

Hypertension Treatment Guideline

MVP Health Care, as part of a continuing Quality Improvement Program, has adopted the American College of Cardiology (ACC)/American Heart Association (AHA) guidelines.

Twenty-one key points from the guidelines:

<https://www.acc.org/latest-in-cardiology/ten-points-to-remember/2017/11/09/11/41/2017-guideline-for-high-blood-pressure-in-adults>.

See also:

Guideline-Based Strategies for Improving Control of High Blood Pressure: The 2019 ACC/AHA Performance and Quality Measures for Adults with High Blood Pressure

A slideshow can be found at <https://www.heart.org/-/media/files/affiliates/mwa/mo-hypertension-summit/guidelinebased-strategies-for-improving-control-of-hbp.pdf?la=en>.

Monroe County Medical Society Community-wide Guidelines Management of Adult Hypertension 2021:

[Monroe County Medical Society - Quality Collaborative Resources \(mcms.org\)](https://www.mcms.org)

For Patients: CDC recommendations:

<https://www.cdc.gov/bloodpressure/index.htm>.

Statistics – Morbidity & Mortality

- Nearly half of adults in the United States (108 million, or 45%) have hypertension defined as a systolic blood pressure ≥ 130 mm Hg or a diastolic blood pressure ≥ 80 mm Hg or are taking medication for hypertension.
- Only about 1 in 4 adults (24%) with hypertension have their condition under control.
- About half of adults (45%) with uncontrolled hypertension have a blood pressure of 140/90 mm Hg or higher. This includes 37 million U.S. adults.
- Half of adults (30 million) with blood pressure $\geq 140/90$ mm Hg who should be taking medication to control their blood pressure aren't prescribed or aren't taking medication.
- High blood pressure was a primary or contributing cause of death for more than 494,873 people in the United States in 2018. High blood pressure costs the United States about \$131 billion each year, averaged over 12 years from 2003 to 2014.

Summary of the Guidelines and Other Support for Management of Hypertension

Lifestyle modification is adequate therapy for some patients. Pharmacotherapy, when needed, may be effective, inexpensive, and readily available for most patients.

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1998, 2000, 2002, 2003, 2005, 2009, 2011, 2014, 2018, 2020, 2021, 2022

Many resources are available for health professionals to support hypertension prevention and management and educate others. To support that effort, CDC's Division for Heart Disease and Stroke Prevention has put together the following sets of educational materials for health care professionals and patients. This, as well as the DASH Diet Eating Plan Facts and other tools to assist providers with educating their patients on hypertension, are included in the Physician Quality Improvement Manual under *Cardiac Care* [Quality Programs and Initiatives | MVP Health Care](#).

This guideline is not intended to replace the role of the physician's clinical judgment in the management of medical services, it is an educational guideline provided to assist in the delivery of good medical care. All treatment decisions are ultimately based on the physician's clinical assessment and judgment. Where medication recommendations are made, please refer to each health plan's formulary for coverage considerations.

MVP updates its clinical guidelines at least every two years. The review process is also initiated when new scientific evidence or national standards are published. Practitioners are alerted via the web site, and by written notices from the plan via fax or newsletter. A print copy of the clinical guideline can be requested by calling the MVP Quality Improvement Department at 1 800-777-4793.