

Treating High Blood Pressure in People with Diabetes

An important part of taking care of yourself is keeping your blood pressure under control. High blood pressure, also called hypertension, raises your risk for heart attack, stroke, eye problems, and kidney disease. As many as 2 out of 3 adults with diabetes have high blood pressure. Having your blood pressure checked regularly and working to reach your blood pressure target can prevent or delay diabetes problems.

What is high blood pressure?

Blood pressure is the force of blood flow inside your blood vessels. If your blood moves through your vessels with too much force, you have high blood pressure.

When your health care team checks your blood pressure, they report it as 2 numbers, such as 130/80 mmHg. You'll hear them say this as "130 over 80." Both numbers are important.

- The first number is the pressure as your heart beats and pushes blood through the blood vessels. It's called the "systolic" pressure.
- The second number is the pressure when the vessels relax between heartbeats. It's called the "diastolic" pressure.

Your heart has to work harder when blood pressure is high, and your risk for diabetes problems goes up. High blood pressure is a condition that won't go away without treatment.

What should my blood pressure target be?

Both diabetes and high blood pressure increase your risk for heart attack, stroke, and eye and kidney disease. So people with diabetes have a lower blood pressure target than the general public. The American Diabetes Association (ADA) recommends a target blood pressure of below 130/80 mmHg for people with diabetes. When you keep your blood pressure below 130/80 mmHg, you'll help lower your risk for diabetes problems.



Choosing foods wisely, being physically active, and taking medicines are all part of treating high blood pressure.

How will I know if I have high blood pressure?

High blood pressure is a silent problem. You won't know you have it unless your health care provider checks your blood pressure. The ADA recommends that you have your blood pressure checked at every routine office visit. Keep track of your blood pressure by writing the results of your check ups here.

ADA blood pressure target: Below 130/80 mmHg		
Office Visit	My Results	My Target
Date:		

What treatments are recommended?

Both lifestyle changes and medicines help control blood pressure. Treatment varies from one person to the next. Some people can reach their blood pressure targets with lifestyle changes. Other people need medicines plus lifestyle changes. Work with your health care provider to find a treatment that's right for you.

Lifestyle changes

Lifestyle changes can help control your blood pressure as well as your blood glucose (sugar) and blood lipid (cholesterol and triglyceride) levels. Place a check mark next to steps you're willing to try.

Make wise food choices

- Eat a serving of fruit at each meal.
- Include 1 or 2 servings of vegetables with lunch and dinner.
- Switch to low-fat or fat-free dairy products (such as low-fat cheese and fat-free milk).
- Select whole-grain breads (such as whole-wheat bread) and cereals.
- Eat nuts or peanut butter sometimes.
- Choose lean meats and meat substitutes (such as chicken without the skin, fish, lean beef such as flank steak or chuck roast, boiled ham, or pork tenderloin).
- Cook with low-fat methods such as baking, roasting, broiling, or grilling.
- Add only a little or no salt to your food during cooking and at the table.
- Season your food with herbs and spices instead of salt.
- Check food labels and choose foods with less than 400 mg of sodium per serving.

Lose weight or take steps to prevent weight gain

- Cut down on calories and fat.
- Try to be more physically active than you are now.

Be physically active

- Check with your doctor before you start a new routine. Find out which activities will be safe.
- Aim for a total of about 30 minutes of aerobic exercise, such as brisk walking, most days of the week. If you're just starting out, begin with 5 minutes a day and gradually add more time.

Be careful with alcohol

- Talk with your health care team about whether it's wise to have alcoholic beverages.

- Limit your intake of alcohol. If and when you drink alcoholic beverages, limit yourself to 1 serving a day (for women) or 2 servings a day (for men).

If you smoke, quit smoking

- Talk with your health care team about how to quit.
- Go to a "quit-smoking" class.

Medicines

Not everyone takes the same blood pressure medicine and many people take two or more medicines. The ones you take will depend on your blood pressure readings and other factors.

- **ACE (angiotensin-converting enzyme) inhibitors.** These medicines lower blood pressure by keeping your blood vessels relaxed. ACE inhibitors prevent a hormone called angiotensin from forming in your body and narrowing your blood vessels. These medicines also help protect your kidneys and reduce your risk of heart attack and stroke.
- **ARBs (angiotensin receptor blockers).** These medicines keep the blood vessels open and relaxed to help lower blood pressure. Like ACE inhibitors, ARBs also protect your kidneys.
- **Beta blockers.** These medicines help lower blood pressure and relax your heart by allowing it to beat slower and with less force. Beta blockers help prevent heart attack and stroke.
- **Calcium channel blockers.** These medicines help the blood vessels relax by keeping calcium out of your blood vessels and heart.
- **Diuretics.** These medicines, sometimes called "water pills," help rid your body of extra water and sodium through urine.

The ADA recommends that everyone with diabetes and high blood pressure take either an ACE inhibitor or an ARB. People with diabetes and high blood pressure also may need a diuretic medicine. However, pregnant women should not take ACE inhibitors or ARBs. If you're pregnant, talk with your health care provider about what to do about high blood pressure.

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