

Screening for High Blood Pressure: U.S. Preventive Services Task Force Recommendation

Summaries for Patients are a service provided by *Annals* to help patients better understand the complicated and often mystifying language of modern medicine.

The full reports are titled “Screening for High Blood Pressure: U.S. Preventive Services Task Force Reaffirmation Recommendation Statement” and “Evidence for the Reaffirmation of the U.S. Preventive Services Task Force Recommendation on Screening for High Blood Pressure.” They are in the 4 December 2007 issue of *Annals of Internal Medicine* (volume 147, pages 783-786 and pages 787-791). The first report was written by the U.S. Preventive Services Task Force; the second report was written by T. Wolff and T. Miller.

Who developed these guidelines?

The U.S. Preventive Services Task Force (USPSTF) is a group of health experts that reviews published research and makes recommendations about preventive health care.

What is the problem and what is known about it so far?

High blood pressure (hypertension) is one of the most common chronic conditions in adults. High blood pressure strains the heart and harms blood vessels. It increases the risk for such complications as heart problems, stroke, kidney problems, and eye problems. Diet, exercise, and drugs can decrease blood pressure and decrease the chances of these complications.

People with high blood pressure usually don't have symptoms, so they usually don't know that they have it until someone measures their blood pressure. Screening for high blood pressure involves routinely measuring blood pressure in people even if they feel well. Normal blood pressures are lower than 140 mm Hg systolic (the first number, which is measured when the heart is pumping) and lower than 90 mm Hg diastolic (the second number, which is measured when the heart is relaxing).

Health care organizations, including the USPSTF, have recommended screening for high blood pressure because the condition is common, blood pressure measurement is easy and safe, there are usually no symptoms until complications develop, and good treatments are available. The benefits of screening include preventing complications. The harms of screening include prescribing drugs that may cause side effects to people with early high blood pressure. The USPSTF reviewed the research published since their last recommendation about blood pressure screening in 2003 to be sure that the benefits of screening still outweigh the potential harms.

How did the USPSTF develop these recommendations?

The USPSTF reviewed published research to evaluate the benefits and harms of screening for high blood pressure.

What did the authors find?

The authors found no new research about the benefits of screening for high blood pressure. New studies about the harms of drug treatment for early high blood pressure show that although minor side effects are common, serious side effects are rare. There is a high level of certainty that the benefits of screening for high blood pressure outweigh the harms.

What does the USPSTF suggest that patients and doctors do?

People 18 years of age or older should have their blood pressure measured.

What are the cautions related to these recommendations?

No studies provide clear information about how often blood pressure screening should be done. In addition to measuring blood pressure in people age 18 years or older, blood pressure should also be measured whenever a patient has a symptom or condition that might be the result of high blood pressure.