

CARDIOLOGY

ARTERIAL HYPERTENSION: THE SECRET IS TO MONITOR AND CONTROL

AS is the case with diabetes, high cholesterol or obesity, Arterial Hypertension (HTN) is an important risk factor for the development of cardiovascular disease. This reality can be avoided by raising awareness and educating people with either diagnosed or undiagnosed disease. In fact, through early diagnosis and pathology control, it is possible to have a normal life.

Blood pressure (BP) has two measurements: systolic ("maximum") and diastolic ("minimum"). The first is the moment when the heart contracts and pressure is exerted on the arteries when blood is pumped throughout body; the second indicates the pressure exerted on the arteries when the heart is in between beats.

It is normal for BP to increase at certain times, for example, during physical exercise or in the face of an emotional episode. As a rule, once relaxed, these levels return to normal.

Hypertension is considered severe when it remains elevated over months or when it suddenly increases. One is considered to be hypertensive when at least one or both measurements are equal to or over 140/90mmHG, on at least two different occasions.

Results must be determined by a professional who is using a calibrated device. Hypertension is a "silent" disease; that is, there are no symptoms. However, there are certain signs to be taken into account: dizziness; nosebleeds and headaches.

The consequences of HTN are two:

- i) Heart Hypertrophy, with the following consequences: decreased blood flow and difficulty for the heart to pump blood to tissues and cells; angina pectoris and heart failure; arrhythmia.
- ii) Deterioration of artery walls, resulting in an increased risk of atherosclerosis; increased risk for clot formation; aneurysms; brain haemorrhages.

Specific medication can control hypertension. However, people that are hypertensive should change some lifestyle habits to have a better quality of life and avoid the increased risk of pathologies such as obesity or cardiovascular diseases.

- i) Controlling blood pressure. Blood pressure control is done by the physician and also at home.

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Here are some tips to bear in mind when measuring BP:

- Measurement must be taken in a calm environment after a five-minute rest period;
 - It is not advisable to smoke, take stimulants or exercise for a period of 30 minutes prior to testing;
 - Remain in a seated position, with back and the arms supported;
 - Avoid wearing tight clothes;
 - Measurement should always be taken using the same device and on the same arm;
- BP assessment should be done in the morning and afternoon;
 - Two or three measurements should be taken each time to calculate the average;
 - A record of the measurements made must be kept, mentioning date and time. This record must be shared with the attending physician.
- ii) A healthy, balanced diet. Low in saturated fats and rich in potassium, calcium, magnesium, fibre and protein:

- Increase the consumption of vegetables, fruit and lean dairy products;
- Include whole grain, fish, poultry, beans, seeds, nuts and vegetable oil;
- Limit the intake of salt, sweets, sugary drinks and red meat.

- iii) Regular physical exercise. Aerobic exercises (running, cycling, walking) is recommended, complemented with resistance and strength exercises. However, it is advisable to choose the most appropriate according to age,

physical condition or health. It is, therefore, crucial to ask the attending physician for advice.

Hypertension is a cardiovascular risk factor, which means that people with hypertension and uncontrolled BP have an increased risk of developing cerebrovascular diseases. HTN has a strong risk impact of myocardial infarction and especially of stroke.

Article submitted by HPA Health Group

OPHTHALMOLOGY

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