

## Home blood pressure monitoring may not benefit patients with stroke and hypertension

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Home blood pressure monitoring may help patients with hypertension and stroke but did not improve blood pressure control for patients who had normal blood pressure at the start or those with disabilities, according to a randomized controlled trial published in *CMAJ* (*Canadian Medical Association Journal*).

"Overall, home monitoring did not improve blood pressure control in an unselected group of patients with hypertension and a history of stroke. However, it was associated with more changes in antihypertensive treatment during the trial, which suggested more active management in the intervention group," writes Sally Kerry, Centre for Primary Care and Public Health, Queen Mary, University of London, UK, with coauthors.

Good blood pressure control can significantly reduce the risk of recurrent stroke in the estimated 15 million people who have strokes each year worldwide. Studies show that home monitoring is associated with lower blood pressure.

The study involved 381 participants aged 30 (mean 72) years from three stroke units in London, UK, who were assigned to home monitoring or to a control group of usual care. Participants in the monitoring group were given a blood pressure monitor, brief training and telephone support from a nurse. The trial, including follow up, was conducted from March 2007 to August 2009. A total of 23% of participants were from ethnic minorities, and 45% had some disability due to stroke, including many frail, elderly patients. The study included patients with a range of blood



pressure levels, rather than a group with poorly controlled levels.

"Home monitoring depended on patients taking their blood pressure, recognizing if readings were consistently over target, understanding the need for intensification of treatment, visiting their physician for review and appropriate management by their physician," write the authors.

After 12 months, most patients were still monitoring, although patients with disabilities and whose care givers did not live with them had difficulties with monitoring.

"Overall, home monitoring did not improve <u>blood pressure control</u> in patients with hypertension and a history of stroke. It was associated with a fall in systolic pressure in patients who had uncontrolled blood pressure at baseline and those without disability due to stroke," conclude the authors.

More information: www.cmaj.ca/lookup/doi/10.1503/cmaj.120832

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