

What you may not know about your hypertensive patients

**Shelagh Rogers,
Vancouver, BC**



I had been told ages ago by a doctor that the stress in my job could potentially make me hypertensive. However, I wasn't aware of my hypertension until one day when I fainted in my office and hit my head. I immediately went to my pharmacy and had my blood pressure checked. It read 220/135. The pharmacist was helpful and recommended I get right to my doctor's office. My doctor got the same reading and pulled me off work. I do not smoke, and was unaware of any family history of

hypertension. It ends up that I have a grandfather who died at the age of 49 of a heart attack and a brother with very high blood pressure.

Once I found a drug that worked, the information supplied by the pharmacist was extremely helpful. He knew me, my file, and my medication. He's someone I trusted and considered part of my "fleet." It really is nice to know your pharmacist by his first name and know that he understands your challenges. My last reading was 110/80. I believe both lifestyle and pharmaceuticals have got me where I am now.

Chris Lungstrass, Kanata, ON



Originally, my hypertension was a complication of prednisone therapy for sarcoidosis. My blood pressure went down when the disease went into remission, until the sarcoidosis flared up again about 12 years ago. I've now been stabilized at 125/75

for the last five years on the same medication. My primary concern is keeping the sarcoidosis in remission. It's a secondary benefit that exercise and healthy eating also keep my blood pressure down.

My mother had the same sort of problems, but she wasn't treated and died of congestive heart failure. It has also recently been discovered that my 18-year-old son has hypertension. His pressure was up to 200/130.

We rely on our pharmacist particularly for advice about over-the-counter products for colds and allergies, especially

for our son, who might not pay attention to the possible interactions he could have due to his hypertension. Face it, most health professionals aren't used to dealing with healthy-looking teenagers with high blood pressure.

Danielle Bown,
Montreal, QC

Last year I was diagnosed with stress-related high blood pressure (163/90). With a family history of stroke, I was aware of the importance of good blood pressure. My mother also had high BP and died from post-surgery complications. But still, I never expected to be diagnosed myself. Because of my stressful work situation, my doctor advised a leave of absence and significant lifestyle improvements. Within two weeks, my pressure had improved.

I was lucky that no medica-



tions were needed. I started exercising, cut back on caffeine, reduced my sodium intake, and ultimately chose a less stressful job. I do regular home monitoring and my last pressure was 132/70. People think they're invincible — they have to realize high blood pressure can happen to anyone.

Canadian hypertension research initiatives

i A Passport to Health

An Innovative Program to Improve Management of Cardiovascular Disease Using a Collaborative Model of Care, McMaster University, Hamilton, ON. Contact: Richard H. Tytus (ricktytus@aol.com).

i High Blood Pressure Strategy Provider Management Initiative

The Heart and Stroke Foundation of Ontario in partnership with the College of Family Physicians of Ontario, the Ontario Pharmacists Association and the Registered Nurses Association of Ontario. Contact: Sherrie Hertz (shertz@opato-day.com) or Margaret Moy Lum-Kwong (moylumkwong@hsf.on.ca).

i Airdrie Community Hypertension Awareness and Management Program (A-CHAMP)

A community pharmacy-based awareness and management program conducted in collaboration with community senior volunteers, pharmacists, physicians, and the City of Airdrie. Contact: Scot Simpson (ssimpson@pharmacy.ualberta.ca).

i SCRIP-HIN Study

Sponsored by the Canadian Diabetes Association, Heart and Stroke Foundation of Canada, Canadian Council of Cardiovascular Nurses, Alberta Heritage Foundation for Medical Research, and Merck Frosst Canada Ltd. Contact: Ross T. Tsuyuki (ross.tsuyuki@ualberta.ca).

i Blood Pressure Awareness and Self-Monitoring Practices Among Primary Care Elderly Patients Attending a Pharmacy-based Cardiovascular Awareness Program

Contact: Elaine Lau (lau@mcmaster.ca) or Lisa Dolovich (ldolovic@mcmaster.ca).