Hypertension means high blood pressure, and is present when your blood pressure is greater than normal levels for the population. There are two types of blood pressure that we measure — systolic and diastolic. The systolic blood pressure is the pressure at the moment the heart pumps the blood into the circulation and the diastolic blood pressure is that when the heart relaxes and takes in blood. Both levels of pressure are very important.

Blood pressure is measured in millimetres of mercury (mmHg). We have hypertension when our pressure is greater than either 140mmHg systolic pressure or 90mmHg diastolic pressure, which are the standard uppermost limits of normal. Blood pressure is considered very high when it is more than 180mmHg systolic or 110mmHg diastolic.

What causes it?
In 95% of cases there is no identifiable cause — it just happens that way. The pressure in our arteries is high because the heart pumps too hard and the arteries are too narrow. This is like the pressure in a hose — the further we turn up the tap and the narrower the hose, the greater the pressure. Sometimes hypertension is caused by a kidney problem or some other rare disorder. Drinking excessive amounts of alcohol is also an important cause.

Who gets hypertension?
Anyone can get it. It is very common and affects about 15-20% of the adult population in Western countries. Blood pressure tends to rise as we get older. However, most people are not aware they have it; it rarely gives warning symptoms.

What are the symptoms?
Usually there are none. People with very high blood pressure can feel quite well. It is rare to feel headache, palpitations or sick until complications set in.

What are the risks of having it?
People with high blood pressure are more likely to have strokes and heart attacks than people with normal blood pressure. The risk increases as the blood pressure rises. With time the pressure can cause the heart and kidneys to wear out, that is, heart failure and kidney failure. By keeping the blood pressure within normal limits, we reduce the risk of strokes, heart trouble, including coronary attacks, and kidney failure.

What is the treatment?
Medication (called antihypertensive medication) can reduce your high blood pressure, but it might be possible to lower your blood pressure to normal by leading a sensible, healthy lifestyle. This self-help may avoid a lifelong commitment to drugs.

Self-help
- Diet: Follow a nutritious, low-fat diet.
- Salt: Put away the salt shaker — use only a little salt with your food.
- Obesity: Aim to keep to your ideal weight.
- Alcohol: Aim for either none or only small amounts (maximum of two standard drinks a day).
- Stress: Avoid stress and overwork. Consider relaxation or meditation classes.
- Exercise: Exercise regularly, aim for 30 minutes of daily activity such as walking.
- Smoking: This does not seem to cause high blood pressure, but is a risk factor for heart disease, so please stop.

Medication
If natural measures do not bring down your blood pressure, tablets will be necessary. The tablets act by softening the strong pumping action of the heart, relaxing the tight arteries or reducing the body chemicals that control your blood pressure. The tablets must be taken regularly as directed and never stopped unless advised by your doctor.

How often should your blood pressure be checked?
If your blood pressure is found to be normal it should then be measured every 1-2 years by your doctor. If you are over 40 years, it is wise to have it checked every year because it tends to creep up with age. Women on the pill need to be checked regularly.