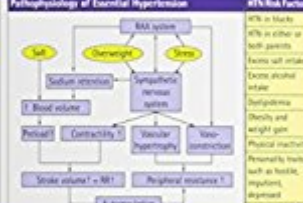


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Hypertension Pocketcard Set 2014

Hypertension pocketcard Set		
Causes of Hypertension		
Primary (essential, idiopathic) Hypertension		
No identifiable cause. 95% of hypertensive patients, often develops gradually over years.		
Secondary Hypertension^{1,2}		
Renal disease	Endocrine disease	Pharmacologic
- Polycystic kidneys - Renal parenchymal disease - Nephrotic syndrome - Renovascular disease	- Endocrine disorders - Hyperparathyroidism - Hyperthyroidism - Primary aldosteronism	- Thiazide diuretics - Calcium channel blockers - Stimulants - Oral contraceptives
Neurologic causes	Vascular disease	Other causes
- Encephalopathy - Stroke - Spontaneous intracerebral hemorrhage	- Arteriosclerosis - Arteriovenous fistula	- Neurofibromatosis - Heavy metal poisoning - Acute pain
Psychologic causes		
- Stress - Anxiety		
Pathophysiology of Essential Hypertension		
		ATN/Risk Factors
		- ATN in blacks - ATN in either or both parents - Excess salt intake - Excess alcohol intake - Obesity - Diabetes - Obesity and weight gain - Physical inactivity - Renal artery stenosis, peripheral artery disease, VLDL dyslipidemia
Goals of Treating Hypertension, JNC 8³		
Population	Goal BP, mmHg	Initial Drug Treatment Options
General <60 y	<130/80	• Thiazide-like diuretic (e.g., chlorthalidone or HCTZ) or ACEI or ARB, or CCB, alone or in combination ⁴
General ≥60 y	<140/80	• Thiazide-like diuretic (e.g., chlorthalidone or HCTZ), alone or in combination
Diabetics	<130/80	• ACEI or ARB, or CCB, alone or in combination
CKD	<130/80	• ACEI or ARB ⁵
Goals of Treating Hypertension, CASH⁶		
Black, lower risk	<135/85	• Thiazide or CCB
Target organ damage or CVD risk	<130/80	• ACEI or ARB



Book Information

Paperback: 4 pages

Publisher: Borm Bruckmeier Publishing LLC; 2 Rfc Crds edition (September 2014)

Language: English

ISBN-10: 1591035074

ISBN-13: 978-1591035077

Product Dimensions: 0.1 x 3.8 x 7.5 inches

Shipping Weight: 0.3 ounces (View shipping rates and policies)

Average Customer Review: 5.0 out of 5 stars 7 customer reviews

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great resource

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Great Card especially when you are doing clinic or residence to help you remember drugs, grades etc

Pocket size - great

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Helpful

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