

Blood pressure monitoring practices of hypertensive patients: a cross-sectional evaluation at Portuguese primary care level

Hypertension is estimated to affect 30 up to 40% of the worldwide population, and recent data shows that 42% of the Portuguese adult population had high blood pressure [1][2].

Since hypertension is a chronic and usually asymptomatic disease, adequate monitoring of blood pressure (BP) values can promote patient awareness, adherence to medication and change to healthy lifestyle behaviors [3][4]. Nowadays, BP measurements take place not only in the clinical setting, as many patients also have monitoring devices at home [5][6]. In fact, BP monitoring can be performed by a trained health care provider or a family member but it often involves self-measurement of BP [1].

Self BP monitoring at home is well accepted by patients and doctors, providing reproducible measurements throughout several days or longer periods, in the patient's usual environment [1][7][8]. In addition, it has been associated with lower BP values and improved control of hypertension [1][7]. For diagnostic purposes, home blood pressure measurement (HBPM) should be performed preferably in the mornings and evenings of 7 consecutive days, or at least in 3-4 days, and systolic/diastolic BP of 135/85 mm Hg or higher are set as cut-off values [1][7].

With this study, we aimed to characterize the BP monitoring practices of Portuguese hypertensive patients, in terms of place, frequency and reasons for BP measurement. Furthermore, we aimed to identify sociodemographic and clinical characteristics of the medicated hypertensive patients associated with place and frequency of BP measures.

## References

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