

Radical change in blood pressure diagnosis and treatment

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This image shows Professor Bryan Williams and Andrew Lansley MP at the opening of the University of Leicester's NIHR Biomedical Research Unit.
Credit: University of Leicester

The way blood pressure is diagnosed and treated is set to be revolutionised following new guidelines for the medical profession issued by NICE and developed in conjunction with the British Hypertension Society (BHS).

It will mark the first time in over a century that the way [blood pressure](#) is routinely monitored by GPs has been changed.

A major feature of the new guideline is the recommendation that [high blood pressure](#) should be diagnosed using ambulatory blood pressure

monitoring, a technique in which the patient wears a monitor for 24 hours to gauge how high their blood pressure is.

University of Leicester Professor Bryan Williams Chaired the NICE [hypertension](#) guideline. He believes this new approach will mean that as many as 25% of people diagnosed as having high blood pressure using the current method of [diagnosis](#), i.e. repeated measurement of blood pressure in the doctor's clinic, may not be hypertensive and may not need treatment.

"This new guideline is going to change the way blood pressure is diagnosed and treated for millions of people in the UK and around the world. The new approach will be more accurate in diagnosing high blood pressure and will ensure that the right people get treated.

"We are using new technologies to improve the way we diagnose high blood pressure. It means that we will be more accurate in treating those who need treatment and in avoiding treating those who don't. "

In accompanying research published simultaneously in the [Lancet](#), the guideline group demonstrated that this new approach is highly cost-effective and even after taking account of the cost of the new technology, is likely to be cost saving for the NHS.

"Even though these new devices cost between £1,000 - £2,000, our analyses suggest that by improving the speed and accuracy of diagnosis, we will actually save money by only targeting treatment at those who need and will benefit from treatment - this is good news for patients. I am under no illusions about the challenges to implement this but I believe this guideline will be well received by both doctors and patients not just in England and Wales, but worldwide," said Professor Williams, Professor of Medicine at the University and an honorary consultant physician at the University Hospitals of Leicester NHS Trust.

The new guideline also simplifies the treatment strategy for high blood pressure, focussing on the most effective treatments and also contains specific advice on the treatment of blood pressure in young adults and the very elderly.

Professor Williams added: "We have spent more than a year looking at masses of new evidence from studies in great detail before coming to our conclusions. I think the UK is leading the world in developing bold and progressive [treatment](#) strategies for high blood pressure. The importance of this cannot be overstated for two reasons, first because high blood pressure is very common and affects about a quarter of all adults and more than half of adults over the age of 60yrs, and second, because treating high blood pressure is one of the most effective ways of reducing the risks of heart disease and stroke."

More information: The guideline, The clinical management of primary hypertension in adults, is available from Wednesday 24 August on the NICE website at www.nice.org.uk/guidance/CG127

Provided by University of Leicester

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