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Editorial

Artigo Comentado

Comparação entre as Diretrizes de Hipertensão
ACC/AHA e ESC/ESH

Trabalhos com Melhor Classificação (1º ao 3º
Lugar) Apresentados no IX Congresso Piauiense
de Cardiologia

Mensagem do Presidente do XXXIX Congresso
Norte Nordeste de Cardiologia / XXVIII
Congresso Paraense de Cardiologia

Memórias da SNNC

CENTRAL ILLUSTRATION Comparison of American and European Society Definitions and Management of Hypertension

Guideline Differences	American College of Cardiology/American Heart Association (ACC/AHA)			European Society of Cardiology/European Society of Hypertension (ESC/ESH)		
	Systolic (mm Hg)	and/or	Diastolic (mm Hg)	Systolic (mm Hg)	and/or	Diastolic (mm Hg)
Level of blood pressure (BP) defining hypertension						
Office/Clinic BP	≥ 130	≥ 80		≥ 140		≥ 90
Daytime mean	≥ 130	≥ 80		≥ 135		≥ 85
Nighttime mean	≥ 110	≥ 65		≥ 120		≥ 70
24-hour mean	≥ 125	≥ 75		≥ 130		≥ 80
Home BP mean	≥ 130	≥ 80		≥ 135		≥ 85
BP targets for treatment	< 130/80 mm Hg			Systolic targets < 140 mm Hg and close to 130 mm Hg		
Initial Combination Therapy	Initial single-pill combination therapy in patients > 20/10 mm Hg above BP goal			Initial single-pill combination therapy in patients ≥ 140/90 mm Hg		
Hypertensive requiring intervention	> 130/80 mm Hg			≥ 140/90 mm Hg		
Guideline Similarities	ACC/AHA			ESC/ESH		
Importance of home BP monitoring	• Take BP at home, twice in the morning and twice in the evening, in the week before clinic • Bring the BP machine in annually for validation					
Therapy	• Restrict beta blockers to patients with comorbidities or other indications • Initial single pill combination as initial therapy					
Follow-up	• Detect poor adherence and focus on improvement • BP telemonitoring and digital health solutions recommended					

Bakris, G. et al. J Am Coll Cardiol. 2019;73(23):3018-26.

Figura 1 - Comparação entre as sociedades americana e europeia quanto às definições e manejo da hipertensão arterial sistêmica.