydrochlorothiazide to pregnant women nor to women of childbearing age who are not on effective contraception.

#### **Diabetic patients**

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**Heart attack in past 3 years** Add beta blocker to amlodipine with initial treatment.

**Heart attack or stroke, ever** Begin low-dose aspirin (75 mg) and statin.

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#### Statin recommendation Start atorvastatin 20 mg for HTN plus:

- Diabetes—age 40 or older
- Any age with previous heart attack, stroke, total cholesterol ≥ 8mmol/L or LDL cholesterol ≥ 5 mmol/L

#### Advice for lifestyle modification for all patients



Stop all tobacco use, avoid second-hand tobacco smoke, and avoid unhealthy alcohol intake.

Increase physical activity to equivalent of brisk walk 150

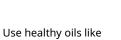
minutes per week.

If overweight, lose weight.

Eat 5 servings of fruits and vegetables per day.

Eat nuts, legumes, whole grains and foods rich in potassium.

Eat fish at least twice per week.



Eat a low salt

diet (under

1tsp/day)

soybean, peanut and olive.

Limit red meat to once or twice per week.

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Limit consumption of fried foods and foods with high amounts of saturated fats.

Measure blood pressure (BP) of all adult patients



## If BP $\geq$ 140 or $\geq$ 90<sup>1</sup>

Start amlodipine 5 mg<sup>2</sup> once daily + statin in eligible patients

Step 2

## Review after 1-4 weeks, if BP still high

Increase to amlodipine 10 mg<sup>2</sup> once daily



Step

#### Review after 1-4 weeks, if BP still high

Add telmisartan 40 mg Continue amlodipine 10 mg once daily

#### Review after 1-4 weeks, if BP still high

Add hydrochlorothiazide 12.5mg Continue amlodipine 10mg and telmisartan 40mg once daily



#### Review after 4 weeks, if BP still high

Check that patient has been taking drugs regularly and correctly. If this is the case, refer patient to a specialist.

2 Elderly, fragile patients should be started on 2.5 mg per day.

# **Provision for Special Populations**

#### Pregnant women and women who may become pregnant

DO NOT GIVE losartan or hydrochlorothiazide to pregnant women nor to women of childbearing age who are not on effective contraception.

#### **Diabetic patients**

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# Statin recommendation

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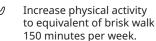
## Advice for lifestyle modification for all patients



Stop all tobacco use, avoid second-hand tobacco smoke, and avoid unhealthy alcohol intake.



Increase physical activity



If overweight, lose weight. Eat 5 servings of fruits and vegetables per day.

Eat nuts, legumes, whole grains and foods rich in potassium.

Eat fish at least twice per week.

Use healthy oils like sunflower, flax seed,

Eat a low salt diet

(under 1tsp/day)

soybean, peanut and olive. Limit red meat to once

or twice per week.

Avoid added sugar.

Limit consumption of fried foods and foods with high amounts of saturated fats.

<sup>1</sup> If  $\geq$ 160/100, start same day and consider initiating 10 mg of amlodipine daily. If SBP 140-159 or DBP 90-99, check on a different day and if still elevated, start.

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Start amlodipine 5 mg<sup>2</sup> once daily + statin in eligible patients



### Review after 1-4 weeks, if BP still high

Increase to amlodipine 10 mg<sup>2</sup> once daily



#### Review after 1-4 weeks, if BP still high

Add telmisartan 40 mg Continue amlodipine 10 mg once daily



## Review after 1-4 weeks, if BP still high

Add hydrochlorothiazide 12.5mg Continue amlodipine 10mg and telmisartan 40mg once daily



#### Review after 4 weeks, if BP still high

Check that patient has been taking drugs regularly and correctly. If this is the case, refer patient to a specialist.

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Start atorvastatin 20 mg for HTN plus:

- Diabetes—age 40 or older
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#### Advice for lifestyle modification for all patients



Stop all tobacco use, avoid second-hand tobacco smoke, and avoid unhealthy alcohol intake.

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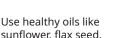
Increase physical activity to equivalent of brisk walk 150 minutes per week.

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Eat 5 servings of fruits and vegetables per day.

Eat nuts, legumes, whole grains and foods rich in potassium.

Eat fish at least twice per week.



Eat a low salt

day)

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sunflower, flax seed, soybean, peanut and olive.

Limit red meat to once or twice per week.

Avoid added sugar.

Limit consumption of fried foods and foods with high amounts of saturated fats.