

# HIGHLIGHTS - 2017 HTN GUIDELINES

## New Classifications:

BP Category	SBP		DBP
Normal	<120 mm Hg	and	<80 mm Hg
Elevated	120–129 mm Hg	and	<80 mm Hg
<b>Hypertension</b>			
Stage 1	130–139 mm Hg	or	80–89 mm Hg
Stage 2	≥140 mm Hg	or	≥90 mm Hg

## New Goals:

Clinical Condition(s)	BP Threshold, mm Hg	BP Goal, mm Hg
<b>General</b>		
Clinical CVD or 10-year ASCVD risk ≥10%	≥130/80	<130/80
No clinical CVD and 10-year ASCVD risk <10%	≥140/90	<130/80
Older persons (≥65 years of age; noninstitutionalized, ambulatory, community-living adults)	≥130 (SBP)	<130 (SBP)
<b>Specific comorbidities</b>		
Diabetes mellitus	≥130/80	<130/80
Chronic kidney disease	≥130/80	<130/80
Chronic kidney disease after renal transplantation	≥130/80	<130/80
Heart failure	≥130/80	<130/80
Stable ischemic heart disease	≥130/80	<130/80
Secondary stroke prevention	≥140/90	<130/80
Secondary stroke prevention (lacunar)	≥130/80	<130/80
Peripheral arterial disease	≥130/80	<130/80

## Drug recommendations (unchanged):

**Primary agents:** Thiazide or thiazide-like diuretics, ACE inhibitors, angiotensin receptor blockers, and calcium channel blockers

**Secondary agents:** Other diuretics (loop, potassium sparing, and aldosterone antagonists), beta blockers, direct renin inhibitors, alpha blockers and agonists, and direct vasodilators

## Therapy:

Begin with lifestyle changes, add medications based on BP readings and ASCVD risk.

**Stage 1 hypertension with clinical CVD or 10-year ASCVD risk of 10% or greater:**

- Initiate one BP-lowering medication with lifestyle changes

**Stage 2 hypertension:**

- Initiate two BP-lowering medications of different classes with lifestyle changes