

Treatment:

In addition to a change of lifestyle that focuses on a healthy low-salt, low-fat diet and plenty of exercise, there are many medications for lowering blood pressure. Discuss the issue with your health care provider- there are many medications to choose from! These include diuretics (“water pills”), anti-adrenergics, direct-acting vasodilators, calcium-channel blockers, angiotensin-converting-enzyme (ACE) inhibitors, and angiotensin II receptor blockers. In addition, researchers are testing two potent new classes, endothelin receptor antagonists and vasopeptidase inhibitors.



Resources

- www.pdrhealth.com
- <http://www.medicinenet.com>
- <http://www.kidshealth.org>
- <http://www.everydayhealth.com/heart-disease/blood-pressure/index.aspx>

Local Resources:

- **Eastside Nephrology & Hypertension**
11711 NE 12th, Bellevue
(425) 990 – 8866
- **Eastside Nephrology & Hypertension**
12911 120th Ave NE, Kirkland
425) 899-5111
- **University of Washington Medical Center**
(206) 548 - 4070

Al-Shifa Clinic

Email: alshifa@u.washington.edu
Website: <http://students.washington.edu/alshifa>

Hypertension

High-Blood Pressure



What is hypertension?

Hypertension is another name for high blood pressure. When blood travels from the heart to the rest of the body, it goes through arteries. In the case of hypertension, the blood presses against the artery wall more forcefully than normal. This is usually because the arteries are too stiff or clogged with cholesterol. As a result, the heart has to work harder in order to pump the blood through. If left untreated, hypertension can increase your risk of developing heart disease, stroke, congestive heart failure, kidney damage or kidney failure, dementia, and blindness.

Hypertension can be measured using a blood pressure cuff. The average measurement is about 120/80, “one-twenty over eighty”. The top number (systolic) is the pressure when the heart is pumping and the bottom number (diastolic) is when the heart is at rest. If your systole number is over 140 and diastole number is over 90, you probably have hypertension.

Who is at risk?

- **Hereditary:** people whose parents also had or have high blood pressure.
- **Race:** people of African-American descent are more likely to have hypertension than their Caucasian counterparts.

- **Gender:** men are more likely to develop hypertension than women do. However, postmenopausal women and women who are 20 or more pounds overweight are also at increased risk.
- **Age:** as we get older, our risk increases.
- **Obesity:** overweight people are more likely than others to develop high blood pressure.
- **Heavy alcohol consumption**
- **Diabetes**
- **Use of oral contraceptives**
- **Sedentary or inactive lifestyle**

Symptoms:

Hypertension is often referred to as a “silent killer” because it often shows no symptoms. Experts estimated that up to 1/3 of the people who have hypertension do not know they have it. However, there are some more serious symptoms of hypertension that a physician should be told about. These include:

- headache, ringing in the ears
- confusion and anxiety
- drowsiness
- fatigue, nausea
- decrease in urinary output
- vomiting
- blurred vision*
- chest pain*
- shortness of breath*
- weakness or numbness in arms, legs, or other areas*

** tell your doctor about these right away*

Diagnosis:

If you have blood pressure readings of over 140/90 on three consecutive visits to a health care provider over several months, you will likely be diagnosed with hypertension. A single above-normal reading is not enough to diagnose hypertension. Multiple readings are required to confirm the diagnosis because blood pressure varies throughout the day, and can be influenced by medication, stress, and other factors.

Prevention:

- Cut down on alcohol, salt and caffeine consumption
- Stop smoking
- Lose weight if overweight
- Be active, especially aerobic activity
- Eat a healthy diet that include a lot of fruit and vegetables
- Reduce stress
- Check your blood pressure regularly and keep track of it

