

HYPERTENSIVE EMERGENCY VS. URGENCY

HYPERTENSIVE EMERGENCY

"Acute significant elevation of blood pressure, typically systolic BP greater than or equal to 180mmHg and/or diastolic BP greater than or equal to 120mmHg, with signs of new end-organ damage or dysfunction".

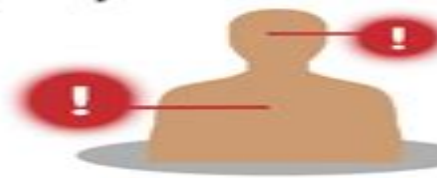
01 Symptoms

Headache, altered mental status, blurred vision, chest pain, dyspnea



02 Initial Investigations*

Check the blood pressure in both arms to assess for aortic dissection, CBC, electrolytes, creatinine, urinalysis, serial troponin, blood gas, urine drug screen (if intoxication suspected), ECG, chest X-ray, non-contrast CT head



*Dependent on symptoms

03 Long-term Investigations

Pheochromocytoma - urinary metanephrines; hyperthyroidism - TSH; hyperaldosteronism - aldosterone renin ratio; scleroderma renal crisis - autoimmune workup, including anti-Scl-70 antibody

"Start by taking a thorough history assessing for symptoms of pheochromocytoma, hyperthyroidism, hyperaldosteronism, and scleroderma renal crisis. History and physical examination trump investigations!"



Management

(note: treatment of hypertensive emergency should be guided by etiology and will require admission to an ICU or step-down ICU setting)

- Target decrease in MAP by 10-20% within the first hour, followed by roughly 25% decrease in MAP in next 24-48h
 - Exceptions are aortic dissection and acute stroke, pre-eclampsia, and scleroderma renal crisis.
- Type A or symptomatic Type B aortic dissections are surgical emergencies
- Asymptomatic Type B aortic dissections should be treated medically
- IV anti-hypertensives
 - Sodium nitroprusside (avoid in stroke, acute MI)
 - Nitroglycerin (avoid in inferior MI, contraindicated if using phosphodiesterase inhibitors)
 - Hydralazine (may cause rebound tachycardia, drug-induced lupus)
 - Labetalol (avoid in acute systolic heart failure)

HYPERTENSIVE URGENCY

"Acute significant elevation of blood pressure, typically systolic BP greater than or equal to 180mmHg and/or diastolic BP greater than or equal to 120mmHg, WITHOUT signs of new end-organ damage or dysfunction".

Management

- Common cause is discontinuation/inadequate dosing of anti-hypertensive medications
- Typically managed by restarting, modifying, or titrating pre-existing oral anti-hypertensive therapy
- Blood pressure should be reduced gradually over 1-2 days

Hypertensive Urgency And Emergency Signup4

Sabine Zange



Hypertensive Urgency And Emergency Signup4:

Newspaper Index: New Orleans Times-Picayune, 1972 Management of Hypertension and Hypertensive Emergencies in the Emergency Department James W. Hoekstra, 2008 *Hypertensive Crisis: Pathophysiology, Management, and Prognosis* Dr. Spineanu Eugenia, 2025-02-19 Explore Hypertensive Crisis Pathophysiology Management and Prognosis a comprehensive guide revealing insights into the intricate mechanisms urgent management strategies and long term prognosis of hypertensive emergencies and urgencies Delve into the complexities of blood pressure regulation from neurohormonal pathways to acute end organ damage Discover evidence based approaches to immediate intervention including pharmacological treatments and non pharmacological measures like mechanical ventilation Gain invaluable perspectives on chronic complications affecting vital organs and cognitive functions This treatise illuminates the latest advancements in therapeutic innovations and public health strategies aimed at reducing the global burden of hypertensive crises Essential reading for healthcare professionals and researchers dedicated to optimizing patient outcomes and enhancing cardiovascular health worldwide Hypertension Elizabeth W Edwards, Donald DiPette, 2019-07-31 Hypertension is another name for high blood pressure It can lead to severe complications and increases the risk of heart disease stroke and death Blood pressure is the force exerted by the blood against the walls of the blood vessels This book is a comprehensive guide to the diagnosis and management of high blood pressure Divided into three sections the text begins with an overview of the condition current guidelines on its management potential organ damage and nonpharmacological treatments The next section covers the management of hypertension with associated disorders such as diabetes cardiovascular disease stroke kidney disease and more A complete chapter discusses white coat hypertension The final section discusses management approaches when initial treatment fails and hypertensive emergencies Each chapter is presented as a case scenario describing background previous control attempts challenges and treatments Authored by experts from the University of South Carolina the text is further enhanced by clinical images figures and tables Key points Comprehensive guide to diagnosis and management of hypertension Chapters presented as step by step case scenarios Covers treatment of hypertension with associated conditions Authored by experts from the University of South Carolina *Hypertensive Emergencies* C. Venkata S. Ram, 1982 *The Practical Management of Patients with Severe Hypertension and Hypertensive Emergencies*, Hypertensive Emergencies Tomas Janota, 2015 *Hypertension* C. Venkata S. Ram, 2014-01-08 Hypertension has become a major public health hazard not only in industrialized nations but also in emerging economies Early detection combined with effective treatment is imperative to reduce the risk of patients developing premature cardiovascular disease and accelerated atherosclerosis A clear concise resource Hypertension A Clinical Guide Emergency Diagnosis and Therapy of a Hypertensive Crisis H. Geiger, U. Bahner, 1989 *Hypertension* Elizabeth W Edwards, Donald J DiPette, 2024-07-09 Hypertension is another name for high blood pressure It can lead to severe

