

Management of patients with arterial hypertension in Italy: A Consensus Document of the Italian Society of Hypertension (SIIA) and the Italian Society for Cardiovascular Prevention (SIPREC) about the recommended care pathway and areas for improvement

High Blood Pressure & Cardiovascular Prevention

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Supplementary Information (SI)

Detailed description of the patient journey according to the phase of the care process (diagnosis, treatment, and follow-up)

References

FIG.S1 Diagnostic suspicion, risk stratification, and diagnosis of hypertension

Refer to paragraph 2.1 in the main text for further details. ¹For reference, see Table 1; ²for reference, see Table 2; ³for reference, see Table 3;

ABPM, Ambulatory Blood Pressure Monitoring; CV, Cardiovascular; DBP, Diastolic Blood Pressure; ECG, Electrocardiogram; HBPM, Home Blood Pressure Monitoring; HTN, Hypertension; GP, General Practitioner; BP, Blood Pressure; SBP, Systolic Blood Pressure.

FIG. S2.A Evaluation of patient with suspected white coat hypertension

Refer to paragraph 2.2 in the main text for further details. ¹For reference, see Table 2; ABPM, ambulatory blood pressure monitoring; CV, cardiovascular; HMOD, Hypertension-mediated Organ Damage; HBPM, Home Blood Pressure Monitoring; HTN, Hypertension; GP, General Practitioner; BP, Blood Pressure

FIG. S2.B Evaluation of a patient with suspected masked hypertension

Refer to paragraph 2.2 in the main text for further details. ¹For reference, see Table 2; ABPM, ambulatory blood pressure monitoring; CV, cardiovascular; HMOD, Hypertension-mediated Organ Damage; HBPM, Home Blood Pressure Monitoring; HTN, Hypertension; GP, General Practitioner; BP, Blood Pressure

FIG. S3 Treatment

Refer to paragraph 2.3 in the main text for further details. For patients with comorbidities such as HF, CKD, T2DM, and obesity, consider adding SGLT2i/GLP1RA/ARNI/MRA to baseline treatment, in accordance with the specific prescribing indications of each medication., ACEi, Angiotensin-converting Enzyme Inhibitors; ARB, Angiotensin II Receptor Blockers; BB, Beta-blockers; CCB, Calcium Channel Blockers; CKD, Chronic Kidney Disease; CV, Cardiovascular; T2DM, Type 2 Diabetes Mellitus; HTN, Hypertension; GP, General Practitioner; BP, Blood Pressure; HF, Heart Failure; SGLT2i, Sodium-glucose Cotransporter-2 Inhibitors

FIG. S4 Confirmation of Resistant Hypertension Diagnosis

Refer to paragraph 2.4 in the main text for further details. BP, Blood Pressure; HTN, Hypertension

FIG. S5 Management of Patients Diagnosed with Resistant Hypertension

Refer to paragraph 2.5 in the main text for further details. AB, Alpha-blockers; BB, Beta-blockers; BP, Blood Pressure; EGFR, Estimated Glomerular Filtration Rate; HTN, Hypertension; MRAs, Mineralocorticoid Receptor Antagonists

FIG. S6 Follow up

Refer to paragraph 2.6 in the main text for further details. BP, Blood Pressure; ECG, Electrocardiogram; GP, General Practitioner; HTN, Hypertension

