



Patient education: Orthostatic hypotension monitoring

Orthostatic hypotension (OH) is a condition where a person has a drop in systolic BP (top BP value) of ≥ 20 mmHg or diastolic BP (bottom BP value) ≥ 10 mmHg when rising from lying/sitting to standing. For example, a person whose seated BP is 120/80 mmHg and after standing for 1-3 minutes their BP falls to 90/60 mmHg.

OH can cause or worsen symptoms including lightheadedness, palpitations, tremulousness, generalized weakness, blurred vision, exercise intolerance, and fatigue upon standing. There can be several reasons why OH occurs, including dehydration, medications, and/or other conditions (e.g., Parkinson's, diabetic neuropathy).

Common symptoms of orthostatic hypotension

- Dizziness (the sensation of moving/tilting/spinning when still, also known as vertigo)
- Lightheadedness (feeling like you are going to pass out/faint)
- Unsteadiness with standing/walking
- Sensation that legs will buckle or give out with standing/walking
- Feeling weak or fatigued with standing
- Palpitations (sensation of pounding, fast, or irregular heart beat)
- Tremulousness (trembling feeling)
- Blurry vision
- Confusion or inability to think clearly
- Pain running down neck and across shoulders

Common symptoms of hypertension (although very often high blood pressure occurs without symptoms)

- Headache
- Blurry vision
- Shortness of breath

Home monitoring of blood pressure (BP) and heart rate (HR)

- Monitoring your home BP and HR provides valuable information to your healthcare team
- Bring your BP and HR rate log to every visit
- Top BP number is called the "systolic" value (SBP); Bottom BP number is the "diastolic" value (DBP)
- Best practices for BP measurement are available on the CDC website [Measuring Your Blood Pressure | High Blood Pressure | CDC](#)
- Ideally BP is measured using an electronic arm cuff using a device validated for accuracy; see the US Validated BP Listing website <https://www.validatebp.org/>
- Unless otherwise instructed, closely monitor and log your BP and HR 7 days before office visits
- Your provider will give instructions on the BP measurements to focus on between visits

Recommendations for when and how to measure blood pressure and heart rate at home

| Time of day | Timing | Position | |
|------------------------|--|--------------------|--|
| First thing in morning | Before medications or caffeine | Seated Standing | Guidance for BP measurements: Seated – sit for at least 5 minutes before measuring Standing – remain standing for 1-3 minutes before measuring Lying – lie down for at least 10 minutes before measuring |
| Mid-morning | 1-2 hours after morning medications | Seated Standing | |
| Late-afternoon | 3-4 hours after lunchtime / early evening | Seated Standing | |
| Largest meal of day | Measure before and 30 minutes after eating | Seated | |
| Bedtime | Before going to bed for the evening | Seated Lying | |

| Measurement | Goal | Target Range | When to Contact Office | Notes |
|------------------------------|----------|-----------------|---|--|
| Seated BP | < 130/80 | 100-140 / 60-90 | <ul style="list-style-type: none"> Report episodes of fainting or falling (if you are injured seek emergency care before calling) Report SBP < 100 if you are experiencing symptoms of low blood pressure (see list above) that are not improved after drinking 8 ounces of cold water and it has been > 1 hour after medications to raise BP | <ul style="list-style-type: none"> Allowance for higher seated BP may be necessary if BP drops > 30 points with standing Remember that wearing an abdominal binder is our <u>most effective</u> way to prevent fainting/falls caused by low standing blood pressure |
| Standing BP | < 130/80 | 100-130 / 60-80 | | |
| Lying BP | < 140/90 | 100-140 / 60-90 | <ul style="list-style-type: none"> Report lying BP > 180/110 as medication adjustments may be needed If lying SBP > 160 you need to rest/sleep with your head elevated 30 degrees (use an electronic bed, head of bed risers, bed wedge pillows, foam mattress elevator, or sleep in a recliner) If lying BP > 140/90, avoid drinking fluids 60-90 minutes before bedtime | <ul style="list-style-type: none"> Medications used to raise seated/standing BP can lead to increases in lying BP causing an increased risk of heart attack and stroke Our bodies work best when nighttime/lying BP is lower than daytime BP to give our heart a rest Elevated lying BP can increase the number of times you need to urinate overnight and lead to lower BP readings in morning |
| Resting HR (in any position) | 55-80 | 55-80 | <ul style="list-style-type: none"> Report resting HR > 100 bpm if you feel your heart beating fast (palpitations) or are short of breath | <ul style="list-style-type: none"> If resting HR < 55 bpm or > 90 bpm medication adjustments may need to be made |