Figure. 2014 Hypertension Guideline Management Algorithm

1. Adult aged ≥18 years with hypertension

2. Implement lifestyle interventions (continue throughout management).

3. Set blood pressure goal and initiate blood pressure lowering medication based on age, diabetes, and chronic kidney disease (CKD).

4. General population (no diabetes or CKD)
   - Diabetes or CKD present

5. Age ≥60 years
   - Blood pressure goal: SBP <150 mmHg, DBP <90 mmHg
   - No black
   - Initiate thiazide-type diuretic or ACEI or ARB or CCB, alone or in combination. *

6. Age <60 years
   - Blood pressure goal: SBP <<140 mmHg, DBP <90 mmHg
   - Black
   - Initiate thiazide-type diuretic or ACEI or ARB or CCB, alone or in combination.

7. All ages
   - Diabetes present
   - No CKD
   - Initiate ACEI for ARB, alone or in combination with other drug class. *

8. All ages
   - Diabetes present with or without diabetes
   - Blood pressure goal: SBP <140 mmHg, DBP <90 mmHg
   - Initiate ACEI for ARB, alone or in combination with other drug class. *

9. Select a drug treatment titration strategy:
   A. Maximize first medication before adding second or
   B. Add second medication before reaching maximum dose of first medication or
   C. Start with 2 medication classes separately or as fixed-dose combination.

10. At goal blood pressure?
    - Yes
    - Continue current treatment and monitoring. *
    - No
    - Reinforce medication and lifestyle adherence:
      For strategies A and B, add and titrate thiazide-type diuretic or ACEI or ARB or CCB (use medication class not previously selected and avoid combination of ACEI and ARB).
      For strategy C, titrate doses of initial medication to maximum.

11. At goal blood pressure?
    - Yes
    - No
    - Reinforce medication and lifestyle adherence:
      For strategies A and B, add and titrate thiazide-type diuretic or ACEI or ARB or CCB (use medication class not previously selected and avoid combination of ACEI and ARB).

12. At goal blood pressure?
    - Yes
    - No
    - Reinforce medication and lifestyle adherence:
      Add additional medication class (eg, β-blocker, aldosterone antagonists, or others) and/or refer to physician with expertise in hypertension management.

13. At goal blood pressure?
    - Yes
    - No
    - Continue current treatment and monitoring. *

SBP indicates systolic blood pressure; DBP, diastolic blood pressure; ACEI, angiotensin-converting enzyme inhibitor; ARB, angiotensin receptor blocker; and CCB, calcium channel blocker.

*ACEIs and ARBs should not be used in combination.
*If blood pressure fails to be maintained at goal, reenter the algorithm where appropriate based on the current individual therapeutic plan.