Fig. S1

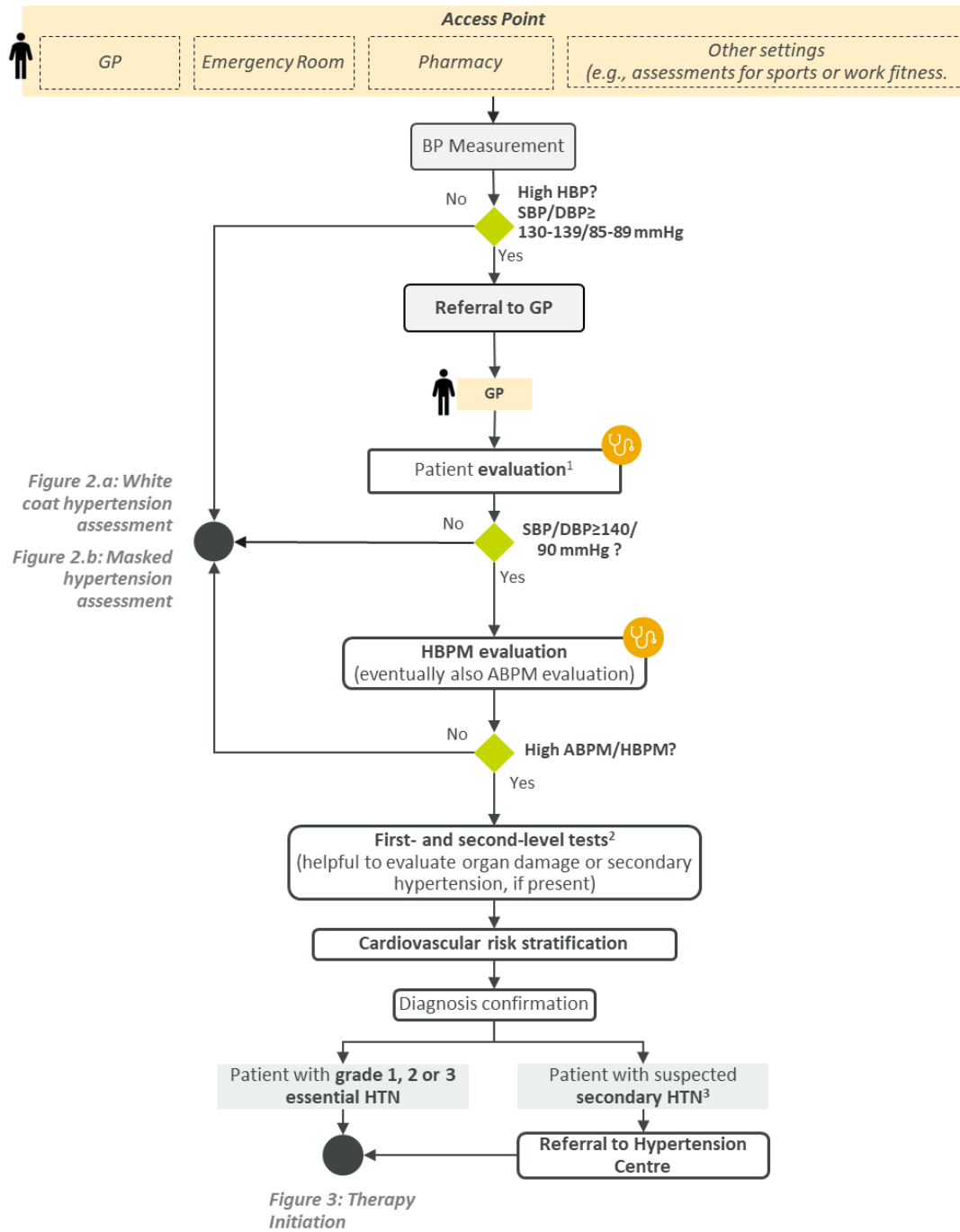


Fig. S2.a

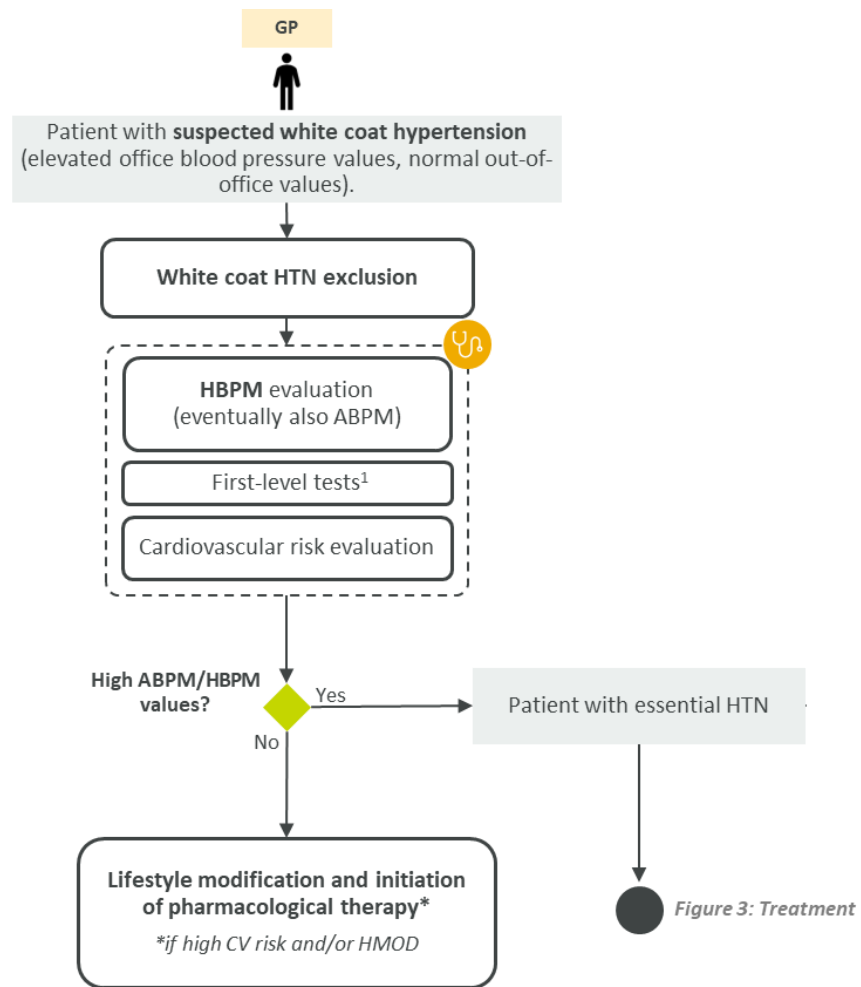


