

QUALITY STANDARDS

# Hypertension

A guide for people with  
high blood pressure

2024



Ontario  
Health

Ontario Health is committed to improving the quality of health care in the province in partnership with patients, clinicians, and other organizations.

To do that, Ontario Health develops quality standards. These are documents that outline what high-quality care looks like for conditions or processes where there are large differences in how care is delivered, or where there are gaps between the care provided in Ontario and the care patients should receive. These quality standards set out important steps to improve care. They are based on current evidence and input from an expert committee that includes patients, care partners, clinicians, and researchers.

This patient guide accompanies the quality standard on [hypertension](#) (high blood pressure). It outlines the top 7 areas where clinicians can take steps to improve care for adults who have high blood pressure. The patient guide also includes suggestions on what to discuss with your clinicians, as well as links to helpful resources.

### **Did you know?**

“Clinicians” are health care professionals who provide care to patients, including doctors, nurses, nurse practitioners, pharmacists, psychologists, and registered dietitians.

# What is high blood pressure?

When you have high blood pressure, your heart has to work harder to pump blood through your body.

You might not feel different or have any symptoms from high blood pressure. But if it is not managed, it can damage your arteries, kidneys, or other organs. It can also lead to more serious health problems, such as a heart attack or stroke.

Having a diagnosis is important. Then you can take steps to stay healthy and live well.

## When is high blood pressure an emergency?

Most people with high blood pressure do not have symptoms. If you have high blood pressure plus any of these symptoms, **go to your local emergency department or call 9-1-1:**

- Chest pain
- Trouble breathing or speaking
- Sudden numbness in the face, arm, or leg
- Severe headache
- Loss of vision
- Irregular heartbeat

# Summary of the top 7 areas to improve care for people with high blood pressure

## Quality Statement 1: Culturally Responsive Care



### What the standard says

People with hypertension or at risk for hypertension (and their families and care partners) receive care from health care teams in a health care system that is culturally responsive and free from discrimination and racism. Health care teams work to build trust, address misconceptions about hypertension, remove barriers to accessing care, and provide equitable care.



### What this means for you

The people on your health care team should always treat you with respect and dignity and listen to you. They should care for you in a way that respects your culture, values, and beliefs, and that is free from discrimination. They should work with you to understand your needs and any difficulties you face in accessing care.

### Remember, everybody is different.

The support you need and the care plan you develop with your health care team will be unique to you. See quality statement 5 for information about making a care plan.

# Quality Statement 2: Accurate Measurement of Blood Pressure



## What the standard says

People receive automated office blood pressure measurement when in-office blood pressure measurement is performed.



## What this means for you

Your blood pressure should be measured using an automated electronic device. Your clinician should make sure that they use an arm cuff that fits you, and that you are seated quietly while the device takes several readings.

## Measuring blood pressure

Your blood pressure is measured using 2 numbers:

- The first number (called “systolic blood pressure”) measures pressure in your arteries when your heart beats
- The second number (called “diastolic blood pressure”) measures the pressure in your arteries when your heart relaxes between beats

At your doctor’s office using an electronic device, a high blood pressure reading is **135/85 mm Hg or higher**.

At home using ambulatory blood pressure monitoring (a device you wear for 24 hours or more), a high blood pressure reading is **135/85 mm Hg or higher when you are awake**, and an average of **130/80 mm Hg or higher over 24 hours**.

At home using home blood pressure monitoring (a device you use to measure your blood pressure 2 times a day for 7 days), a high blood pressure reading is **135/85 mm Hg or higher**.

# Quality Statement 3: Out-of-Office Assessment to Confirm a Diagnosis



## What the standard says

People with a high in-office blood pressure measurement receive ambulatory blood pressure monitoring to confirm a diagnosis of hypertension. Home blood pressure monitoring can be used if ambulatory blood pressure monitoring is not tolerated or not readily available, or if the patient prefers home monitoring.



## What this means for you

Stress during medical visits can affect your blood pressure, so measuring it during your everyday activities is a good way to get a more accurate reading.

