



# Comparison of Blood Pressure Targets from Key Guidelines 2017-2024

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The table below summarizes many of the major hypertension guidelines. All guidelines mention the need to individualize the blood pressure target, recognizing that a lower blood pressure target may not be appropriate for some people (e.g., those with advanced dementia or prior syncope).

**Table 1. Recent Hypertension Guideline Recommendations**

Guideline	Evidence Review Methodology	BP Target		
		General Adult Population	High Cardiovascular Disease Risk Groups	CKD and DM
<b>ACC/AHA (2017)</b> <sup>1</sup>	Consensus (Graded)			<130/80
<b>VA/DoD (2020)</b> <sup>2</sup>	Consensus (Graded)			<130/90*
<b>CHEP (2020)</b> <sup>3</sup>	Consensus (Graded)	<140/90	SBP <120	<b>Nondiabetic CKD:</b> <ul style="list-style-type: none"> <li>Meeting SPRINT criteria: SBP &lt;120**</li> <li>APCKD: SBP &lt;110</li> <li>All others: SBP &lt;140</li> </ul> <b>DM:</b> SBP <130/80
<b>WHO (2021)</b> <sup>4</sup>	Consensus	<140/90		SBP <130
<b>KDIGO (2021)</b> <sup>5</sup>	Consensus (Graded)			<b>CKD:</b> SBP <120
<b>AAFP (2022)</b> <sup>6</sup>	Systematic Review			< 140/90***
<b>NICE (2023)</b> <sup>7</sup>	Systematic Review	<b>Age &lt;80:</b> <140/90 <b>Age ≥80:</b> <150/90		<b>Age &lt;80, CKD or T1DM:</b> <ul style="list-style-type: none"> <li>uACR &lt;70 mg/mmol: &lt;140/90</li> <li>uACR ≥70 mg/mmol: &lt;130/80</li> </ul> <b>Age ≥80, CKD:</b> <ul style="list-style-type: none"> <li>uACR &lt;70mg/mmol: &lt;140/90</li> <li>uACR ≥70mg/mmol: &lt;130/80</li> </ul>
<b>ADA (2024)</b> <sup>8</sup>	Consensus			<b>DM:</b> <130/80
<b>ESC (2024)</b> <sup>9</sup>	Consensus (Graded)			120-129/70-79****

\*If less stringent goal is desired per clinical judgment and/or patient preference, aim for at least: SBP <150 mmHg in individuals age ≥60 and SBP <140 mmHg in individuals age ≥60 with T2DM.

\*\*SPRINT criteria include age ≥50 years and at elevated cardiovascular risk with SBP 130-180 mmHg.

\*\*\*Lower targets are reasonable based on clinical judgment and patient preferences or values.

\*\*\*\*If well tolerated by the patient with a strong emphasis on out-of-office BP measurements.

AAFP=American Academy of Family Physicians; ACC=American College of Cardiology; ADA=American Diabetes Association; AHA=American Heart Association; APCKD=adult polycystic kidney disease; BP=blood pressure; CHP=Canadian Hypertension Education Program; CKD=chronic kidney disease; DM=diabetes mellitus; DoD=Department of Defense [United States]; ESC=European Society of Cardiology; KDIGO=Kidney Disease: Improving Global Outcomes; NICE=National Institute for Health and Care Excellence [England]; SBP=systolic blood pressure; SPRINT=Systolic Blood Pressure Intervention Trial; T1DM=type 1 diabetes mellitus; uACR = urine albumin to creatine ratio; VA=Veterans Affairs [United States]; WHO=World Health Organization.

## References

1. Whelton PK, Carey RM, Aronow WS, et al. 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APhA/ASH/ASPC/NMA/PCNA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults: Executive Summary: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. *Circulation*. 2018;138(17):e426-e483. doi:10.1161/CIR.0000000000000597.
2. United States Department of Veterans Affairs and United States Department of Defense. VA/DoD Clinical Practice Guideline for the Diagnosis and Management of Hypertension in the Primary Care Setting. <https://www.healthquality.va.gov/guidelines/CD/htn/VADoDCPGDiagnosisManagementHTNPrimaryCareSettingFullCPG462020.pdf>. Published 2020. Accessed November 21, 2024.
3. Rabi DM, McBrien KA, Sapir-Pichhadze R, et al. Hypertension Canada's 2020 Comprehensive Guidelines for the Prevention, Diagnosis, Risk Assessment, and Treatment of Hypertension in Adults and Children. *Can J Cardiol*. 2020;36(5):596-624. doi:10.1016/j.cjca.2020.02.086.
4. World Health Organization. Guideline for the Pharmacological Treatment of Hypertension in Adults. <https://www.who.int/publications/i/item/9789240033986>. Published August 24, 2021. Accessed November 21, 2024.
5. Kidney Disease: Improving Global Outcomes (KDIGO) Blood Pressure Work Group. KDIGO 2021 Clinical Practice Guideline for the Management of Blood Pressure in Chronic Kidney Disease. *Kidney Int*. 2021;99(3S):S1-S87. doi:10.1016/j.kint.2020.11.003.
6. Coles S, Fisher L, Lin KW, et al. Blood pressure targets in adults with hypertension: a clinical practice guideline from the AAFP. *Am Fam Physician*. 2022;106(6):Online.
7. National Institute for Health and Care Excellence (NICE). Hypertension in Adults: Diagnosis and Management. <https://www.nice.org.uk/guidance/ng136>. Updated November 21, 2023. Accessed November 21, 2024.
8. American Diabetes Association Professional Practice Committee. 10. Cardiovascular Disease and Risk Management: Standards of Care in Diabetes-2024. *Diabetes Care*. 2024;47(Suppl 1):S179-S218. doi:10.2337/dc24-S010.
9. McEvoy JW, McCarthy CP, Bruno RM, et al. 2024 ESC Guidelines for the Management of Elevated Blood Pressure and Hypertension: developed by the task force on the management of elevated blood pressure and hypertension of the European Society of Cardiology (ESC) and endorsed by the European Society of Endocrinology (ESE) and the European Stroke Organisation (ESO). *Eur Heart J*. 2024;45(38):3912-4018.doi:10.1093/eurheartj/ehae178.

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