



High Blood Pressure: Things You Can Do to Help Lower Yours

What is high blood pressure?

Imagine that your arteries are pipes that carry blood from your heart to the rest of your body. High blood pressure (also called hypertension) occurs when your blood moves through your arteries at a higher pressure than normal.

What do the numbers mean?

Blood pressure is really two measurements, separated by a slash when written down, such as 120/80. You may also hear someone say a blood pressure is "120 over 80."

The first number is the systolic blood pressure. This is the peak blood pressure when your heart is squeezing blood out. The second number is the diastolic blood pressure. It's the pressure when your heart is filling with blood--relaxing between beats.

A normal blood pressure is 120/80 or lower. High blood pressure is 140/90 or higher. If your blood pressure is between 120/80 and 140/90, you have something called "prehypertension."

How is high blood pressure diagnosed?

Blood pressure is measured by putting a blood pressure cuff around your arm, inflating the cuff and listening for the flow of blood. Your doctor will measure your blood pressure at more than one visit to see if you have high blood pressure.

How often should I have my blood pressure checked?

Even in children, blood pressure should be checked occasionally, beginning at about age 2. After age 21, have your blood pressure checked at least once every 2 years. Do it more often if you have had high blood pressure in the past.

What problems does high blood pressure cause?

High blood pressure damages your blood vessels. This in turn raises your risk of stroke, kidney failure, heart disease and heart attack.

Does it have any symptoms?

Not usually. This is why it's so important to have your blood pressure checked regularly.

How is it treated?

Treatment begins with changes you can make to your lifestyle to help lower your blood pressure and reduce your risk of heart disease (see the box below). If these changes don't work, you may also need to take medicine.

Even if you must take medicine, making some changes in your lifestyle can help reduce the amount of medicine you must take.

Lifestyle changes

- Don't smoke cigarettes or use any tobacco product.
- Lose weight if you're overweight.
- Exercise regularly.
- Eat a healthy diet that includes lots of fruits and vegetables and is low in fat.
- Limit your sodium, alcohol and caffeine intake.
- Try relaxation techniques or biofeedback.

How do tobacco products affect blood pressure?

The nicotine in cigarettes and other tobacco products causes your blood vessels to constrict and your heart to beat faster, which temporarily raises your blood pressure. If you quit smoking or using other tobacco products, you can significantly lower your risk of heart disease and heart attack, as well as help lower your blood pressure.

What about losing weight and exercising?

If you're overweight, losing weight usually helps lower blood pressure. Regular exercise is a good way to lose weight. It also seems to lower high blood pressure by itself.

Is sodium really off limits?

Not everyone is affected by sodium, but sodium can increase blood pressure in some people. Most people who have high blood pressure should limit the sodium in their diet each day to less than 2,400 mg. Your doctor may tell you to limit your sodium even more.

Don't add salt to your food. Check food labels for sodium. While some foods obviously have a lot of sodium, such as potato chips, you may not realize how much sodium is in things like bread and cheese.

Do I need to quit drinking alcohol altogether?

In some people, alcohol causes blood pressure to rise quite a lot. In other people, it doesn't. If you drink alcohol, limit it to no more than 1 or 2 drinks per day. One drink is a can of beer, a glass of wine or 1 jigger of liquor. If your blood pressure increases with alcohol, it's best not to drink any alcohol.

Does stress affect my blood pressure?

Stress may affect blood pressure. To help combat the effects of stress, try relaxation techniques or biofeedback. These things work best when used at least once a day. Ask your family doctor for advice.

What about medicine?

Many different types of medicine can be used to treat high blood pressure (see the box below). These are called antihypertensive medicines.

The goal of treatment is to reduce your blood pressure to normal levels with medicine that's easy to take and has few, if any, side effects. This goal can almost always be met.

If your blood pressure can only be controlled with medicine, you'll need to take the medicine for the rest of your life. Don't stop taking the medicine without talking with your family doctor or you may increase your risk of having a stroke or heart attack.

Types of antihypertensive drugs

- Diuretics: These drugs help your body get rid of extra sodium and fluid so that your blood vessels don't have to hold so much fluid.
- Beta-blockers: These drugs block the effects of adrenaline.
- Alpha-blockers: These drugs help your blood vessels stay open.
- ACE inhibitors: These drugs prevent your blood vessels from constricting by blocking your body from making angiotensin II. Angiotensin II is a chemical that constricts blood vessels.
- Calcium channel blockers: These drugs help prevent your blood vessels from constricting by blocking calcium from entering your cells.
- Combinations: These drugs combine an ACE inhibitor with a calcium channel blocker.

What are the possible side effects of medicine?

Different drugs have different side effects for different people. Side effects of antihypertensive drugs can include feeling dizzy when you stand up after lying down or sitting, lowered levels of potassium in your blood, problems sleeping, drowsiness, dry mouth, headaches, bloating, constipation and depression. In men, some antihypertensive drugs can cause problems with having an erection.

Talk to your family doctor about any changes you notice. If one medicine doesn't work for you or causes side effects, you have other options. Let your doctor help you find the right medicine for you.

Source

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