

Free e-learning resource

## Managing hypertension in diabetes – tricky cases

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Winston, a 67-year-old Afro-Caribbean man, has had type 2 diabetes for 15 years. Despite triple therapy, his BP is 155/78 mmHg, with an eGFR of 65 mL/min/1.73 m<sup>2</sup> and ACR of 2.2 mg/mmol.

### What could you do in this next consultation?

79-year-old Lily, who lives alone and has osteoarthritis, has type 2 diabetes that is well controlled. With triple antihypertensive therapy, her BP is 155/70 mmHg. There are concerns about her renal function and she has bilateral ankle oedema.

### What would be your concerns over intensifying Lily's antihypertensive therapy?

Mark, 47 years old, has persistent genital thrush. His blood glucose is 14.3 mmol/L, his BMI is 36.4 kg/m<sup>2</sup> and there is a family history of type 2 diabetes. BP of 194/126 mmHg is recorded.

### How would you respond to Mark's raised BP?

By working through these interactive cases, we will consider the following issues and more:

- The options available if triple antihypertensive therapy is proving to be inadequate.
- Treating hypertension in an older person who has significant comorbidities.
- When to refer an individual with high blood pressure immediately to hospital.

*D* *Diabetes & Primary Care's* series of interactive case studies is aimed at all healthcare professionals in primary and community care who would like to broaden their understanding of type 2 diabetes.

The three mini-case studies created for this issue of the journal cover various aspects relating to the management of complex cases of hypertension with type 2 diabetes.

The format uses typical clinical scenarios as tools for learning. Information is provided in short sections, with most ending in a question to answer before moving on to the next section.

Working through the case studies will improve our knowledge and problem-solving skills in type 2 diabetes by encouraging us to make evidence-based decisions in the context of individual cases.

You are invited to respond to the questions by typing in your answers. In this way, you are actively involved in the learning process, which is hopefully a much more effective way to learn.

By actively engaging with these case histories, I hope you will feel more confident and empowered to manage such presentations effectively in the future.

**David Morris**, Specialist Doctor in Diabetes, Royal Shrewsbury Hospital; Undergraduate Clinical Tutor, Keele University; and retired GP

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*Managing hypertension in diabetes – tricky cases*  
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