Chapter 3:

LEARNING OBJECTIVES

On completion of the chapter, the reader will be able to:

1. Describe arterial blood pressure (BP), the regulation of BP, and the pathophysiology of hypertension.
2. Identify cardiovascular (CV) complications that are associated with hypertension (a.k.a., hypertension-related target-organ damage).
4. Describe the appropriate procedures and criteria needed to diagnose hypertension.
5. State the overall purpose of treating hypertension.
6. Identify appropriate BP goals that are determined based on patient-specific presentations.
7. Recommend lifestyle modifications for the management of hypertension and describe the effectiveness of these modifications.
8. Outline the management of patients with prehypertension and hypertension.
9. Compare and contrast the clinical characteristics (pharmacology/mechanism of action, benefits, adverse effects, interactions, unique dosing considerations, contraindications, monitoring) of antihypertensive drugs.
10. Identify evidence-based pharmacotherapy options for first-line treatment of patients with hypertension who do not have compelling indications.
11. Outline evidence-based standard and add-on pharmacotherapy recommendations for patients with hypertension and compelling indications (i.e., left ventricular dysfunction, post–myocardial infarction, coronary artery disease, diabetes, chronic kidney disease, and recurrent stroke prevention), and describe supporting evidence for these recommendations.
12. Identify the clinical use and characteristics of alternative antihypertensive agents.
13. List important components of patient counseling regarding hypertension, lifestyle modification, and drug therapy.
14. Identify potential causes for lack of responsiveness to therapy.
15. Describe the rationale, benefits, and appropriate use of combination drug therapy for managing hypertension.
16. Devise appropriate therapy and monitoring plans for patients with hypertension.
17. Compare and contrast the goals of treatment and pharmacotherapy for managing hypertensive urgency and emergency.
18. Identify patients with resistant hypertension and recommend pharmacotherapy for these patients.