What is it?
High blood pressure, or “hypertension,” occurs in roughly 75 million adults in the United States, according to the American Heart Association. It is one of the factors that may lead to stroke, heart attack, heart disease and kidney disease. Hypertension is diagnosed when an athlete has a blood pressure reading of 140 on the systolic (the number above the line on blood pressure readings, for example, the “120” in “120/80”) or greater, and/or 90 diastolic (the number below the line) or greater. Hypertension is the most common heart-related condition observed in athletes.

Symptoms
Hypertension often goes undiagnosed; however, some symptoms that may be noticed are:
- Headaches
- Vision changes
- Palpitations
- Swelling of the legs
These symptoms often occur in more severe cases or with very high blood pressure.

Sports Medicine Evaluation and Treatment
Athletes will have their blood pressure measured with a blood pressure cuff. The physician will record the average of three different blood pressure readings. Athletes will be asked to rest quietly for five minutes prior to the blood pressure check and may have it taken both sitting and lying down. The physician may also ask the athlete to record the blood pressure throughout a week or more with a home blood pressure cuff to obtain an average. Depending on the athlete’s level of fitness and other medical conditions, the physician may emphasize lifestyle modifications such as an improved diet, along with modifying or enhancing the current exercise plan. Other lifestyle changes can include decrease in alcohol, caffeine, weight loss and stopping the use of over-the-counter diet pills or other products that can lead to an elevated blood pressure. The physician may also prescribe medication to help lower blood pressure. Prior to starting medications, the physician may also order blood tests to evaluate other problems related to high blood pressure.

Injury Prevention
Athletes should strive to live a healthy lifestyle that includes a proper diet, apart from the exercise they derive from sports participation.

Return to Play
Athletes in vigorous sports may return once their blood pressure has been controlled. Some may be cleared to play with an elevated blood pressure while others will be required to have better control prior to engaging in activity. Consideration of return to play in athletes with other underlying medical conditions such as kidney disease and heart failure may be limited or restricted based on the assessment by the sports medicine physician.

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References