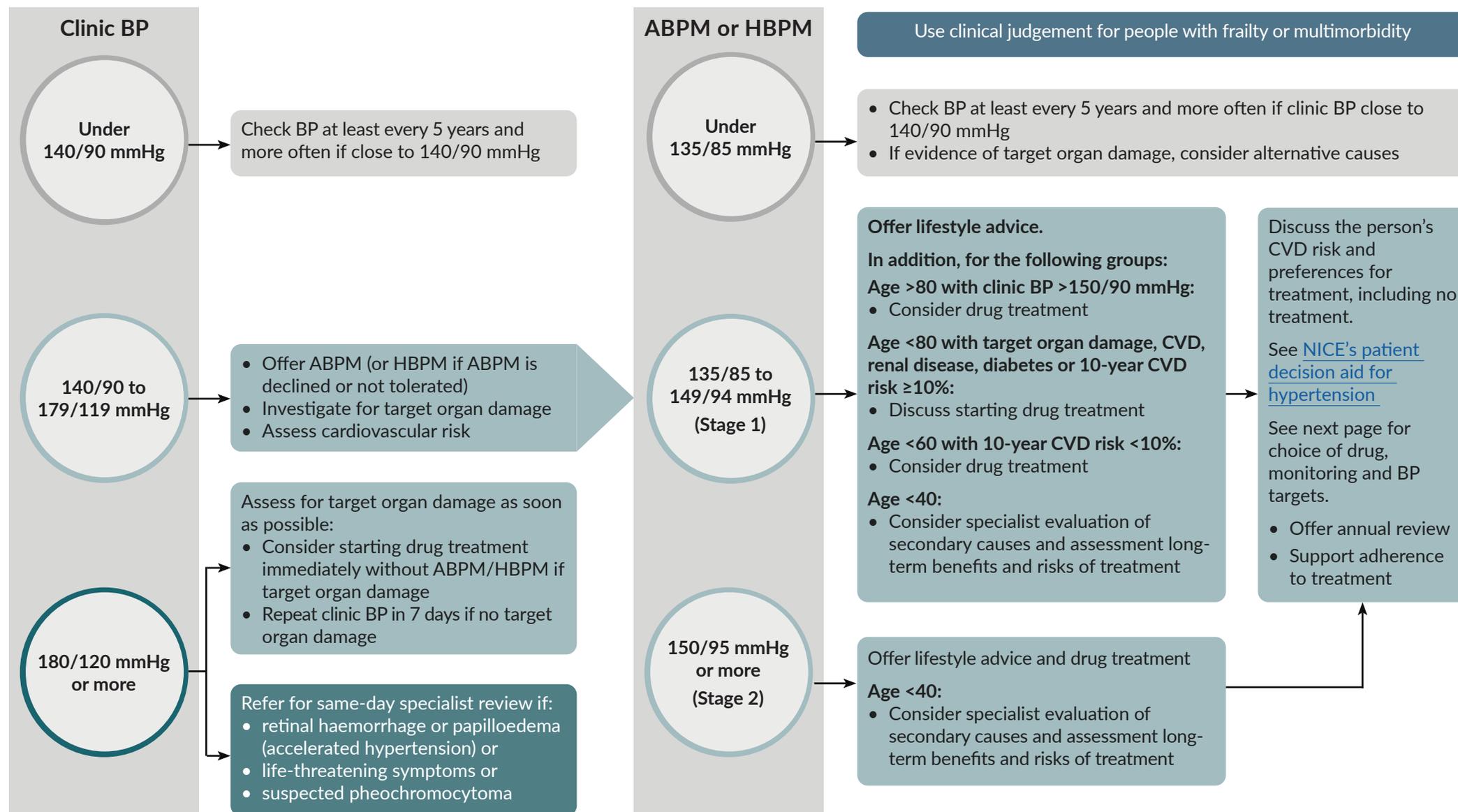
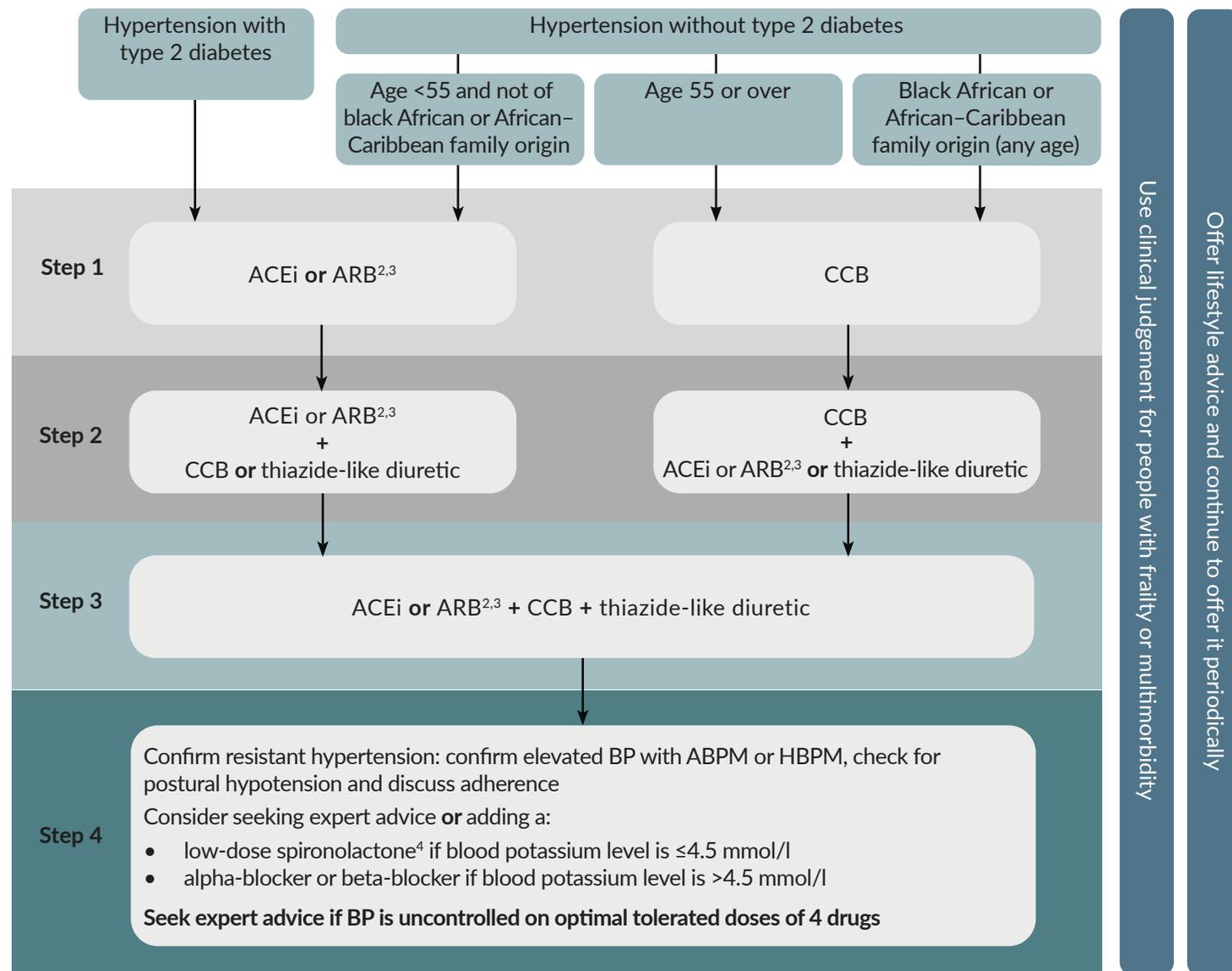


