

## NON-MEDICAL MANAGEMENT OF LOW BLOOD PRESSURE

Orthostatic hypotension, also known as postural hypotension, is defined as a fall in systolic blood pressure of at least 20 mm Hg and/or diastolic blood pressure of at least 10 mm Hg within 3 minutes of standing. It may be symptomatic (dizziness, fainting) or asymptomatic (showing no symptoms).

People with Parkinson's (PD) who have a combination of orthostatic hypotension and impairment of postural reflexes are prone to dizziness, fainting, and falls leading to fractures. Fractures have serious consequences for the long-term health of people with PD, and a safety assessment from a rehabilitation specialist is strongly recommended. Lying and standing blood pressure recordings are essential as diagnostic measures.

Triggers for dizziness and fainting include:

- taking tablets to lower your blood pressure, or drugs known to lower blood pressure (e.g. tricyclic antidepressants, such as amitryptiline, nortryptiline, doxepine) when taking PD medication
- increasing the dose of your PD medication too quickly, particularly dopamine agonists (e.g. bromocriptine, pergolide, ropinerole, or pramipexole)
- taking PD medication on an empty stomach
- the hour following medications, or a meal
- urinating standing up
- bowel movement
- lying flat for too long
- getting up too quickly from a bed, chair, or after a bowel movement
- warm weather, dehydration, and hot baths

### Prevention

Orthostatic hypotension can be treated by restoring normal blood pressure through lifestyle changes and medication. For short-term relief and prevention, consider the following strategies:

- Increase intake of fluids and salt,
- Have a 6 to 8 oz. glass of orange juice before you get out of bed each morning. Sit on the side of the bed for a few minutes before you get up.
- Strong coffee with breakfast, and a small cup after meals, can help increase blood pressure.
- Increasing clear fluid intake until about 4:00p.m. will limit your need to take trips to the bathroom during the night, which can be a major fall risk.
- Remain seated after a meal for about 20 minutes. Blood is drawn to the gastrointestinal tract to aid digestion, which is why we feel sleepy after a large meal. If you stand up quickly after a meal, there may not be enough blood volume to supply the brain.
- Sit down to towel off after a shower or bath, and get up slowly afterwards.

If postural hypotension persists despite these measures, your doctor may suggest reducing, stopping, or replacing drugs that are lowering your blood pressure. If this is not possible, the doctor may recommend an antihypotensive, such as fludrocortisone or midodrine, which will artificially raise your blood pressure.

If you have very low blood pressure, you may be at risk for recumbent hypertension. This means that your blood pressure may go up too much when you are lying down. To manage this, be sure that your head is 30 degrees higher than your feet when you are lying down.

Source: *Pacific Parkinson's Research Centre, University of British Columbia, Vancouver.*