If your clinician thinks you might have high blood pressure, they should offer you a device that measures your blood pressure many times over 24 hours while you go about your daily activities. This is called “ambulatory blood pressure monitoring,” and it helps your clinician confirm whether you have high blood pressure. If you do not want ambulatory blood pressure monitoring, or if it is not available, you can use a device that measures your blood pressure at home 2 times a day for 7 days instead.

Your clinician should give you information about the device you use and show you how to use it properly.

## Did you know?

1 in 4 Canadians have high blood pressure. Almost 1 in 5 people with high blood pressure do not know they have it.

# Quality Statement 4: Health Behaviour Changes



## What the standard says

People with hypertension or at risk for hypertension (and their families and care partners) receive information and supports for health behaviour changes that can reduce their blood pressure and risk of cardiovascular disease, including physical exercise, alcohol consumption, diet, sodium and potassium intake, smoking cessation, and stress and weight management.



## What this means for you

Your diagnosis is the first step to managing your blood pressure and staying healthy.

Your clinicians should talk with you about changes you can make to lower your blood pressure, such as getting enough exercise, avoiding alcohol or drinking less, changing your diet, stopping smoking, reducing stress, and managing your weight.

They should give you information about programs and groups in your community that support these changes and align with your cultural values.

## Why do I have high blood pressure?

It might come as a surprise to find out you have high blood pressure, especially if you feel fine. People are more likely to develop high blood pressure if they:

- Have diabetes or kidney disease
- Smoke
- Are overweight
- Are less active
- Have a lot of salt in their diet
- Drink more than 2 alcoholic drinks each day
- Have a family history of high blood pressure
- Are age 65 or older

# Quality Statement 5: Care Planning and Self-Management



## What the standard says

People with hypertension (and their families and care partners) collaborate with their clinicians and use shared decision-making to create a care plan that includes a target blood pressure range, goals for health behaviour change, medication selection and adherence, recommended diagnostic testing, management of concurrent conditions, and when to follow up.



## What this means for you

When you are diagnosed with high blood pressure, your clinicians should work with you to give you information and a care plan that reflects your needs and goals.

Your care plan should include:

- A target range for your blood pressure
- Your goals for changing your diet and managing weight, stress, or other health factors
- Your medication instructions and doses (if needed)
- Any tests you need to have
- When you should have a follow-up appointment

Your clinicians should discuss your care plan with you in person and share it with you in writing.

## Your care plan

You can do a lot to manage your blood pressure. Even simple changes can make a difference:

- Eating a diet that focuses on whole grains, fruits, vegetables, and plant-based proteins
- Limiting stress
- Walking, jogging, cycling, or swimming (as your health allows)
- Staying within a healthy weight range for your height and your age
- Eating less salt
- Drinking less alcohol (abstain or limit to no more than 2 drinks per day)

Your overall health and your age will affect your goals and the target range that is right for you.



# Quality Statement 6: Monitoring and Follow-Up After a Confirmed Diagnosis



## What the standard says

People with hypertension who are actively modifying their health behaviours but not taking blood pressure medication are assessed by their clinician every 3 to 6 months. Shorter intervals (every 1 to 2 months) may be needed for people with higher blood pressure. People who have been prescribed blood pressure medication are assessed every 1 to 2 months until their target blood pressure has been met on 2 consecutive visits, and then every 3 to 6 months.



## What this means for you

Your clinician should follow up with you regularly if you have high blood pressure.

They should see you every 3 to 6 months if you are working to lower your blood pressure by making changes such as getting more exercise, losing weight, or changing your diet.

If you have started taking medication for high blood pressure, they should see you every 1 to 2 months until your blood pressure has been on target for 2 visits in a row. Once your blood pressure is on target, they should see you every 3 to 6 months.

## Write it down

If you can, take notes when you talk with your doctors, nurses, or other clinicians about high blood pressure. You can also ask a friend or family member to come to your appointments and take notes for you.

