

Hypertension Change Package Algorithm

- Widely acceptable and effective algorithm using inexpensive combination therapy
- May lead to under-dosing of HCTZ (failure to intensify dose)
- Effective dose for BP reduction and CV outcome for HCTZ is 25-50 mg day, not 12.5-25 mg/day commonly used in primary care settings
- Evidence of increased BP control rates and reduction in BP control
- However, BP control gap exists between African American and non-African American hypertensives with use of this algorithm

