

Treatment Protocol for Hypertension

State NCD Division
Government of Kerala

Screen all individuals of age above 30 years

- Assess habits – Tobacco use, Alcohol use, Diet and Exercise
- Check BP, height, weight and calculate BMI

BMI
18.5-22.9: Normal
23.0-24.9: Overweight
>25.0: Obese

Co morbidity
Diabetes Mellitus
Renal disease
Heart disease

Check serum cholesterol & consider Statins if Total Cholesterol > 200 mg%

LSM
Life Style Modification

- Restrict extra salt at table
- Restrict salty food (pickles, pappad, dried fish)
- Restrict fatty and fried foods
- Increase fibre rich food (leafy vegetables)
- Brisk walking for 20 – 30 min
 - 5 to 6 days a week
 - 5 minutes warm up
 - 5 minutes cool down
- Avoid tobacco use

Normal: < 120 systolic and 80 diastolic
Follow up every 3 years

Pre Hypertension: 120-139 systolic and 80-89 diastolic. LSM and Follow up every 1 – 2 years

Hypertension stage 1:
140-159 systolic and 90-99 diastolic
Advise LSM.

If co morbidity¹ present
start drugs directly

If no co morbidity
wait for 3 months

Hypertension stage 2:
160-179 systolic and 100-109 diastolic.
LSM and drugs

If not under control
start drugs

If under control do
monthly follow up

Amlodipine 2.5 mg to 5 mg or
Enalapril / Lisinopril 2.5 -10 mg (preferred
if DM and serum creatinine <1.5 mg)

Hypertension stage 3:
180 or more systolic and 110 or more diastolic
Amlodipine 5 mg and refer

If not under control
Combine Amlodipine and
Enalapril / Lisinopril ((if serum
creatinine <1.5 mg)

If under control do
monthly follow up

If not under control add
Chlorthalidone 6.25-25 mg or
Hydrochlorothiazide 12.5-50 mg
(May avoid Thiazide in DM)

If under control do
monthly follow up

If not under control add
Losartan 25-50 mg or
refer to Hospital / Physician

If under control do
monthly follow up