Dietary and lifestyle interventions to improve BP control

Did you know?

- Patients have misconceptions about ways to control hypertension.
 - Though many trust the advice of doctors on television talk shows, a recent study in the *British Medical Journal* showed that more than half of the advice presented in these medical shows was not evidence-based.¹
 - Individuals attempt to follow diets that are not supported by evidence, such as the paleo, low-fat and wheat belly diets.

Why are dietary and lifestyle interventions important?

- Studies show that lifestyle changes, such as eating a healthy diet and being more physically active, are effective strategies patients can use to lower their blood pressure.²
- Many patients are willing to receive advice about how to change their lifestyles but struggle with incorporating those recommendations into their daily lives.

What are five dietary and lifestyle changes that can help patients improve their blood pressure?³

1. Healthy diet

- Studies have shown that one diet in particular lowers blood pressure: the Dietary Approaches to Stop Hypertension—or DASH eating plan.
 - A DASH eating plan lowers systolic blood pressure up to 12 mm Hg in patients with hypertension the same benefit as taking a blood pressure pill.

Consume more	Consume less
Fruits and vegetables	Salt
Low-fat dairy products	Sweets
Whole grains	Added sugars
Fish and poultry	Beverages containing sugars
Beans, seeds and nuts	Red meats
Plant-based oils	

Losing 11 lbs. can drop systolic blood pressure by about 4 mm Hg.

2. Lower salt intake

- The recommended daily sodium intake is 2,400 mg, but the average American consumes ≥3,400 mg.
- Reducing daily sodium intake by 1,100 mg per day can reduce systolic blood pressure by as much as 4 mm Hg.

Always make sure patients know what to do should they have a blood pressure measurement that is outside the pre-determined acceptable range or if they experience any symptoms with a high or low blood pressure measurement, including seeking emergency treatment if appropriate. This guidance to the patient should be individualized by the clinician and reinforced by clinical staff at the initiation of any SMBP monitoring program.

3. Aerobic exercise

- Regular aerobic exercise lowers blood pressure and improves cardiovascular health.
- Forty minutes of brisk walking a day—all at one time or in segmented 10 minute periods—counts as aerobic exercise. This type of exercise, if done four times a week, can lower blood pressure by as much as 5 mm Hg.
- Patients should check with their doctor before starting an exercise program.

4. Alcohol in moderation

- If alcohol consumption is safe for patients per their medications and medical diagnoses, it should be consumed in moderation.
 - One drink a day for women, two for men-maximum
 - One drink = a 12 ounce beer, five ounce glass of wine or 1.5 ounce shot of liquor

5. Avoiding smoking and tobacco

• Smoking is one of the leading reversible causes of cardiovascular disease, so focusing on helping patients quit has significant benefits for preventing cardiovascular disease.

For more information on improving blood pressure control, contact ihobp.surveys@ama-assn.org.

References

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^{1.} Korownyk C, Kolber M, McCormack J, et al. Televised medical talk shows—what they recommend and the evidence to support their recommendations: a prospective observational study. *BMJ*. 2014;349:g7346

^{2.} Eckel R, Jakicic J, Ard J, et. al. 2013 AHA/ACC guideline on lifestyle management to reduce cardiovascular risk. Circulation. 2014;129:S76-S99