

# EXERCISING

WITH

# HYPERTENSION



*Hypertension, which is defined as a chronically elevated blood pressure greater than 140/90 mmHg, affects nearly 50 million Americans. If left untreated, hypertension can dramatically increase your risk for heart attacks, strokes and peripheral arterial disease. Exercise not only improves the workings of the cardiovascular system, but can lower blood pressure as well. The key to maximizing the benefits of exercise is to follow a well-designed program that you can stick to over the long-term.*

## Getting Started

- Talk with your health care provider before starting an exercise program and ask about any changes to your medications or special concerns they have about you doing exercise.
- Take all medications as recommended by your physician.
- Choose low- to moderate-intensity activities that you enjoy, such as walking, cycling or group fitness classes. Exercising at a lower intensity appears to reduce blood pressure as much as—if not more than—exercising at a higher intensity.
- Once your cardiovascular fitness begins to improve, consider adding low-resistance, high-repetition strength training, such as circuit training.
- Start slowly and gradually progress the intensity and duration of your workouts.
- Take frequent breaks during activity if needed.

## Exercise Cautions

- Always cool down gradually. Antihypertensives, such as alpha blockers, calcium channel blockers, and vasodilators, may reduce blood pressure too much if exercise is ended abruptly.
- If possible, measure your blood pressure prior to your exercise session. Do not exercise if your resting systolic blood pressure is greater than 200 mmHg or your diastolic blood pressure is greater than 115 mmHg.
- Avoid holding your breath during weight training because this can cause large fluctuations in blood pressure and increase the potential of passing out or developing abnormal heart rhythms.
- If your fitness level is low, start with shorter sessions (10 to 15 minutes) and gradually add five minutes to your workouts every two to four weeks. Ideally, you should build up to 30, five days per week.

Your exercise program should be designed to maximize the benefits with the fewest risks of aggravating your health or physical condition. Consider contacting a certified health and fitness professional\* who can work with you and your health care provider to establish realistic goals and design a safe and effective program that addresses your specific needs.

\*If your health care provider has not cleared you for independent physical activity and would like you to be monitored in a hospital setting or a medical fitness facility, you should exercise only under the supervision of a certified professional. The American College of Sports Medicine (ACSM) has two groups of certified fitness professionals that could meet your needs. The ACSM Certified Clinical Exercise Specialist (CES) is certified to support those with heart disease, diabetes and lung disease. The ACSM Registered Clinical Exercise Physiologist (RCEP) is qualified to support patients with a wide range of health challenges. You may locate all ACSM-certified fitness professionals by using the ProFinder at [www.acsm.org](http://www.acsm.org).

For more information, visit [www.exerciseismedicine.org](http://www.exerciseismedicine.org) or e-mail [eim@acsm.org](mailto:eim@acsm.org).

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