Medicines for high blood pressure
What is this leaflet about?

High blood pressure is common in people with kidney disease. Most people with high blood pressure will eventually need medicines to treat it. Treating high blood pressure helps to protect your kidneys from further damage. People with kidney disease are at a higher risk of having heart attacks and strokes. One of the best treatments for this is to treat high blood pressure. This leaflet is designed to give you more information about your blood pressure medicines and some of their possible side effects. For more information ask your doctor or pharmacist.
There are many medicines available to reduce your blood pressure. Your doctor will have chosen those most suitable for you. A combination of a few medicines is often needed to reach your target blood pressure.

High blood pressure may not make you feel unwell, but it can cause other health problems and damage your kidney, so it is important to continue taking your medicines even if you don’t feel any different. Talk to your doctor if you have any side effects.
Some commonly used medicines for blood pressure are listed in the table. They will be prescribed to you as tablets. Speak to your doctor or pharmacist if you are taking a medicine that is not listed here.

<table>
<thead>
<tr>
<th>Blood pressure medicine</th>
<th>Example of drugs in this group</th>
<th>Side effects include</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alpha-blockers</td>
<td>doxazosin</td>
<td>dizziness, headache, incontinence in women</td>
</tr>
<tr>
<td>ACE-inhibitors or ‘Prils’</td>
<td>lisinopril, perindopril, ramipril</td>
<td>Cough</td>
</tr>
<tr>
<td>ARBs or ‘Sartans’</td>
<td>losartan, candesartan, irbesartan, valsartan</td>
<td>tiredness</td>
</tr>
<tr>
<td>Beta-blockers</td>
<td>atenolol, bisoprolol, propranolol</td>
<td>cold hands and feet, tiredness</td>
</tr>
<tr>
<td>Calcium antagonists</td>
<td>amlodipine, felodipine, nifedipine, diltiazem, verapamil</td>
<td>swollen ankles</td>
</tr>
<tr>
<td>Other drugs</td>
<td>moxonidine, hydralazine</td>
<td>tiredness and a build up of fluid in the body with hydralazine</td>
</tr>
<tr>
<td>Water tablets (diuretics)</td>
<td>Furosemide, bendroflumethiazide, spironolactone</td>
<td>Dehydration, dizziness, increase or decrease in potassium levels in the blood.</td>
</tr>
</tbody>
</table>
I’m on different medicines from those in the table, is that ok?

Yes. There are many different types of blood pressure medicines. Although some are more commonly prescribed, sometimes there are special reasons to use different medicines, particularly if your blood pressure is difficult to control, there are special circumstances such as pregnancy, or you have had side effects with the medicines.

I feel dizzy, is that a side effect?

Like any medicine, blood pressure tablets can have side effects. Many of these side effects are not dangerous and often get better with time. If you do have side effects it is important not to suddenly stop all of your medicines as this can lead to your blood pressure increasing. Make sure that you talk to your doctor or nurse to advise you.

A common effect of blood pressure tablets is to feel dizzy when you stand up. This can last a few seconds or be longer. It is helpful to try not to stand up too quickly and make sure that you have a blood pressure check to keep an eye on your blood pressure as sometimes changes in the type of medicine and the dose can help.
Taking certain medicines when you are unwell can lead to more severe illness. ‘Sick day rules’ is advice about how to take your medicine if you are unwell and become dehydrated. Your doctor or nurse may suggest that you stop some of your medicines. Dehydration occurs if you are unable to drink fluid or have diarrhoea or vomiting. You should stay off these medicines until you are eating and drinking normally for at least 48 hours.

**Some examples of blood pressure medicines which you may be advised to stop are:**
- ACE-inhibitors
- ARBs
- Diuretics ‘water tablets’

**Other medicines that you may be advised to stop taking include:**
- Metformin
- Tolvaptan
Sometimes blood pressure medicines can cause your blood pressure to fall too low during haemodialysis. If this happens, the type of blood pressure medicine you take may be changed or you may be advised to change the time when you take your medicines, for example to take them at night if you have dialysis in the morning.

Looking after your medicines

You should store your medicines in their original packet in a cool, dry place out of the sight and reach of children.

Do not get rid of any expired or unwanted tablets by flushing them down the toilet or throwing them away. Take them to your local pharmacy who will dispose of them for you.
Where can I find out more information?

- Patient View: [www.patientview.org](http://www.patientview.org) – online access to your health records. Ask your renal unit for details about how to join.
- Think kidneys website: [www.thinkkidneys.nhs.uk/ckd/information-for-the-public](http://www.thinkkidneys.nhs.uk/ckd/information-for-the-public)
- Blood Pressure Association: [www.bloodpressureuk.org](http://www.bloodpressureuk.org)