Volume-4, Issue-6, June-2015 • ISSN No 2277 - 8160

Research Paper CHEMISTRY

Medication Less Hypertension Management (Review)

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ABSTRACT *Hypertension is a major health problem throughout the world, it increases risk of cardiovascular diseases. Nowadays the people have become aware about this silent killer, so the efforts are being done for its control. Adoption of healthy lifestyles is critical in the prevention of high blood pressure, it enhance antihypertensive drug efficacy and decrease cardiovascular risk. Patients with blood pressure below 140/90 respond well to lifestyle modifications and usually do not need drug therapy. If normal blood pressure is not achieved by lifestyle modification alone then drug therapy is indicated*

KEYWORDS :Hypertension, Blood pressure, Cardiovascular Diseases, Stroke

The blood pressure between 120/80 (systolic 120 and diastolic 80) is considered to be normal range of blood pressure, range between 120/80 - 140/90 is considered as Pre-hypertension and the pressure between 140/90 and higher is considered to be High blood pressure (hypertension).

In the majority of cases no specific cause for the elevated blood pressure can be identified (primary or essential hypertension), this hypertension may be due to hormonal factors or due to certain substances that cause constriction of blood vessels. These are probably genetically determined, but certain environmental factors, such as a high-salt, low-potassium diet and chronic stress, may play some role .In some cases, high blood pressure may be a due to another disorder, or a side effect of medication (secondary hypertension). Some of the more common causes of secondary hypertension include; Kidney disorder, renovascular hypertension, adrenal tumors, pheochromocytoma and use of certain drugs.Blood pressure up to the range of 140/90 can be managed by changing life style, that means by changing food habits and by leaving sedentary habits and involving the body in physical activities such as morning walk, acrobatics, yoga and meditation.

Lifestyle modifications to control blood pressure

Adoption of healthy lifestyles is critical in the prevention of high blood pressure, it enhance antihypertensive drug efficacy and decrease cardiovascular risk. Patients with blood pressure below 140/90 respond well to lifestyle modifications and usually do not need drug therapy. If normal blood pressure is not achieved by lifestyle modification alone then drug therapy is indicated

Avoid smoking: It is important preventive measure for non-cardiovascular and cardiovascular diseases, including stroke and coronary heart disease. Independent effect of smoking on blood pressure is small and smoking cessation (Doll et al., 1994, Primatesta et al., 2001, Omvik ,1996) does not lower blood pressure, but cardiovascular risk is greatly increased by smoking. In addition, smoking may interfere with the beneficial effects of some antihypertensive agents such as β-adrenergic blockers.

Weight reduction and physical exercise: Blood pressure is lowered by 1.6/1.1 mmHg for every kilogram of weight loss, It has beneficial effects on associated risk factors such as insulin resistance, diabetes and hyperlipidaemia. Physical exercise (He et al., 2000) plays an important role in weight reduction. Thus, sedentary patients should take up modest levels of aerobic exercise on a regular basis such as brisk walking for at least 30 minutes per day, most days of the week. However, heavy physical exercise/weight-lifting should be discouraged or postponed until appropriate drug treatment becomes effective.

Reduction of salt intake and other dietary changes: Hypertension patients should avoid salt (sodium chloride) and processed foods, (Law,1997, Cutler et al. ,1997, Beckmann et al., 1995 ,Vollmer et al., 2001) , rather they must prefer meals cooked directly from natural ingredients containing more potassium, fruit ,vegetables, fish and should reduce intake of saturated fat and cholesterol. Reducing dietary sodium intake to no more than 2.4 g sodium or 6 g sodium chloride reduces the blood pressure by an average of 4–6 mmHg.

Avoid alcohol consumption :High levels of alcohol consumption(Wannamethee & Shaper ,1996) are associated with a high risk of stroke because there is a linear relationship between alcohol consumption and the blood pressure level , alcohol consumption may also lessens the effects of antihypertensive drug . Consumption of alcohol should be avoided and if it cannot be avoided completely, then in no case it should be consumed more than 30 ml of ethanol (the equivalent of two drinks per day) in men and no more than 15 ml of ethanol (one drink per day) in women and lighter-weight persons.

CONCLUSION; Adoption of healthy lifestyles can help hypertension patients. Major lifestyle modifications include weight reduction in overweight persons, adoption of the food which is rich in potassium and calcium, dietary sodium reduction, increase of physical activities, and moderation of alcohol consumption. In general, lifestyle modifications Brings blood pressure under control, enhance antihypertensive drug efficacy, and decrease cardiovascular risk.

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