

HYPERTENSION



Chinese character for “longevity” (*shou*)

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HYPERTENSION

“Hypertension” is not one of the traditional Chinese disease entities as ancient Chinese doctors obviously did not have the instruments to measure blood pressure.

The textbook “Davidson’s Principles and Practice of Medicine” describes hypertension as follows:

“Hypertension is a trait as opposed to a specific disease, and represents a quantitative rather than qualitative deviation from the norm. Any definition of hypertension is therefore arbitrary.” It then says: *“A useful and practical definition of hypertension is the level of blood pressure at which the benefit of treatment outweighs its costs and hazards.”*



The discussion of hypertension will be conducted according to the following topics:

1. Hypertension in Western Medicine

- a) Causes of hypertension
 - i. Essential hypertension
 - ii. Secondary hypertension
 - iii. Renal disease / Endocrine causes / Congenital cardiovascular causes
- b) Pathology of essential hypertension
- c) Complications
- d) Assessment
- e) Treatment
 - i. Diuretics
 - ii. Beta-adrenoceptor blockers
 - iii. Angiotensin-converting enzyme (ACE) inhibitors
 - iv. Angiotensin II receptor antagonists
 - v. Calcium-channel blockers
 - vi. Alpha-adrenoceptor blockers

2. Hypertension in Chinese Medicine

- a) Pathology of hypertension in Chinese medicine
- b) Aetiology of hypertension in Chinese medicine
 - i. Emotional stress
 - ii. Overwork
 - iii. Old age
 - iv. Irregular diet
- c) Thoughts on hypertension in Chinese medicinei. Classification according to location of pathology:
 - Head / Middle Burner / Chest and heart / Blood vessels
- d) Effects of hypertension medication on the pulse
 - i. Diuretics
 - ii. Beta-adrenoceptor blockers
 - iii. Angiotensin-converting enzyme (ACE) inhibitors
 - iv. Angiotensin II receptor antagonists
 - v. Calcium-channel blockers
 - vi. Alpha-adrenoceptor blockers

3. Identification of Patterns and Treatment

- a) Liver-Yang rising
- b) Liver-Wind
- c) Liver-Fire
- d) Liver-Qi stagnation, Blood rebelling upwards
- e) Phlegm obstructing the orifices and the blood vessels
- f) Blood stasis in the Connecting (*Luo*) channels
- g) Liver- and Kidney-Yin deficiency
- h) Spleen- and Kidney-Yang deficiency
- i) Disharmony of *Chong* and *Ren Mai*

4. Modern Chinese literature

5. Case histories

6. Patients' statistics

1. HYPERTENSION IN WESTERN MEDICINE

Blood pressure is maintained at a physiological level by a complex interaction of neurosympathetic control with the renin-angiotensin-aldosterone system. The “Textbook of Medicine” says:

“Activation of preganglionic sympathetic neurones to the heart produces an increased heart rate and increased strength of contraction. Vasomotor sympathetic outflow constricts vascular smooth muscle, producing arterial vasoconstriction.”

Reflex control of the blood circulation is via the arterial baroreceptors in the wall of the aorta and in the carotid arteries. The speed of this pressure-controlling mechanism is illustrated by its important role in maintaining systemic pressure during abrupt changes in posture. Neurosympathetic influences on blood pressure are rapid but transient.

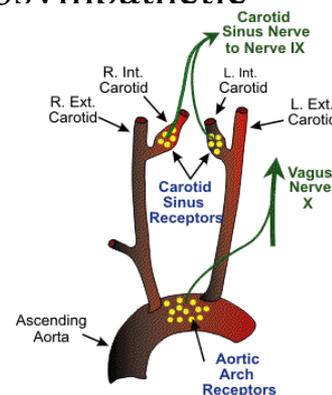


Figure 1. Location and innervation of arterial baroreceptors.