

# 2014 Guidelines for the Management of High Blood Pressure



박 만 석

전남대학교 의과대학 신경과

**Man Seok Park, MD, PhD**

Department of Neurology, Chonnam National University Medical School, Gwangju, Korea

---

Recently, important studies have been conducted and many new results have been published on both the diagnosis and treatment of individuals with an elevated blood pressure (BP), making refinements, modifications and expansion of the previous recommendations necessary. Therefore, two new evidence-based guidelines on hypertension were developed from JNC 8 and European Society of Hypertension (ESH) and the European Society of Cardiology (ESC). They strongly recommended that in the general population aged  $\geq 60$  years, pharmacologic treatment should be initiated to lower BP at SBP  $\leq 150$  mmHg or DBP  $\leq 90$  mmHg and treat to a goal SBP  $\leq 150$  mm Hg and goal DBP  $\leq 90$  mmHg. In the general population  $<60$  years, starting pharmacologic treatment to lower BP at DBP  $\leq 90$  mmHg and treat to a goal DBP  $\leq 90$  mmHg was also recommended. Hypertension is the most important modifiable risk factor in both primary and secondary prevention of stroke. Observational studies and clinical trials support blood-pressure reduction for secondary prevention in most patients, regardless of the initial blood-pressure level. Although an absolute target of BP level has not been clearly defined, a reduction in stroke recurrence has been associated with an average lowering of 10/5 mm Hg. However, it is not advisable to decrease BP  $<120/80$  mm Hg, because cerebral autoregulation is disrupted in stroke, so cerebral perfusion could become dependent on BP. It is recommended to make a personalized selection, based on evidence for racial, ethnic, and presence of comorbidities (cardiovascular disease, diabetes, and chronic kidney disease) among four specific antihypertensive classes (diuretics, ACE inhibitors or ARB, or calcium channel blockers). So far, there is no consistent evidence that supports the use of  $\beta$ -blockers for preventing recurrent stroke.

---

**Key Words:** Hypertension; Guideline; Stroke

---

**Man Seok Park, MD, PhD**

Department of Neurology, Chonnam National University Medical School, 42 Jebong-ro, Dong-gu, Gwangju 501-757, Korea

TEL: +82-62-220-6412 FAX: +82-62-228-3461

E-mail: mspark@jnu.ac.kr