Offer lifestyle advice and continue to offer it periodically



# Choice of antihypertensive drug<sup>1</sup>, monitoring treatment and BP targets



## Monitoring treatment

Use clinic BP to monitor treatment.

Measure standing and sitting BP in people with:

- type 2 diabetes or
- symptoms of postural hypotension or
- aged 80 and over.

Advise people who want to self-monitor to use HBPM. Provide training and advice.

Consider ABPM or HBPM, in addition to clinic BP, for people with white-coat effect or masked hypertension.

## BP targets

Reduce and maintain BP to the following targets:

### Age <80 years:

- Clinic BP <140/90 mmHg
- ABPM/HBPM <135/85 mmHg

### Age $\geq 80$ years:

- Clinic BP <150/90 mmHg
- ABPM/HBPM <145/85 mmHg

### Postural hypotension:

- Base target on standing BP

### Frailty or multimorbidity:

- Use clinical judgement

<sup>1</sup>For women considering pregnancy or who are pregnant or breastfeeding, see NICE's guideline on [hypertension in pregnancy](#). For people with chronic kidney disease, see NICE's guideline on [chronic kidney disease](#). For people with heart failure, see NICE's guideline on [chronic heart failure](#)

<sup>2</sup>See MHRA drug safety updates on [ACE inhibitors and angiotensin-II receptor antagonists: not for use in pregnancy](#), which states 'Use in women who are planning pregnancy should be avoided unless absolutely necessary, in which case the potential risks and benefits should be discussed', [ACE inhibitors and angiotensin II receptor antagonists: use during breastfeeding](#) and [clarification: ACE inhibitors and angiotensin II receptor antagonists](#). See also NICE's guideline on [hypertension in pregnancy](#).

<sup>3</sup>Consider an ARB, in preference to an ACE inhibitor in adults of African and Caribbean family origin.

<sup>4</sup>At the time of publication (August 2019), not all preparations of spironolactone have a UK marketing authorisation for this indication.