

Letter to the Editor: The Pundit Speaks

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“Blood Pressure Guidelines Make Almost Half of Americans Hypertensive”

New guidelines on blood pressure mean millions of Americans are considered hypertensive, which may require treatment. Millions more people need to make lifestyle changes, or start taking medication, to avoid cardiovascular problems, such as heart attacks and strokes. Americans with blood pressure of 130/80 mm Hg or higher should be treated, down from the previous trigger of 140/90 mm Hg, according to new guidelines announced at the annual 2017 meeting of the American Heart Association (AHA). These guidelines are also endorsed by the American College of Cardiology and 11 other organizations. At the new cutoff, around 46%, or more than 103 million, of American adults are now considered to have high blood pressure, compared with an estimated 72 million under the previous guidelines in place since 2003. High blood pressure accounts for the second-largest number of preventable heart disease and stroke deaths in the United States, second only to smoking. Potentially deadly high blood pressure can be brought under control with a wide array of medications, many sold as relatively inexpensive generics. The drug classes include angiotensin-receptor blockers, such as Novartis AG's Diovan; calcium-channel blockers, like Pfizer's Norvasc; ACE inhibitors, including Pfizer's Altace; and diuretics, such as Merck & Co Inc's Hyzaar. But the drugs have side effects and the new guidelines emphasize lifestyle changes including weight loss, diet, and exercise as the first tool for combating hypertension. The new guidelines also emphasize the importance of accurate blood pressure measurements, using an average of different readings at different times. According to the AHA, numerous surveys have shown that physicians and other health care providers rarely follow established guidelines for blood pressure measurement. There are 3 main reasons for this: (1) inaccuracies in the methods, some of which are avoidable; (2) the inherent variability of blood pressure; and (3) the tendency for blood pressure to increase in the presence of a physician (the so-called “white coat effect”). Also, blood pressure measurements are routinely loaded with inaccuracies and errors. The most common error is not taking readings from both arms. Body position, arm position, differences between arms, and blood pressure cuff size and placement can all affect the measurements. In December of 2011, investigators compared the blood pressure readings of 40 patients obtained by the traditional method routinely used in clinics, as well as by the AHA-recommended method. Alarming, the two measurements were different for as many as 93% of the patients.

In the America that I love, we know that inaccurate measurements will lead to inaccurate diagnoses and inappropriate or unnecessary treatments and medications. Inaccurate blood pressure measurements lead to potentially dangerous medications and tons of studies have clearly shown differences in blood pressure measurements with different techniques. Folks, be cautious.

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