Fig. S2.b

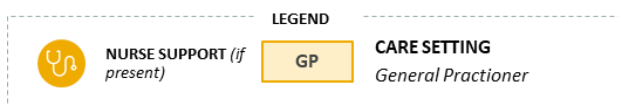
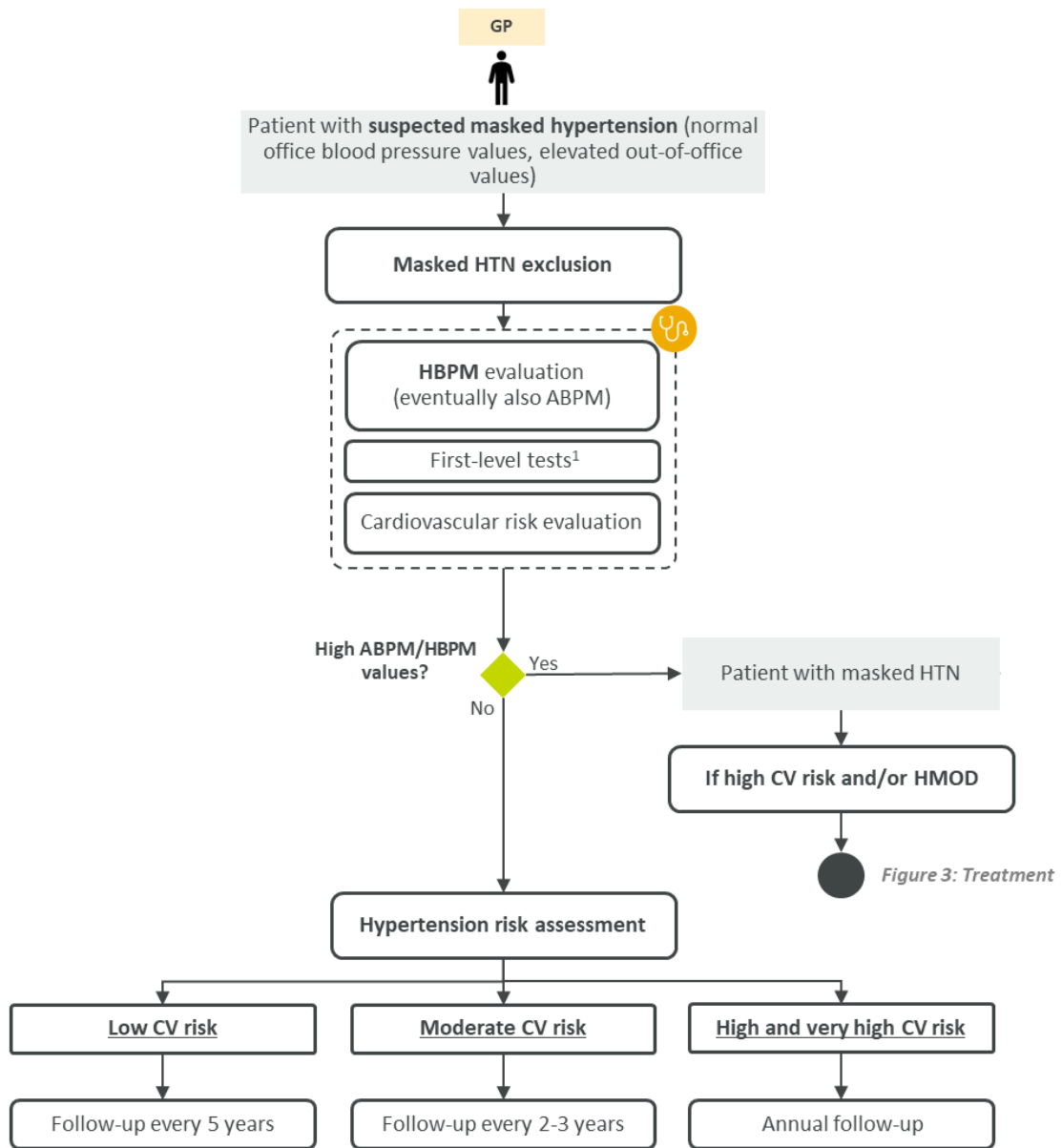


