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caregIVR

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Blood pressure under control

How to measure blood pressure correctly in a person after a stroke

High blood pressure is the most important modifiable risk factor for stroke, including another stroke. Regular measurements at home help the doctor adjust treatment and help the caregiver quickly notice worrying changes.

Scene from the CaregIVR virtual home: the room of a person requiring care.

< 130/80 mmHg

Treatment target for most people after a stroke. The individual target is determined by a doctor.

WHEN TO MEASURE?

In the morning (before medication and breakfast) and in the evening. For the 7 days before an appointment, or as recommended by the doctor.

CORRECT MEASUREMENT IN 5 STEPS

1 30 minutes before the measurement: no coffee, cigarettes or exercise; empty your bladder.

2 5 minutes of quiet sitting: back supported, feet on the floor, legs uncrossed.

3 Cuff on the bare upper arm, 2–3 cm above the elbow; arm supported at heart level.

4 Do not talk or move during the measurement.

5 Take two measurements 1–2 minutes apart; record both results and the pulse.

AFTER A STROKE: WHAT TO WATCH FOR

- For the first measurement, measure blood pressure in both arms; then use the arm with the higher reading.
- If one arm is weak or swollen, ask the doctor which arm to use.
- Choose an automatic upper-arm blood pressure monitor with a cuff suited to the arm circumference.
- Keep a diary (date, time, blood pressure, pulse, wellbeing) and take it to appointments.
- Do not change medication doses on your own.

Tip: choose a clinically validated blood pressure monitor. A list of such devices is available at www.stridebp.org. Once a year, it is worth checking your monitor against the one at a clinic.

Call 112 if:

- blood pressure is 180/110 mmHg or higher and is accompanied by severe headache, chest pain, shortness of breath, visual disturbances or confusion,
- signs of stroke appear: one side of the face drooping, weakness in an arm or leg, difficulty speaking, even if they pass quickly.

Contact a doctor if:

- a reading of 180/110 mmHg or higher persists on a repeat measurement, even if there are no symptoms,
- readings are consistently above the target, or dizziness occurs when standing up.

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