Question 1 – Task Information

Situation

You are a Foundation Year 2 doctor working in General Practice at

The MedEd Surgery
Education Street
Gosforth
NE12 1BY

Your GMC number is 4312.

Patient details

Name: Ben Den

Address: 48 Team Road

Gosforth NE2 1DH

Date of birth: 23/02/1946
Patient number: 9475 546 136

History

Mr. Den has come to the surgery for a review of his hypertension. He is currently asymptomatic but is concerned because his father died of a heart attack at 52 years old.

Mr. Den has no history of vascular or renal disease, diabetes, or any other significant medical condition.

He is an ex-smoker with a 15-pack-year history, and exercises regularly. He admits his diet could be more varied and he tends to add salt to the majority of his meals.

Mr. Den is a white British male.

Examination

Pulse: 90 beats per minute

Blood pressure: 155/95 mmHg

Investigations

His full blood count and renal function are normal. Total cholesterol 3.5 mmol/l, HDL cholesterol 1.0 mmol/l.

On urine dipstick, there is no glucosuria or proteinuria.

His ECG shows sinus rhythm. The S waves are deep in V1-3 and R waves tall in V4-6. There are no abnormalities of the ST segments or T waves.

Ambulatory blood pressure monitoring readings averaged 142/92mmHg.

<u>Task</u>

From discussion with Mr Den you establish that he would like to reduce his cardiovascular risk through improving his lifestyle and through taking medication.

Please prescribe **one** medication for Mr Den via an FP10 prescription which will help to reduce his cardiovascular risk.

Question 1 – Sample Answer

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Question 1 - Explanation

Mr Den is presenting with what is likely to be stage 1, essential hypertension. There is potentially signs of end organ damage and ABPM blood pressure is raised. This indicates the use of both lifestyle and pharmacological interventions.

As recommended by NICE, a calcium channel blocker is the first line of treatment in this case. This information is available in the BNF(1).

Amlodipine 5mg once daily is the most common medication prescribed. Nifedipine would also be reasonable.

ARBs and ACE-I are not recommended first line in this case.

Resources and References:

- 1. https://bnf.nice.org.uk/treatment-summaries/hypertension/
- 2. https://zerotofinals.com/medicine/cardiology/hypertension/
- 3. ESC/ESH hypertension guidelines