| 1 2    | NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE   |
|--------|---|
| 3      | Guideline scope   |
| 4<br>5 | Hypertension in adults: diagnosis and management (update)   |
| 6<br>7 | This guideline will update the NICE guideline on <u>hypertension in adults</u> (NG136).                             |
| 8<br>9 | The guideline will be developed using the methods and processes outlined in developing NICE guidelines: the manual. |
| 10     | Any related NICE quality standards will be reviewed in light of this update.  |
| 11     | 1 Why the update is needed  |
| 12     | This update is needed to develop recommendations for people with  |
| 13     | hypertension and established cardiovascular disease. Examples of  |
| 14     | established cardiovascular disease that will be covered in this update are  |
| 15     | symptomatic coronary heart disease, peripheral vascular disease, stroke and   |
| 16     | aortic aneurysm.  |
| 17     | A review of the evidence is needed to examine whether people with   |
| 18     | established cardiovascular disease should have different hypertension   |
| 19     | treatment targets. Many people with established cardiovascular disease will   |
| 20     | already be on medication that lowers blood pressure. Recommendations may  |
| 21     | be needed to take account of existing medication, multimorbidity and  |
| 22     | polypharmacy.   |
| 23     |   |
| 24     | 2 Who the guideline is for  |
| 25     | This guideline is for:  |
| 26     | healthcare professionals in primary and secondary care  |

- commissioners and providers of healthcare services
- adults with suspected or diagnosed hypertension, their families and carers
- 3 and the public.
- 4 NICE guidelines cover health and care in England. Decisions on how they
- 5 apply in other UK countries are made by ministers in the Welsh Government,
- 6 Scottish Government and Northern Ireland Executive.

## Equality considerations

- 8 NICE has carried out an equality impact assessment during scoping. The
- 9 assessment:

7

- lists equality issues identified, and how they have been addressed
- explains why any groups are excluded from the scope.
- 12 The guideline will look at inequalities relating to the needs of:
- people of West African or Caribbean family origin in the context of
- 14 hypertension and increased risk of stroke
- people of South Asian family origin, among whom the risk of renal and
- cardiovascular complications of hypertension are increased, especially in
- people with type 2 diabetes
- people aged over 80, among whom comorbidities are more prevalent, with
- implications for choice of treatment.

# 20 3 What the updated guideline will cover

#### 21 3.1 Who is the focus?

## 22 Groups that will be covered

- 23 Adults (over 18 years) with hypertension. The update will cover adults with
- 24 hypertension and established cardiovascular disease, who were not included
- in the 2019 guideline.
- 26 Specific consideration will be given to:

- People with hypertension and type 2 diabetes.
- People of west African or Caribbean family origin.
- People of South Asian family origin.
- People aged 80 years or older.

#### 5 Groups that will not be covered

- Pregnant women and women planning pregnancy.
- People with secondary causes of hypertension, such as tumours or
- 8 structural vascular defects (including Conn's adenoma,
- 9 phaeochromocytoma and renovascular hypertension).
- People with type 1 diabetes.
- People with chronic kidney disease in an albumin-to-creatinine ratio (ACR)
- category of A3 (ratio over 30 mg/mmol).

# **3.2 Settings**

### 14 Settings that will be covered

15 All settings in which NHS-commissioned care is provided.

# 16 3.3 Activities, services or aspects of care

#### 17 Key areas that will be covered in this update

- 18 We will look at evidence in the areas below when developing this update. We
- 19 will consider making new recommendations or updating existing
- 20 recommendations in these areas only.
- 21 1 Blood pressure targets for people with established cardiovascular
- disease.

23

- Note that guideline recommendations for medicines will normally fall within
- licensed indications; exceptionally, and only if clearly supported by evidence,
- use outside a licensed indication may be recommended. The guideline will
- 27 assume that prescribers will use a medicine's summary of product
- characteristics to inform decisions made with individual patients.

