



St George Hospital Renal and Hypertension Unit Patient Information Sheet



Lifestyle changes to control your hypertension (high blood pressure)

1. **WEIGHT LOSS:** Excess body fat is the single most important factor contributing to hypertension. Your doctor may have determined your weight and body mass index (BMI). It is now well established that if you are overweight (BMI 26-31) or obese (BMI > 31) then losing weight can lower blood pressure. For example, **5 kg weight loss can lower systolic blood pressure (the higher number in the blood pressure measurement) by 5-6 mmHg.** Your doctor can give you further advice on how to do this.

My weight :kg

My BMI :

2. **EXERCISE:** It has been shown that the equivalent of **walking briskly 3 times per week for a total of 3 hours or more can lower blood pressure** in individuals who are otherwise sedentary. Brisk walking may be as beneficial as vigorous exercise. Increasing your activity should be viewed as an investment in your health. Exercise has other benefits as well, including maintaining weight loss, improving cholesterol, improving sleep and reducing the risk of stroke, heart attack and diabetes.

My exercise prescription:.....

3. **SMOKING CESSATION:** Smoking increases the risk of heart attack and stroke and may also contribute directly to the high blood pressure you suffer. Of course, there are many other deleterious effects of smoking on the body. Daytime blood pressure falls after an individual stops smoking. The increased risk of heart attack and stroke (at least 3 fold) is almost abolished when one stops smoking. It is important that a smoking cessation program is combined with increased physical activity and avoidance of high energy food as weight gain may offset some of the benefit of the smoking cessation.
4. **ALCOHOL:** Even 3 standard drinks per day increases blood pressure. You should try to limit your intake to 2 standard drinks per day (if male) or one standard drink per day (if female) and avoid binge drinking. At this level of consumption, the health benefits of alcohol are balanced against the risks. Your doctor may advise complete abstinence from alcohol if your blood pressure is very high or if you have difficulties limiting intake.
5. **DIET:** Your blood pressure may improve by simply changing from a diet rich in animal protein and fat to a diet that includes fresh fruit, vegetables and nuts; that is low in fat; that includes several servings of fish per week and that avoids added salt. Such a diet has been shown to lower systolic blood pressure by at least 7 mmHg. Your doctor can give you more information about this (called the DASH diet !).
6. **SALT:** Reducing salt intake from the national average of 150 mmol/day (about 3.5 grams/day) to < 100 mmol/day (< 2 g/day) can also lower blood pressure. Using a salt substitute may be suitable for you if you don't have kidney failure, and will provide additional benefit.

The best news is that **the above effects are additive.** It is possible to lower one's blood pressure from the high range to the normal range by these measures alone, particularly for mild forms of hypertension. It may be possible to reduce the number of medications you take by adopting the above lifestyle changes if your hypertension is more severe.

Websites to visit:

More Information:

References:

Beilin L.J. Prescribing lifestyle changes for hypertension. Medicine Today, September 2002, Vol 3, No 9.

The above recommendations should only be considered in consultation with your blood pressure specialist and only under supervision. High blood pressure is a silent disease and although one may feel well using the above lifestyle changes, it is imperative that you are followed up by your specialist and general practitioner as he or she advises to ensure your blood pressure remains controlled.