NCMETV™

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(60 minutes)

# Diet as a Means to Prevent and Control Elevated Blood Pressure

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**UP TO 1 *AMA PRA CATEGORY 1 CREDIT*™**
This activity is designed for cardiologists, primary care physicians, geriatricians, pediatricians, and other interested healthcare professionals.

Dietary modifications and other lifestyle changes are vital in preventing or controlling blood pressure (BP) in people of all ages: in children, to blunt the steep age-related rise in BP; in middle-aged adults, to prevent hypertension; and, in older adults, to improve BP control even if on medication. Lifestyle changes also provide substantial but unrecognized opportunities to reduce racial disparities in BP. In this video, Dr. Lawrence Appel, a leading authority on nutrition and health, discusses studies in which sodium restriction and other dietary modifications were shown to reduce BP. He also describes the results of studies demonstrating the effect of sodium restriction in reducing the risk of cardiovascular disease events. In addition, he reviews the merits of DASH and other current diets, and provides specific recommendations regarding the types of dietary changes that patients need to make to prevent hypertension or reduce BP.

## LEARNING OBJECTIVES

After taking part in this CME activity, participants should be better able to:

- Describe the magnitude of the blood pressure problem and how it is not limited only to patients with hypertension
- Discuss the lifestyle factors that can reduce blood pressure, particularly the role of the DASH diet
- Explain the effect of salt on blood pressure
- Report on the opportunities to reduce racial disparities in blood pressure management through lifestyle change
- Recognize the ability of older adults to make behavior changes that can improve their blood pressure
- Explain the role of food manufacturers and the restaurant industry in complicating the blood pressure problem

## CME CREDIT DESIGNATIONS

**ACCME** The Network for Continuing Medical Education (NCME) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

**AMA** NCME designates this educational activity for a maximum of 1 *AMA PRA Category 1 Credit*™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

**AAFP** This activity has been reviewed and is acceptable for up to 1 Prescribed credit by the American Academy of Family Physicians. AAFP accreditation begins July 29, 2008. Term of approval is for one year from this date, with option for yearly renewal.

**AOA** This activity is eligible for up to 1 hour of credit in Category 2-A of the American Osteopathic Association.

## SUGGESTED RESOURCES

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- De Souza RJ, Swain JF, Appel LJ, Sacks FM. Alternatives for macronutrient intake and chronic disease: a comparison of the OmniHeart diets with popular diets and with dietary recommendations. *Am J Clin Nutr.* 2008;88(1):1-11.
- Kostis JB, Wilson AC, Shindler DM, Cosgrove NM, Lacy CR. Persistence of normotension after discontinuation of lifestyle intervention in the trial of TONE. Trial of Nonpharmacologic Interventions in the Elderly. *Am J Hypertens.* 2002;15(8):732-734.
- Lin PH, Ginty F, Appel LJ, et al. The DASH diet and sodium reduction improve markers of bone turnover and calcium metabolism in adults. *J Nutr.* 2003;133(10):3130-3136.
- Mellen PB, Gao SK, Vitolins MZ, Goff DC Jr. Deteriorating dietary habits among adults with hypertension: DASH dietary accordance, NHANES 1988-1994 and 1999-2004. *Arch Intern Med.* 2008;168(3):308-314.
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