complications and increases the risk of heart disease stroke and death Blood pressure is the force exerted by the blood against the walls of the blood vessels This book is a comprehensive guide to the diagnosis and management of high blood pressure Divided into three sections the text begins with an overview of the condition current guidelines on its management potential organ damage and nonpharmacological treatments The next section covers the management of hypertension with associated disorders such as diabetes cardiovascular disease stroke kidney disease and more A complete chapter is dedicated to white coat hypertension The final section discusses management approaches when initial treatment fails and hypertensive emergencies Each chapter is presented as a case scenario describing prevention diagnosis previous control attempts challenges and treatments both pharmacological and nonpharmacological This second edition has been fully revised and updated to provide clinicians and trainees with the latest advances and knowledge in the field A number of new topics have also been included Authored by experts from the University of South Carolina the text is further enhanced by clinical images figures and tables The previous edition 9789386261489 published in 2019 *Hypertension* Matthew R. Weir, 2005 How low should we go What drugs should we use How do we achieve lower blood pressure goals This how to manual in hypertension presents concise practical up to date information on the diagnosis and management of hypertension with emphasis on current drug therapies Generous use of tables charts bulleted information and figures make this a timely and easily accessible volume

Hypertension Isla S. Mackenzie, Ian Boden Wilkinson, John R. Cockcroft, 2005 This pocketbook is a guide for hospital doctors general practitioners and other health care professionals involved in the care of patients with hypertension Using a similar format to that of the other titles in the Churchill's Pocketbook series it clearly and concisely details the important points of the origins diagnosis investigation and treatment of hypertension taking full account of the latest evidence available It provides information on hypertension in special patient groups including the elderly and in pregnancy and on the management of hypertensive emergencies A special chapter at the end is devoted to answering the questions that are most frequently asked by GPs and patients A concise and authoritative guide for all working in the care of patients with hypertension Illustrative with two colour line drawings as well as colour and black and white photographs Written by three specialists in the field of hypertension A user friendly well referenced and up to date source of information on all the main aspects of hypertension **The American Medical Association Essential Guide to Hypertension** American Medical Association, 2000-04 High blood pressure or hypertension affects about one in four Americans but this potentially life threatening condition can exist virtually without symptoms Now the latest medical advances that can help prevent the damaging effects of hypertension are compiled in a convenient reference under the authority of the American Medical Association Here is clear concise information that can help you to Understand all aspects of hypertension what it is who is at risk how it affects the body and how it is diagnosed Learn about your cardiovascular system and how your body controls blood pressure Discover the treatable causes of hypertension from certain physical disorders and illnesses to side effects of

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Hypertensive Episodes in the Non-urgent Emergency Department Patient Michael L. McCoy,1992 *Textbook of Hypertension* John Swales,1994-07-27 Hypertension is one of the most significant clinical problems facing the physician It is also one of the most difficult to treat This book provides the practicing general physician a coherent well structured and above all relevant account of the scientific basis and clinical management of hypertension It is not simply a guide to prescribing drugs nor is it an encyclopaedic guide to the primary literature Instead it presents a summary of the underlying pathophysiological mechanisms to provide the clinician with a rational basis for treatment and goes on to describe the consequences of hypertension in terms of target organ damage the various sub groups secondary hypertension clinical assessment and investigation treatment new developments national guidelines and standards pharmacological and non pharmacological therapies operating on the hypertensive patient hypertensive emergencies and social impact Standard Treatment Guidelines for Hypertension Mr. Rohit Manglik,2024-07-30 This manual presents standardized updated treatment pathways for hypertension ensuring uniform care practices aligned with national and international cardiovascular guidelines

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