CASE 1

78 yo female presents with complaints of dizziness and fatigue. Hx of insomnia, depression and osteoporosis. Her husband died 2 years ago and she is living at a group home with assistance. She used the aid of a walker due to some weakness and imbalance but ambulates well. She enjoys walking outside the facilities and remains active with the group activities.

Medications: Alendronate 10mg Qd, Citalopram 20mg Qd, Trazodone 25mg Qhs, Psyllium, Docusate

BP: 168/96 HR 72 Scr 1.3, Potassium 4.0,

Reviewing the records you notice her blood pressure has been elevated for the past 3 visits.

Do you recommend blood pressure therapy?

What is your goal blood pressure?

Recommend a 1st line agent?

CASE 2

68 yo female presents for f/u. Hx of IDDM, HTN, Hyperlipidemia, Retinopathy, Dialysis 3 days/week, Peripheral neuropathy, recurrent leg ulcers, and Depression. The provider requests you review her medication list requesting assistance with controlling her blood pressure. She dislikes taking her blood pressure medications particularly after dialysis because of dizziness and increased fatigue which is excerbated after taking the atenolol.

Medications: NPH 10 bid, Reg 2-8 units prior to meals, Sertraline 25mg Qd, Simvastatin 20mg Qd, Nephro vit Qd, Warfarin 4mg Qd, Atenolol 25mg 3 Qd, furosemide 80mg Qd, Calcium Acetate 667 2Tid.

BP 166/88 HR 82 Post dialysis 110/60 HA1C 6.8%, LDL 120 , Scr 5.8

The provider requests you review her medication list requesting assistance with controlling her blood pressure.

What is her goal blood pressure?

What is your plan for controlling blood pressure and reducing dizziness and fatigue