National Institute on Aging



High Blood Pressure

You can have high blood pressure, or hypertension, and still feel just fine. That's because high blood pressure does not cause signs of illness that you can see or feel. But, high blood pressure, sometimes called "the silent killer," is a major health problem. If high blood pressure isn't controlled with lifestyle changes and medicine, it can lead to stroke, heart disease, eye problems, or kidney failure.

What Is Blood Pressure?

Blood pressure is the force of blood pushing against the walls of arteries. When the doctor measures your blood pressure, the results are given in two numbers. The first number, called *systolic pressure*, measures the pressure when your heart beats. The second number, called *diastolic pressure*, measures the pressure while your heart relaxes between beats. Normal blood pressure is a systolic pressure of less than 120 and a diastolic pressure of less than 80.

Do You Have High Blood Pressure?

One reason to have regular visits to the doctor is to have your blood pressure checked. The doctor will say your blood pressure is high when it measures 140/90 or higher at two or more checkups. He or she may ask you to check your blood pressure at home at different times of the day. If the pressure stays high, the doctor may suggest medicine, changes in your diet, and exercise. You could have *prehypertension* if your blood pressure is only slightly higher than normal—for example, the first number (systolic) is between 120 and 139, or the second number (diastolic) is between 80 and 89. Prehypertension can put you at risk for developing high blood pressure. Your doctor will probably want you to make changes in your day-to-day habits to try to lower your blood pressure.

What If Just The First Number Is High?

For older people, the first number (systolic) often is 140 or greater, but the second number (diastolic) is less than 90. This problem is called *isolated systolic hypertension*. Isolated systolic hypertension is the most common form of high blood pressure in older people, and it can lead to serious

| | Systolic | Diastolic |
|--------------------------------|-----------------|---------------|
| Normal Blood Pressure | Less than 120 | Less than 80 |
| Prehypertension | Between 120-139 | Between 80-89 |
| High Blood Pressure | 140 or more | 90 or more |
| Isolated Systolic Hypertension | 140 or more | Less than 90 |

What Do The Numbers Mean?

health problems. It is treated in the same way as regular high blood pressure. If your systolic pressure is 140 or higher, ask your doctor how you can lower it.

Some Risks You Can't Change

Anyone can get high blood pressure. But, some people have a greater chance of having it because of things they can't change. These are:

- Age. The chance of having high blood pressure increases as you get older.
- Gender. Before age 55, men have a greater chance of having high blood pressure. Women are more likely to have high blood pressure after menopause.
- **Family history.** High blood pressure tends to run in some families.
- Race. African-Americans are at increased risk for high blood pressure.

How Can I Control My Blood Pressure?

More than half of Americans over age 60 and about three-fourths of those 70 years of age and older have high blood pressure. The good news is that blood pressure can be controlled in most people. To start, there are many lifestyle changes you can make to lower your risk of high blood pressure, including:

✦ Keep a healthy weight. Being overweight adds to your risk of high blood pressure. Ask your doctor if you need to lose weight.

★ Exercise every day. Moderate exercise can lower your risk of high blood pressure. Try to exercise at least 30 minutes a day most days of the week. Check with your doctor before starting an exercise plan if you have a long-term health problem or are over 50 and have been inactive.

✦ Eat a healthy diet. A diet rich in fruits, vegetables, whole grains, and low-fat dairy products may help to lower blood pressure. Ask your doctor about following a healthy diet.

◆ Cut down on salt. Many Americans eat more salt (sodium) than they need. Most of the salt comes from processed food (for example, soup and baked goods). A low-salt diet might help lower your blood pressure. Talk with your doctor about eating less salt.

 Drink less alcohol. Drinking alcohol can affect your blood pressure.
Most men should not have more than two drinks a day; most women should not have more than one drink a day.

✦ Don't smoke. Smoking increases your risk for high blood pressure and heart disease. If you smoke, quit.

♦ Manage stress. People react to stress in different ways. For some, stress can cause their blood pressure to go up. Talk to your doctor about how you can lower stress. Exercise and getting a good night's sleep can help.

If these lifestyle changes don't control your high blood pressure, your doctor will prescribe medicine. You may try several kinds before finding the one that works best for you. Medicine can control your blood pressure, but it can't cure it. You may need to take medicine for the rest of your life. You and your doctor can plan together how to manage your blood pressure.

High Blood Pressure Facts

High blood pressure is serious because it can lead to major health problems. If you have high blood pressure, remember:

 High blood pressure may not make you feel sick, but it is serious. See a doctor to treat it. You can lower
your blood pressure
by changing your
day-to-day habits
and by taking
medicine, if needed.

If you take high
blood pressure medicine,
making some lifestyle changes may help
lower the dose you need.

✦ If you are already taking blood pressure medicine and your blood pressure is 120 or less, that's good. It means medicine and lifestyles changes are working. If another doctor asks if you have high blood pressure, the answer is, "Yes, but it is being treated."

✦ Tell your doctor about all the drugs you take. Don't forget to mention over-the-counter drugs, vitamins, and dietary supplements. They may affect your blood pressure. They also can change how well your blood pressure medicine works.

✦ Blood pressure pills should be taken at the same time each day. For example, take your medicine in the morning with breakfast or in the evening after brushing your teeth. If you miss a dose, do not double the dose the next day.

✦ Know what your blood pressure should be. Don't take more of your blood pressure medicine than your doctor prescribes. Very low blood pressure is not good, either. Systolic pressure that is a lot lower than 100 may make you dizzy and faint and may cause you to fall.

◆ Do not stop taking your high blood pressure medicine unless your doctor tells you to stop. Don't skip a day or take half a pill. Remember to refill your medicine before you run out of pills.

If your doctor asks you to take your blood pressure at home, keep in mind:

✦ There are many blood pressure home monitors for sale. Ask your doctor, nurse, or pharmacist to see which monitor you need and to show you how to use it.

 Avoid smoking, exercise, and caffeine 30 minutes before taking your blood pressure.

 Make sure you are sitting with your feet on the floor and your back is against something.

✦ Relax quietly for 5 minutes before checking your blood pressure.

• Keep a list of your blood pressure numbers to share with your doctor,

physician's assistant, or nurse. Take your home monitor to the doctor's office to make sure your monitor is working right.

For More Information

Here are some helpful resources:

National Heart, Lung, and Blood Institute Health Information Center P.O. Box 30105 Bethesda, MD 20824-0105 1-301-592-8573 1-240-629-3255 (TTY) www.nhlbi.nih.gov

National Library of Medicine MedlinePlus

Search for: "High Blood Pressure" www.medlineplus.gov

American Heart Association

7272 Greenville Avenue Dallas, TX 75231 1-800-242-8721 (toll-free) www.heart.org For more information on health and aging, contact:

National Institute on Aging Information Center P.O. Box 8057 Gaithersburg, MD 20898-8057 1-800-222-2225 (toll-free) 1-800-222-4225 (TTY/toll-free) www.nia.nih.gov www.nia.nih.gov

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