



# Stroke and ischaemic attack: blood pressure (79 years and under)

NICE indicator

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[www.nice.org.uk/indicators/ind243](https://www.nice.org.uk/indicators/ind243)

## Indicator

The percentage of patients aged 79 years or under with a history of stroke or TIA in whom the last blood pressure reading (measured in the preceding 12 months) is less than 135/85 mmHg if using ambulatory or home monitoring, or less than 140/90 mmHg if monitored in clinic.

## Indicator type

General practice indicator suitable for use in the Quality and Outcomes Framework.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our [menu of indicators](#).

To find out how to use indicators and how we develop them, see our [NICE indicator process guide](#).

## Rationale

Blood pressure control can help with secondary prevention of cardiovascular disease. Blood pressure targets differ between clinic and home settings because blood pressure can be raised in formal settings such as in clinic. The intermediate outcome can be achieved through lifestyle advice or the use of drug therapy.

## Source guidance

[Hypertension in adults: diagnosis and management. NICE guideline NG136](#) (2019, last updated 2022), recommendations 1.4.20, 1.4.22 and 1.4.23

## Specification

**Numerator:** The number of patients in the denominator in whom the last blood pressure reading (measured in the preceding 12 months) is less than 135/85 mmHg if using ambulatory or home monitoring, or less than 140/90 mmHg if monitored in clinic.

**Denominator:** The number of patients aged 79 years or under on the stroke or TIA register.

**Calculation:** Numerator divided by the denominator, multiplied by 100.

**Exclusions:** None.

Personalised care adjustments or exception reporting should be considered to account for situations when patients decline to have blood pressure recorded or when the target is not appropriate.

**Minimum population:** The indicator would be appropriate to assess performance at

individual general practice level. To be classified as suitable for use in QOF, there should be an average minimum population of more than 20 patients per practice eligible for inclusion in the denominator prior to application of personalised care adjustments. STIA010 QOF data for 2019/20 compared with ONS population statistics shows that an average practice with 10,000 patients would have around 122 eligible patients.

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