



Hypertension Protocol

Screen all clients for hypertension during each clinic visit.

- STEP 1** **If BP ≥ 140 or ≥ 90 mmHg***
Give amlodipine 5 mg.
- STEP 2** **If BP is not controlled after one month,**
Add valsartan 80 mg on amlodipine 5 mg.
- STEP 3** **If BP is not controlled after one month,**
Increase amlodipine to 10 mg on valsartan 80 mg.
- STEP 4** **If BP is not controlled after one month,**
Increase valsartan to 160 mg on amlodipine 10 mg.
- STEP 5** **If BP is not controlled after one month,**
Add hydrochlorothiazide 12.5 mg on amlodipine 10 mg and valsartan 160 mg.
- STEP 6** **If BP is not controlled after one month,**
Assess adherence, continue medications, and refer to a specialist.

*Start at STEP 2 if BP $\geq 160/100$ mmHg.

All medicines are given once a day.

Assess and support adherence for both ART and antihypertensive treatment during each clinic visit.

Special populations

Pregnant women and women who may become pregnant

DO NOT GIVE lisinopril, enalapril nor hydrochlorothiazide to pregnant women nor to women of childbearing age who are not on effective contraception.

Diabetic patients

Treat diabetes according to Uganda Clinical Guidelines.

Heart attack in last 3 years

Add beta blocker to amlodipine with initial treatment.

Heart attack or stroke, ever

Begin low-dose aspirin (75 mg) and statin.

People with high CVD risk ($\geq 30\%$) by WHO/ISH risk prediction chart for AFR E
Consider statin.

Chronic kidney disease

ACE inhibitor or ARB preferred if close creatinine and potassium testing are possible.

Lifestyle advice for all patients



Stop tobacco use, and avoid second-hand smoke and harmful use of alcohol



Increase physical activity to equivalent of brisk walk 150 min/week



Reduce salt to less than 1 tsp/day

If overweight, lose weight.

Eat 5 servings of fruits and vegetables per day.

Eat nuts, legumes, whole grains and foods rich in potassium.

Eat fish at least twice per week.

Use healthy oils like sunflower, flax seed, soybean, peanut and olive.

Limit red meat to once or twice per week.

Avoid added sugar.

Limit consumption of fried foods and foods with high amounts of saturated fats.

Avoid chips, margarines and other processed foods containing trans fat.

Reduce fat intake by changing how you cook:

- Remove the fatty part of meat.
- Boil, steam or bake instead of frying.
- Limit reuse of oil for frying.

