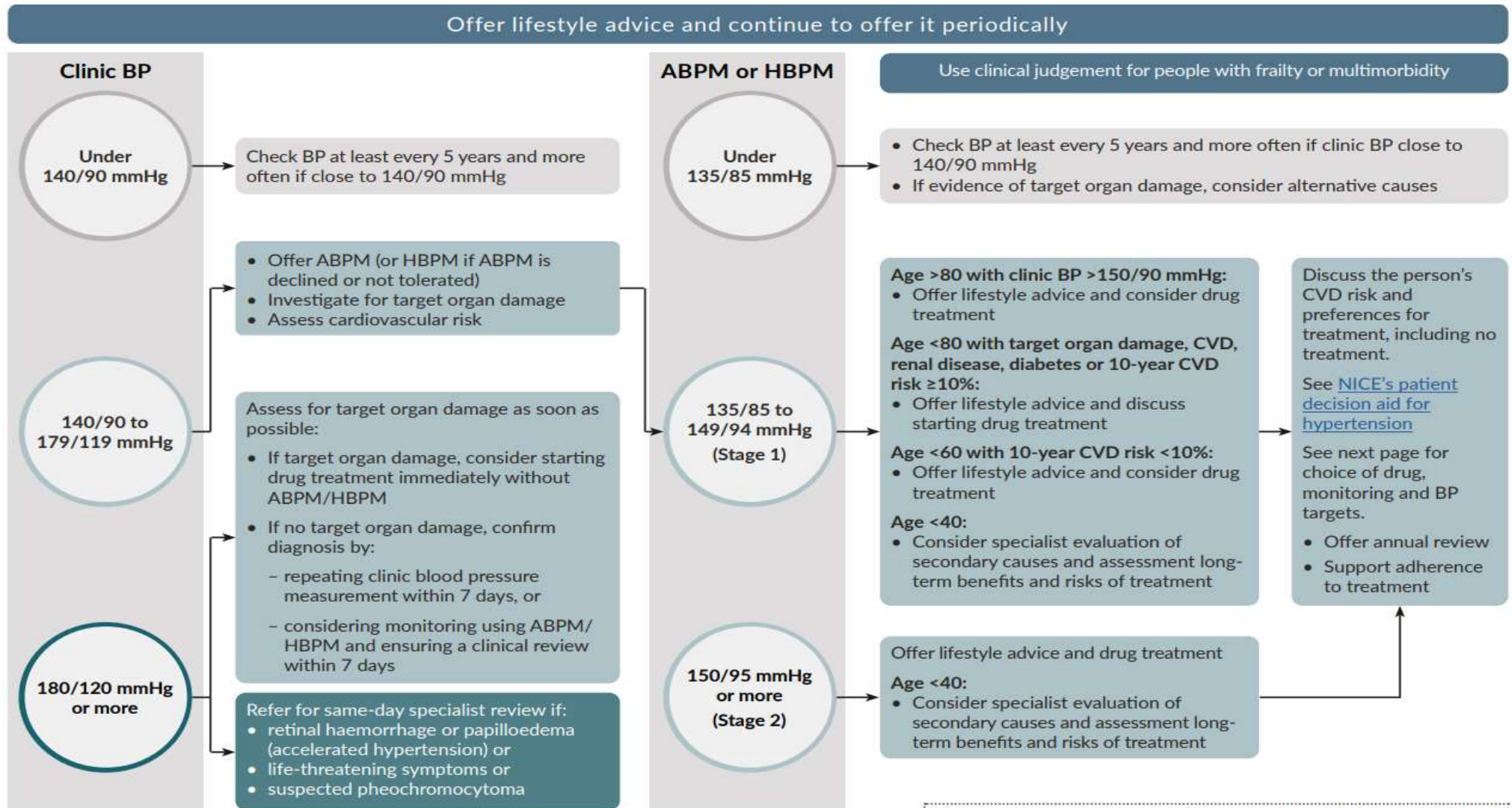


Hypertension guidelines in adults

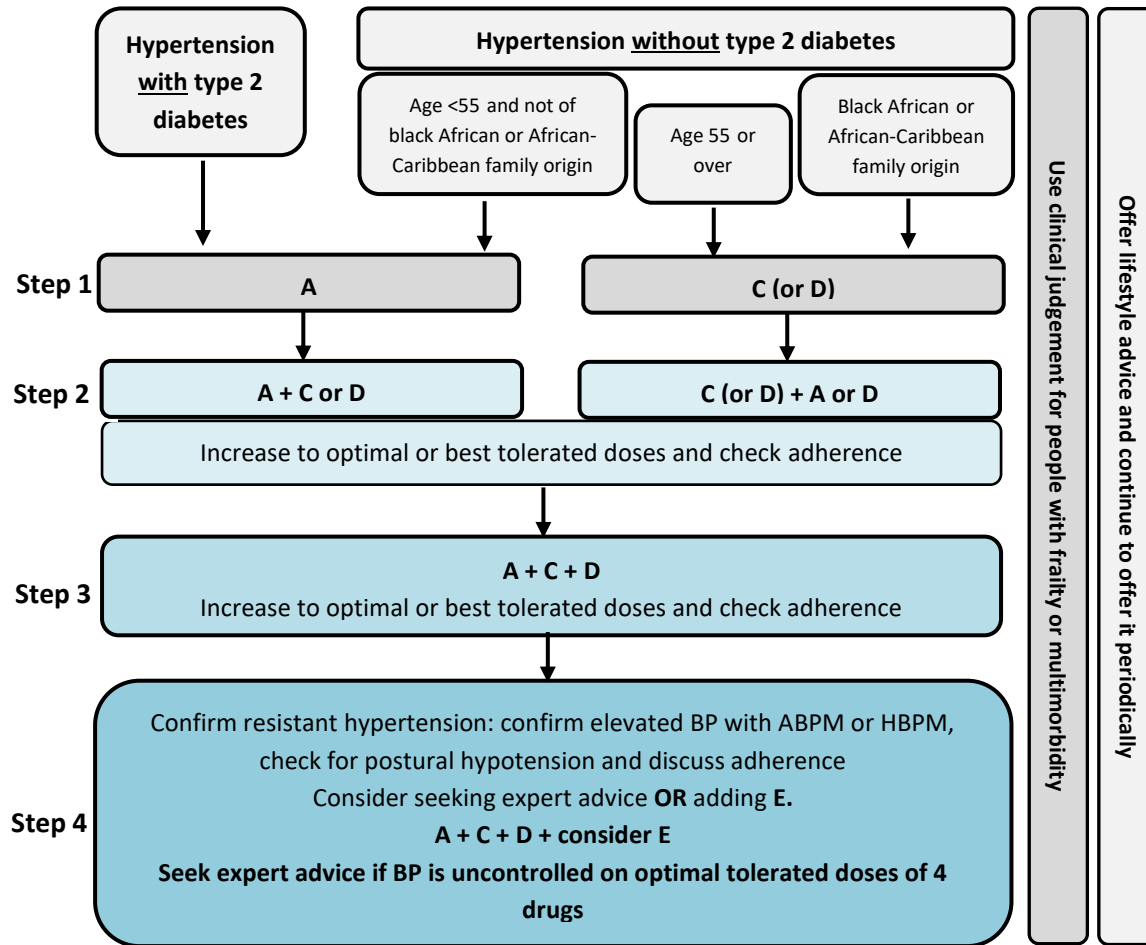
Hypertension in adults: diagnosis and treatment summary (from NICE Guideline 136)



Abbreviations: ABPM, ambulatory blood pressure monitoring; BP, blood pressure; CVD, cardiovascular disease; HBPM, home blood pressure monitoring.

This is a summary of the recommendations on diagnosis and treatment from NICE's guideline on hypertension in adults. See the original guidance at www.nice.org.uk/guidance/NG136

Summary of adult antihypertensive drug treatment (not for pregnant women or those with type 1 diabetes)



Key – Drug Therapy

A	ACE inhibitor (ACEi) (lisinopril or ramipril) OR low-cost angiotensin II receptor blocker (ARB) (candesartan or losartan) if ACEi is not tolerated. Consider an ARB, in preference to an ACE inhibitor in adults of African and Caribbean family origin.
C	Calcium-channel blocker (amlodipine). If significant ankle oedema with amlodipine, consider a different drug class such as a 3rd generation dihydropyridine CCB (e.g. lercanidipine/lacidipine); diltiazem, if rate-limiting CCB appropriate
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, e.g. because of oedema, or there is evidence of heart failure
E	Blood potassium ≤4.5 mmol/L: - consider spironolactone 25mg daily (unlicensed) - caution in those with reduced eGFR due to hyperkalaemia risk. Blood potassium >4.5 mmol/L: - consider Alpha-blocker (doxazosin standard tablets) OR - Beta-blocker (atenolol or bisoprolol)

- Monitoring treatment**
- Use clinic BP to monitor treatment.
