

Hypertension

Target BP

High risk CVD: SBP < 120

Who? CVD, CKD, age 75+ or
CV risk 15%+

Diabetes: < 130/80

Others: < 140/90

Resistant HTN

↳ if on 3+ antihypertensives
(1 must be diuretic)

Typical: ACEI + DHP CCB
+ thiazide

Treatment

- + spironolactone (DOC)
- + bisoprolol
- + doxazosin
- + amliloride
- + clonidine

Treatment - Initial

★ lower doses of multiple drugs better than high doses of few

Rx	Best in Who?	Avoid in Who?	Notes
Diuretics	· elderly · black · isolated systolic HTN	· arrhythmias: hx · sulfa allergy · gout · hyponatremia	· long acting preferred · high doses for resistant HTN
Beta Blockers	· < 60 yrs · angina, HF, MI · tachycardia	· severe asthma / COPD · HB	
ACEI	· black · diabetes, MI, HF, CKD, heart disease	· hx angioedema · artery stenosis	
ARB	· if intolerant ACEI	· hx angioedema · artery stenosis	
CCB	· elderly · black · isolated systolic BP		· reserve nifedipine for HTN in pregnancy

Special Populations

Pregnancy

↳ recommend ASA to prevent pre-eclampsia

Safe

- labetalol
- nifedipine XL
- methyldopa
- beta blockers

Avoid

- atenolol
- spironolactone
- ACEI / ARBs

Breastfeeding

Safe

- labetalol
- nifedipine XL
- methyldopa
- may use ACEI
- captopril, enalapril, benzapril,
quinipril preferred

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