

CHIEF COMPLAINT

Hypertension

COMMENTS TO SPECIALIST

71-year-old Hispanic female patient with a history of hypertension and type 2 diabetes. Pressures are still above goal. Patient reports taking her blood pressure medication daily. Denies cardiac complaints.

Her blood pressure in the office was 167/72. Three months ago, it was 146/83 and two weeks later it was 168/72. Patient reported at that time that her ranges at home were 130-150/70-90.

MAIN QUESTION

Can you offer advice on how the patient can keep blood pressure within the goal range?



Response from eConsult Specialist

BENJAMIN DOUGLAS, MD, CARDIOLOGY

NPI: 1000000005

SUMMARY

Treatment options available at the primary care level.

DETAILS

For blood pressure management, have your patient monitor her blood pressure in morning prior to taking her medication and before going to bed at night.

Discontinue Metoprolol (Lopressor) and replace with Losartan-HCTZ combination. Start 100/12.5 mg in morning and increase to 100/25 mg, if needed.

You could then add Amlodipine or Nifedipine if blood pressure remains high. Use measurements to determine when to dose. If high in the evening, add medication in the morning. If high in the morning, add medication in the evening.

NOTE: Beta blocker only indicated if reduced ejection fraction or post myocardial infarction; or tachycardia. Please note beta blocker may make it hard for your patient to lose weight and may worsen her diabetes control.

Please stop the Janumet-Metformin combo and place her on Semaglutide (ozempic) and Metformin. Semaglutide will improve glycemic control and will help her with weight loss.

I suspect that with weight loss she won't need much blood pressure medication. Please slowly decrease insulin as glucose improves. Remember that insulin will make her gain and retain weight which is counterproductive. Try to replace insulin with GLP1 and SGLT-2.

Benjamin Douglas

Benjamin Douglas, MD, Cardiology

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