

Best Proven Nonpharmacologic Interventions for Prevention and Treatment of Hypertension*

	Nonpharmacologic Intervention	Dose	Approximate Impact on SBP	
			Hypertension	Normotension
Weight loss	Weight/body fat	Ideal body weight is best goal but at least 1 kg reduction in body weight for most adults who are overweight. Expect about 1 mm Hg for every 1 kg reduction in body weight.	-5 mm Hg	-2/3 mm Hg
Healthy diet	DASH dietary pattern	Diet rich in fruits, vegetables, whole grains, and low-fat dairy products with reduced content of saturated and trans fat	-11 mm Hg	-3 mm Hg
Reduced intake of dietary sodium	Dietary sodium	<1,500 mg/d is optimal goal but at least 1,000 mg/d reduction in most adults	-5/6 mm Hg	-2/3 mm Hg
Enhanced intake of dietary potassium	Dietary potassium	3,500–5,000 mg/d, preferably by consumption of a diet rich in potassium	-4/5 mm Hg	-2 mm Hg
Physical activity	Aerobic	<ul style="list-style-type: none"> • 90–150 min/wk • 65%–75% heart rate reserve 	-5/8 mm Hg	-2/4 mm Hg
	Dynamic Resistance	<ul style="list-style-type: none"> • 90–150 min/wk • 50%–80% 1 rep maximum • 6 exercises, 3 sets/exercise, 10 repetitions/set 	-4 mm Hg	-2 mm Hg
	Isometric Resistance	<ul style="list-style-type: none"> • 4 x 2 min (hand grip), 1 min rest between exercises, 30%–40% maximum voluntary contraction, 3 sessions/wk • 8–10 wk 	-5 mm Hg	-4 mm Hg
Moderation in alcohol intake	Alcohol consumption	In individuals who drink alcohol, reduce alcohol† to: <ul style="list-style-type: none"> • Men: ≤2 drinks daily • Women: ≤1 drink daily 	-4 mm Hg	-3 mm Hg

*Type, dose, and expected impact on BP in adults with a normal BP and with hypertension.

†In the United States, one “standard” drink contains roughly 14 grams of pure alcohol, which is typically found in 12 ounces of regular beer (usually about 5% alcohol), 5 ounces of wine (usually about 12% alcohol) and 1.5 ounces of distilled spirits (usually about 40% alcohol).

Table 15