Fig. S3

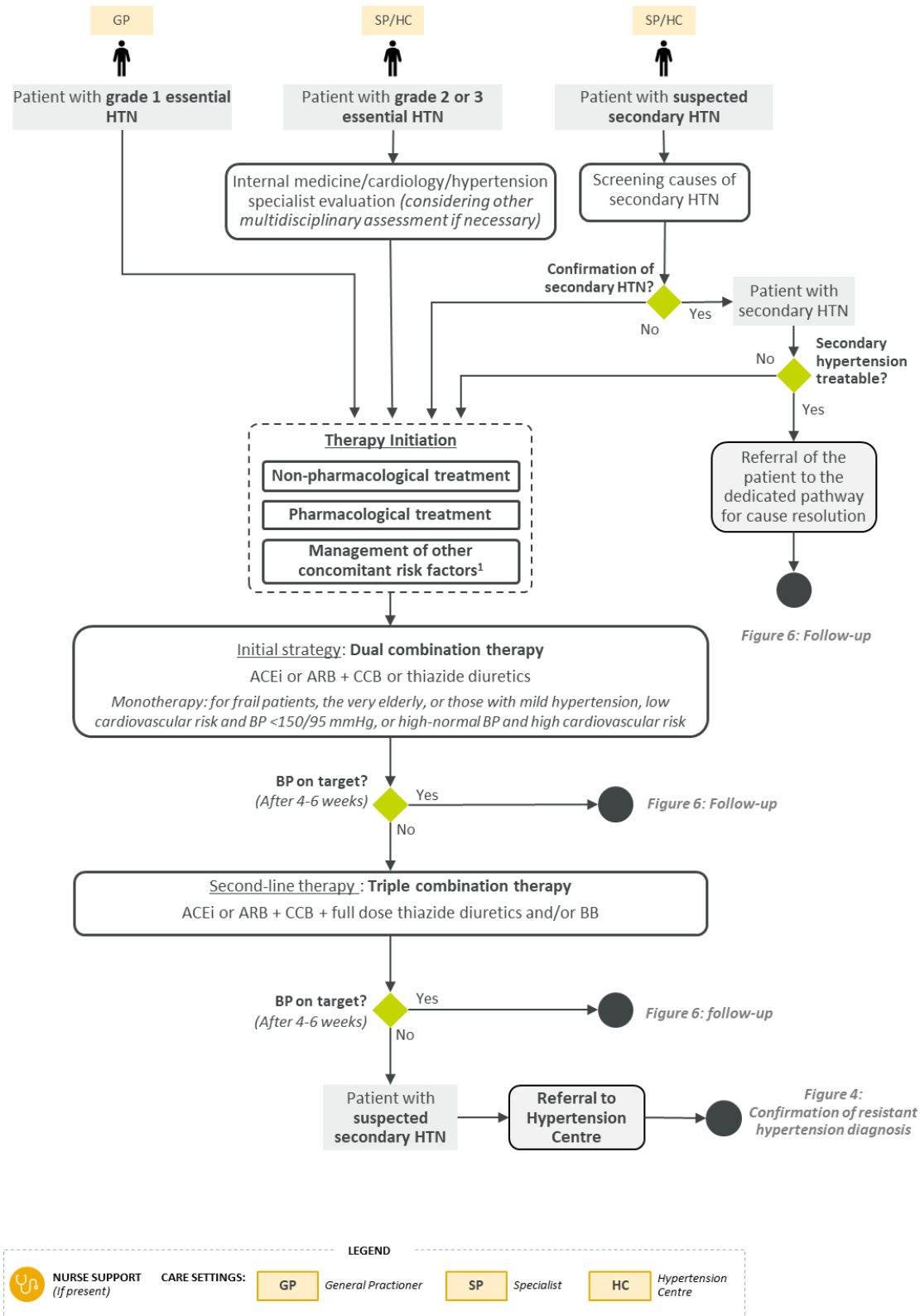


Fig. S4

