
Jefferson Cardiology Association Happenings

High blood Pressure recommendations

The report of the Eight Joint National Committee recently published guidelines for the management of high blood pressure in adults. The guidelines were based on evidence from past research.

For patients over 60 years of age, the recommendation was to initiate or intensify blood pressure therapy for office blood pressure over 150/90 mm mercury. For diabetics, black patients and those under age 60, the recommendation was to initiate or intensify therapy for blood pressure over 140/90 mm mercury. The previous guidelines in 2003 recommended treatment for blood pressure over 140/90 for most people and 130/90 was threshold to treat diabetic patients.

In non black patients any one of 3 groups of drugs can be used to initiate treatment. These include thiazide diuretics, calcium channel blockers and renin-angiotension blockers including ACE inhibitors and ARBs. In Black patients, initial therapy should be either a thiazide diuretic or calcium channel blocker. This recommendation for all patients is note worthy to value minded patients as there are generic drugs in each of these classes.

Thiazide diuretics include Hydrochlorothiazide and Chlorthalidone. Calcium channel blockers include Amlodipine, Diltiazem, Verapamil, Nifedipine and Felodipine. ACE inhibitors include Lisinopril, Captopril, Enalapril and Ramapril. ARB medications include generic Losatan and brand products including Avapro, Diovan and Benicar.

The new guidelines do not address home and ambulatory blood pressure monitoring. The British and European Society of Hypertension/European Society

of Cardiology emphasize outpatient blood pressure monitoring. There is concern white coat hypertension, high blood pressure only in a doctor's office, and masked hypertension, normal blood pressure only in a doctor's office may lead to improper treatment. These observations emphasize a need to have future research monitor blood pressure readings outside of a doctor's office.

The need for more effective blood pressure control remains real. Currently it is estimated that only half of the 78 million Americans with high blood pressure have good blood pressure control.

Guideline For Lifestyle Management

Just as the American Heart Association and American College of Cardiology have recently put out new guidelines for cholesterol and blood pressure management, a new guideline has recently come out regarding lifestyle management to reduce cardiovascular risk.

The new guidelines focused on 3 major concerns:

1. The effect of dietary patterns and nutrients on cardiovascular risk
2. The effect of sodium and potassium on cardiovascular risk and outcome.
3. The effect of exercise on blood pressure and lipids.

The guidelines, based on past research, indicate a strong correlation between dietary patterns with blood pressure and cholesterol elevation. For cholesterol reduction, a diet including vegetables, fruits, and grains while limiting sturaed fats to 5% of total calories is recommended. The recommended diet includes low fat dairy products, poultry, fish, legumes, non tropical vegetable oils and nuts. This

diet limits intake of sweets, sugars, sweetened beverages and red meats. To reduce blood pressure, sodium should be restricted to less than 2.4 grams daily. More specific diet information can be found on the internet by searching for the DASH diet for hypertension as well as the USDA Food Pattern or the AHA diet for cholesterol.

The committee also recommended that adults engage in 3-4 aerobic exercise

sessions per week lasting 40 minutes per session of moderate to vigorous intensity. This level of exercise was thought beneficial to lower cholesterol and blood pressure.

Staff News

We would like to wish a very Happy Birthday to Nancy Carlin and Chrissy Falk! Hope you both enjoy your special day!

Stir-Fried Shrimp with Garlic and Chile Sauce

½ cup fat-free, less-sodium chicken broth	2 teaspoons cornstarch
1 teaspoon sugar	¼ teaspoon white pepper
2 teaspoons Shoaxing (Chinese rice wine) or dry sherry	1 tablespoon canola oil
2 teaspoons low-sodium soy sauce	2 tablespoons minced garlic
1 ½ pounds large shrimp, peeled and deveined	½ cup green onion slices
1 ½ teaspoons minced peeled fresh ginger	½ teaspoon dark sesame oil
1 jalapeno pepper, seeded and finely chopped	Cilantro sprigs (optional)

1. Combine chicken broth, cornstarch, sugar, Shoaxing or dry sherry, soy sauce, and white pepper in a small bowl, stirring with a whisk.

2. Heat a wok or large skillet over high heat. Add canola oil to pan. Add shrimp to pan; stir fry 1 minute or until shrimp begin to turn pink. Add garlic, ginger, and jalapeno, stir fry 1 minute. Stir in broth mixture; cook 1 minute or until shrimp are done and sauce is thickened, stirring constantly. Remove from heat; stir in onions and sesame oil. Garnish with cilantro sprigs if desired. Yield: 8 servings (1/2 cup servings).

Nutritional Facts: Calories 120; Fat 3.5g (sat 0.5g, mono 1.4g, poly 1.2g); Protein 17.7g; Carbs 3.4g; Fiber 0.3g; Cholesterol 129mg; Iron 2.2mg; Sodium 200mg; Calcium 53mg.

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