International Conference on Pancreatic Disorders and Treatment

October 17-19, 2016 Chicago, USA

Hypertension: What are we treating? What should we be treating?

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Clinic patients have hypertension monitored as part of the vital signs. This practice only dates to World War I. The history of blood pressure measurement is investigated form Stephen Hales to smart phone technology. Twenty-four hour monitoring may be a better tool than office measurement. The VA Cooperative Study Group demonstrated success in prevention of serious event with as little as 143 and 380 patients. Trials today need thousands of patients as blood pressure goals drop below a diastolic of 90 mmHg. This suggests that traditional blood pressure measurement may not be the correct surrogate for drug assessment and prevention of end organ damage. Arterial stiffness is better predictor of outcomes than systolic and diastolic blood pressure measurement. Fundamental laws of biology suggest diet and exercise is paramount in preventing hypertension just as in Diabetes II. Successful drugs in the future will help restore compliance to vessels infiltrated with lipids and inflammatory stiffness.

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