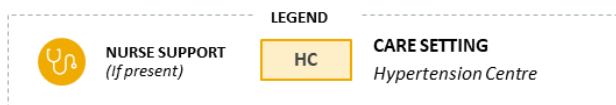
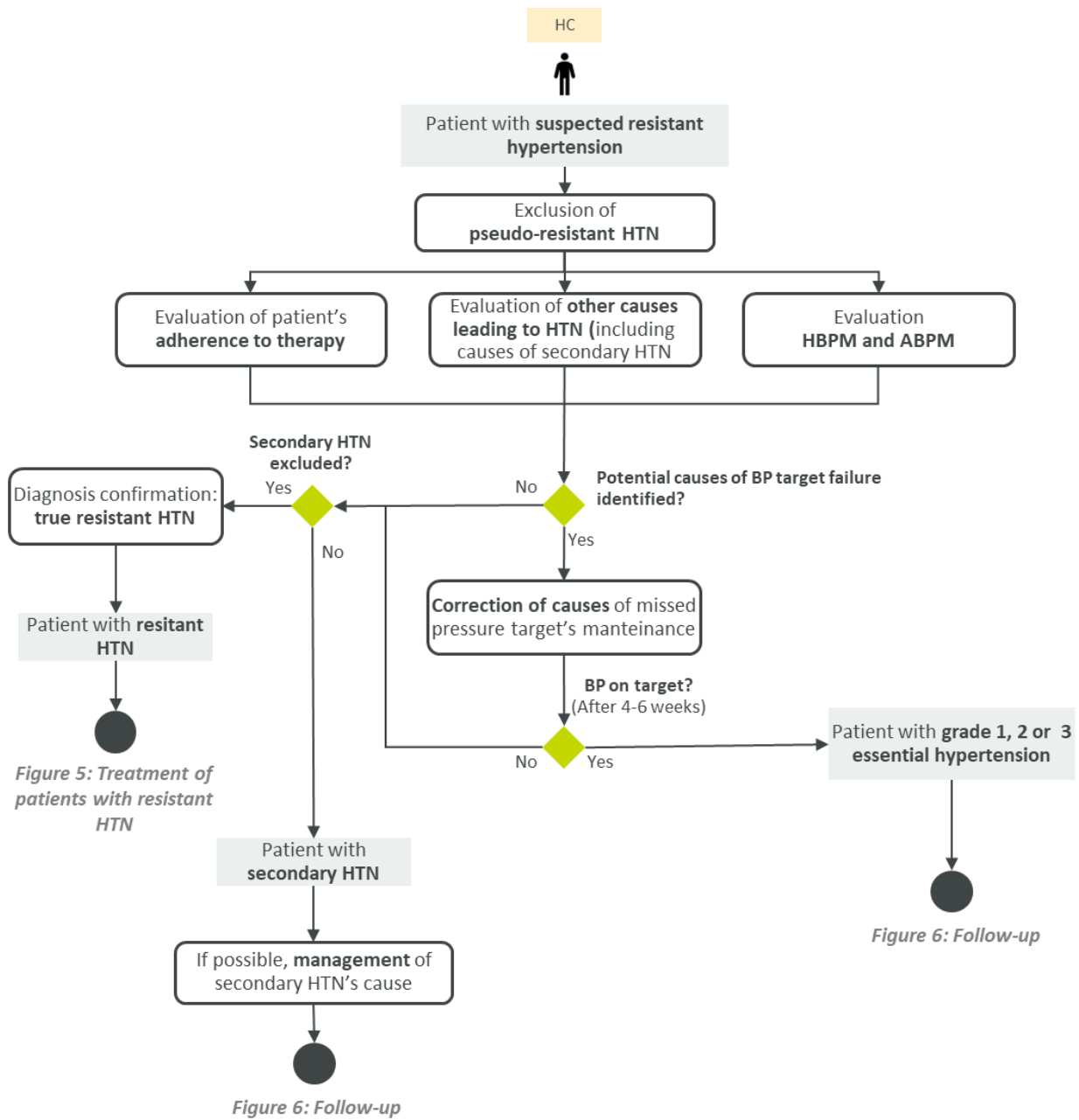