## 1 Proposed outline for the guideline

- 2 This table outlines all the areas that will be included in the guideline. It sets
- 3 out what NICE plans to do for each area in this update.

| Area in the guideline   | What NICE plans to do  |
|---|--|
| 1.1 Measuring blood pressure                                    | No evidence review: retain recommendations from existing guideline. Assess whether these recommendations are also relevant for             |
|   | people with established cardiovascular disease.  |
| 1.2 Diagnosing hypertension                                     | No evidence review: retain recommendations from existing guideline.  |
| 1.3 Assessing cardiovascular risk and target organ damage       | No evidence review: retain recommendations from existing guideline.  |
| 1.4 Treating and monitoring hypertension                        | Adults, including people with type 2 diabetes:   |
|   | Retain recommendations for:  |
|   | Lifestyle interventions  |
|   | Starting antihypertensive drug treatment   |
|   | Monitoring treatment and blood pressure targets  |
|   | Choosing antihypertensive drug treatment (for people with or without type 2 diabetes).   |
|   | New area in the guideline:   |
|   | Treatment targets for adults with existing cardiovascular disease.   |
|   | <ul> <li>New evidence review to identify<br/>blood pressure targets for adults<br/>with established cardiovascular<br/>disease.</li> </ul> |
| 1.5 Identifying who to refer for same-<br>day specialist review | No evidence review: retain recommendations from existing guideline.  |

4

- 5 Recommendations in areas that are being retained from the existing guideline
- 6 may be edited to ensure that they meet current editorial standards, and reflect
- 7 the current policy and practice context.

### 1 Related NICE guidance

#### 2 Published

- Acute coronary syndromes (2020) NICE guideline NG185
- 4 Abdominal aortic aneurysm: diagnosis and management (2020) NICE
- 5 guideline NG156
- Hypertension in pregnancy: diagnosis and management (2019) NICE
- 7 guideline NG133
- Chronic heart failure in adults: diagnosis and management (2018) NICE
- 9 guideline NG106
- Multimorbidity: clinical assessment and management (2016) NICE
- 11 quideline NG56
- Cardiovascular disease: risk assessment and reduction, including lipid
- modification (2014) NICE guideline CG181
- Stroke rehabilitation in adults (2013). NICE guideline CG162. (Currently
- being updated, publication expected December 2022.)
- Peripheral arterial disease: diagnosis and management (2012) NICE
- 17 guideline CG147
- Stable angina: management (2011) NICE guideline CG126
- Recent-onset chest pain of suspected cardiac origin: assessment and
- 20 <u>diagnosis</u> (2010) NICE guideline CG95

#### 21 NICE guidance that will be updated by this guideline

- Hypertension in adults: diagnosis and management (2019) NICE guideline
- 23 NG136

#### 24 NICE guidance about the experience of people using NHS services

- NICE has produced the following guidance on the experience of people using
- the NHS. This guideline will not include additional recommendations on these
- topics unless there are specific issues related to hypertension in adults:
- Medicines optimisation (2015) NICE guideline NG5
- Patient experience in adult NHS services (2012) NICE guideline CG138
- Medicines adherence (2009) NICE guideline CG76.

## 1 3.4 Economic aspects

- 2 We will take economic aspects into account when making recommendations.
- 3 We will develop an economic plan that states for each review question (or key
- 4 area in the scope) whether economic considerations are relevant, and if so
- 5 whether this is an area that should be prioritised for economic modelling and
- 6 analysis. We will review the economic evidence and carry out economic
- 7 analyses, using an NHS and personal social services (PSS) perspective, as
- 8 appropriate.

# 9 3.5 Key issues and draft questions

- While writing the scope for this updated guideline, we have identified the
- following key issue and draft question related to it:
- 12 1 Appropriate blood pressure targets for people with established CVD
- 1.1 What are the optimum blood pressure targets for adults with
- 14 established cardiovascular disease?

15

- 16 The key issues and draft questions will be used to develop more detailed
- 17 review questions.

#### 18 3.6 Main outcomes

- 19 The main outcomes that may be considered when searching for and
- assessing the evidence are:
- all-cause mortality
- stroke (ischaemic or haemorrhagic)
- myocardial infarction
- 24 heart failure
- vascular procedures (including both coronary and carotid artery
- 26 procedures)
- health-related quality of life
- adverse events such as acute kidney injury, falls or new-onset type 2
- 29 diabetes.

# 4 NICE quality standards and NICE Pathways

# 2 4.1 NICE quality standards

- 3 NICE quality standards that may need to be revised or updated when
- 4 this guideline is published

1

Hypertension in adults (2013) NICE quality standard QS28.

## 6 4.2 NICE Pathways

- When this guideline is published, we will update the existing NICE Pathway on
- 8 <u>hypertension</u>. NICE Pathways bring together everything NICE has said on a
- 9 topic in an interactive flowchart.

## 10 Further information

This is the draft scope for consultation with registered stakeholders. The consultation dates are 16 February 2021 to 16 March 2021.

The guideline is expected to be published in April 2023.

You can follow progress of the guideline.

Our website has information about how NICE guidelines are developed.

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