Figure. 2014 Hypertension Guideline Management Algorithm

Adult aged ≥18 years with hypertension

Implement lifestyle interventions (continue throughout management).

Set blood pressure goal and initiate blood pressure lowering-medication based on age, diabetes, and chronic kidney disease (CKD).

General population (no diabetes or CKD) vs. Diabetes or CKD present

Age ≥60 years vs. Age <60 years

Blood pressure goal: SBP <140 mm Hg, DBP <90 mm Hg

Blood pressure goal: SBP <150 mm Hg, DBP <90 mm Hg

Blood pressure goal: SBP <140 mm Hg, DBP <90 mm Hg

Blood pressure goal: SBP <140 mm Hg, DBP <90 mm Hg

Nonblack vs. Black

Initiate thiazide-type diuretic or ACEI or ARB or CCB, alone or in combination.²

Initiate thiazide-type diuretic or CCB, alone or in combination.

Initiate ACEI or ARB, alone or in combination with other drug class.²

Select a drug treatment titration strategy
A. Maximize first medication before adding second or
B. Add second medication before reaching maximum dose of first medication or
C. Start with 2 medication classes separately or as fixed-dose combination.

Reinforce medication and lifestyle adherence.
For strategies A and B, add and titrate thiazide-type diuretic or ACEI or ARB or CCB (use medication class not previously selected and avoid combined use of ACEI and ARB).
For strategy C, titrate doses of initial medications to maximum.

At goal blood pressure? Yes

Reinforce medication and lifestyle adherence.
Add and titrate thiazide-type diuretic or ACEI or ARB or CCB (use medication class not previously selected and avoid combined use of ACEI and ARB).

At goal blood pressure? Yes

Reinforce medication and lifestyle adherence.
Add additional medication class (eg, β-blocker, aldosterone antagonist, or others) and/or refer to physician with expertise in hypertension management.

At goal blood pressure? Yes

Continue current treatment and monitoring.b

SBP indicates systolic blood pressure; DBP, diastolic blood pressure; ACEI, angiotensin-converting enzyme; ARB, angiotensin receptor blocker; and CCB, calcium channel blocker.

² ACEIs and ARBs should not be used in combination.
³ If blood pressure fails to be maintained at goal, reenter the algorithm where appropriate based on the current individual therapeutic plan.