Fig. S5

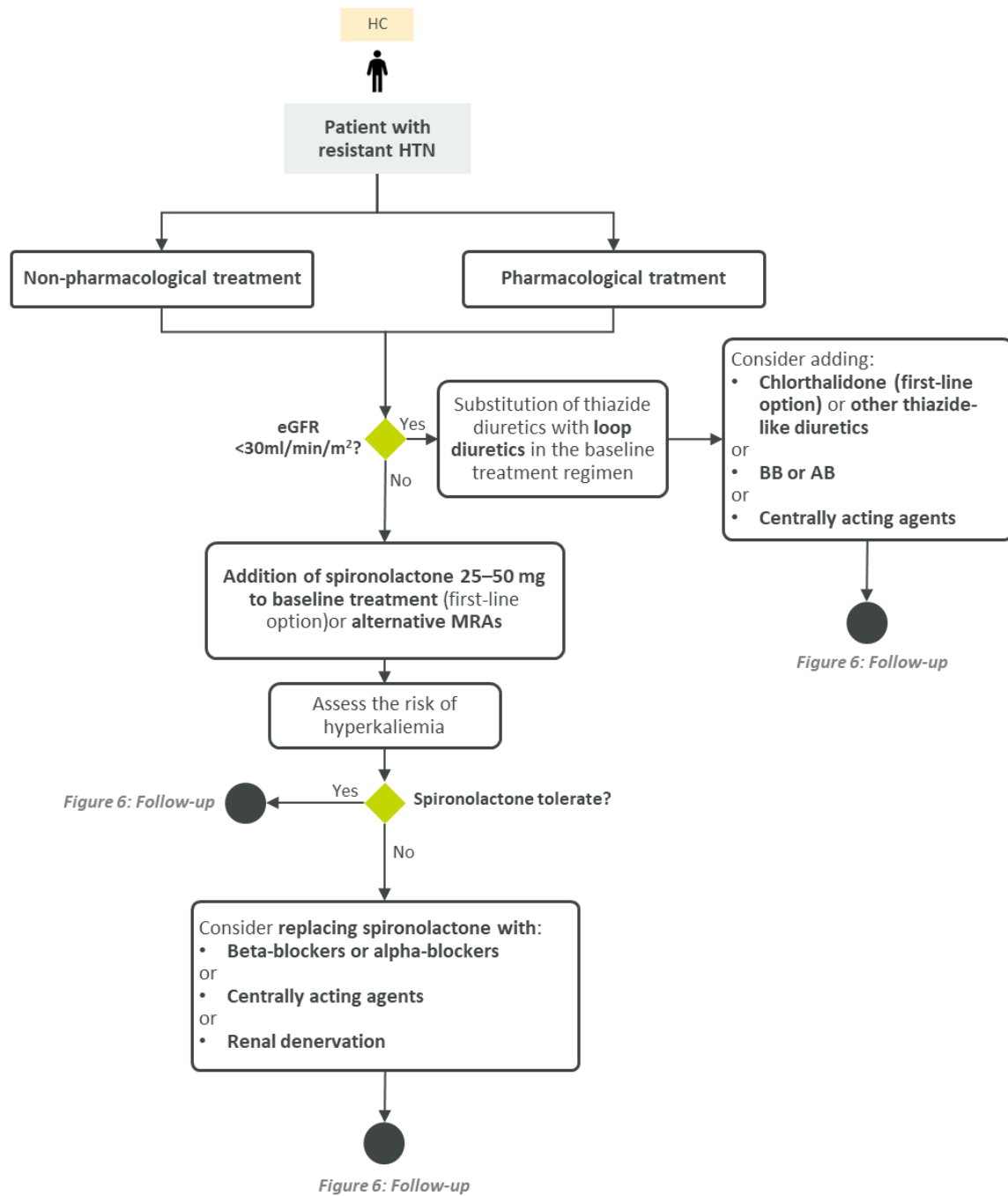


Fig. S6