# Quality Statement 7: Improving Adherence to Medications



## What the standard says

People who are prescribed blood pressure medication (and their families and care partners) receive information and supports to help them take their medication regularly and as prescribed. At every follow-up visit for hypertension, they have discussions with their clinicians about medication use, possible side effects, and any barriers they experience in taking their medications as prescribed.



## What this means for you

Your clinician should ask whether you are taking your blood pressure medication regularly, as prescribed. If you have difficulty taking your medication, they should give you information and support to help you take your medication as prescribed.

## Taking medication

Different medications work in different ways to lower the pressure in your arteries. For example, diuretics (also called “water pills”) help by removing extra salt and fluid from your system. You might need more than 1 type of blood pressure medication, and you might need to try different ones before finding the right combination.

Follow your health care team’s directions for taking your medication. If you have trouble taking your medication:

- Ask if you can take a “once a day” or “twice a day” medication
- Use a chart or calendar to track when you take your medication
- Use a reminder tool (for example, an app on your phone)
- Get help from your pharmacist if other members of your health care team are not available

Keep taking your medication, even when your blood pressure is in your target range. Be sure to talk with your health care team if you are having any side effects.

# Suggestions on what to discuss with your health care team

## Ask the care team:

- What should I do if my blood pressure is high most of the time?
- What could happen if I do not treat my high blood pressure?
- How often should I check my blood pressure?
- What community programs can help me with things like smoking, diet, and exercise?
- Is there any physical activity or exercise I should do or not do if I have high blood pressure?  
How often should I exercise?
- What tracking tools, technologies, or apps can help? What do they cost? Are there any programs that help pay for them?
- What are the possible side effects of my medication? Are there any reasons why someone should not take this medication?
- Can I manage my high blood pressure without medication, or with a lower dose?
- What should I do if I miss a dose of my medication?
- Where can I find more information about my medication?
- I am taking several medications. Can you review my medications to see if any of them affect each other? When would be the best time to take my medications so that they work well?
- Will I be taking this medication for the rest of my life?

## Share with the care team:

- If you have any family history of high blood pressure or other heart conditions
- If there is anything about your diagnosis that you do not understand
- If you smoke, and how often
- If you have any other health problems that they should know about
- If you have any side effects from your medication(s)
- If you are taking any other medications, supplements, or vitamins (they might affect your blood pressure medication)
- If you are worried about the cost of medication
- If you have trouble taking your medication or following your medication schedule
- What matters most to you about your care, and any social supports you may need

# Learn more

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[Hypertension Canada](#) recommends [at-home blood pressure monitors](#) and resources such as:

- [Home Blood Pressure Monitoring: Promoting Patient Self-Measurement](#), a 25-minute educational video that explains why high blood pressure matters, what changes you can make to lower your blood pressure, and how to measure it accurately at home.
- The [Blood Pressure Action Plan](#) to help you manage your blood pressure
- The [Healthy Eating, Healthy Blood Pressure](#) guide to support healthy eating
- A fillable [home blood pressure log](#) to help you track your blood pressure readings

[Heart & Stroke](#) offers resources such as:

- [What can I do to control my blood pressure?](#)
- [The DASH \(Dietary Approaches to Stopping Hypertension\) diet to lower high blood pressure](#)

The American Heart Association provides an information sheet on [how to measure your blood pressure at home](#).

[MediSafe](#) is a free smartphone app that reminds you to take your medications, measure your blood pressure, and go to your medical appointments.

The Ontario [Online Self-Management Program](#) offers free one-on-one health coaching to help you learn to manage your hypertension. [Regional Chronic Disease Self-Management Programs](#) offer workshops and other supports in your area to help you learn to manage your hypertension.

Ontario Health's [Problematic Alcohol Use and Alcohol Use Disorder](#) patient guide includes helpful resources to help you drink less alcohol.

The [STOP Program](#), provided by CAMH, connects people to free medication and counselling to help them stop smoking.

## Need more information?

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If you have any questions or feedback about this guide, please contact us at [QualityStandards@OntarioHealth.ca](mailto:QualityStandards@OntarioHealth.ca) or 1-877-280-8538 (TTY: 1-800-855-0511).

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