 - Measure standing & sitting BP in people with type 2 diabetes or, symptoms of postural hypotension (base target BP on standing BP), or aged 80 and over.
 - Advise people who want to self-monitor to use HBPM. Provide training and advice. Please see - [NHS pressure@home scheme](#)
 - Consider ABPM or HBPM, in addition to clinic BP, for people with white-coat effect or masked hypertension.

Notes

- Do **NOT** switch patients stable and controlled on bendroflumethiazide/ hydrochlorothiazide to alternatives.
- ACE inhibitors and angiotensin II receptor blockers should **NOT** be used in combination.
- Indapamide MR, doxazosin MR, aliskiren and perindopril arginine are **NOT** recommended for prescribing.
- See [NICE's patient decision aid information](#).
- For people with CVD follow the recommendations in the NICE guideline relevant to their condition. If their blood pressure remains uncontrolled, offer antihypertensive drug treatment in line with the recommendations in this guidance.
- See [chronic kidney disease \(NG203\)](#) and [chronic heart failure \(NG106\)](#) guidelines for people with CKD and HF.

Abbreviations: ABPM - ambulatory blood pressure monitoring; BP- blood pressure, HBPM- home blood pressure monitoring, CVD - cardiovascular disease, CKD – chronic kidney disease

Blood pressure targets

Age <80 years	Age ≥80 years
• Clinic BP: < 140/90 mmHg	• Clinic BP: < 150/90 mmHg
• ABPM/HBPM: < 135/85 mmHg	• ABPM/HBPM < 145/85 mmHg

Postural hypotension - Base target on standing BP
Frailty or multimorbidity - Use clinical judgement
CKD - See [NICE's guideline on chronic kidney disease](#)

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