The Art of Measuring Blood Pressure & Cardiac Efficiency

SpaceAge[®]

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Your Quest For Longevity Begins Here !

The Art of Measuring Blood Pressure / Cardiac Efficiency and the Meaning Behind These Numbers

The patient is seated in a chair and made to relax for ten whole minutes, before the cuff of a manually pumping digital blood pressure measuring machine is placed on the upper left arm. After manually pumping, the blood pressure (BP) is measured along with the heart rate/pulse (P). The arm should be relaxed and rested on a table.

Thereafter, the patient is asked to stand up and this measurement is once again immediately repeated. The standing blood pressure (BPs) and the heart rate/pulse (Ps) is also noted. The arm should be relaxed and allowed to fall by the side of the body.

Normal Blood Pressure & Heart Rate

BP for Vegetarians and Asians With Predominantly Vegetarian Diet

- BP = 110 / 70 mm Hg
- Heart Rate / Pulse P = 70 beats per minute
- BP and Heart Rate on Exercising must increase

 to reflect Good Cardiac Efficiency.
- If instead it goes down ↓ then it means or is a foreboding of a Serious Heart Disease.
- BPs = 120 / 80 to 125 / 85 mm Hg
- Heart Rate / Pulse Ps = 85 beats per minute

Note:

Care should be taken when attempting to monitor Blood Pressure and Heart Rate that the patient is not dehydrated or has not taken any water during the last 3 or 4 hours. Dehydration typically causes the heart rate to rise significantly. A give away is the warmth of the hand when putting on the cuff of the blood pressure machine. If the body feels unduly warm it is a clear indication of dehydration and the heart rate you are going to measure is going to be significantly higher than it normally should be and in many case the blood pressure will also be a little lower. If this happens, ask the patient to take one or two glasses of water and wait about 15 to 30 minutes before measuring the blood pressure and heart rate.

BP for Caucasians (Predominantly Meat Eaters)

- BP = 120 / 80 mm Hg
- Heart Rate / Pulse P = 70 beats per minute
- BP and Heart Rate on Exercising must increase
 to reflect Good Cardiac Efficiency.
- If instead it goes down ↓ then it means or is a foreboding of a **Serious Heart Disease**.
- BPs = 130 / 90 to 135 / 90 mm Hg
- Heart Rate / Pulse Ps = 85 beats per minute

The Art of Measuring Blood Pressure

- The patient is seated in a chair and made to relax for 10 whole minutes, before the cuff of a manually pumping digital blood pressure measuring machine is placed on the upper left arm. After manually pumping, the Blood Pressure (BP) is measured along with the Heart Rate (P).
- Thereafter, the patient is asked to stand up and this measurement is once again immediately repeated. The standing Blood Pressure (BPs) and the Heart Rate (Ps) is also noted.

The interpretation of these numbers (pertaining to *cardiac efficiency*) is as follows:

1. In a normally healthy young person, with good cardiac efficiency; the systolic, the diastolic, and the heart rate should increase by 10 to 15 points upon standing up.

2. A poor or small increase in any or all of these numbers is indicative of poor cardiac efficiency.

3. A fall in any of these numbers is indicative of a serious cardiac inefficiency or inefficiencies and a foreboding of an eminent cardiac event.

4. Tachycardia is indicative of a serious overall nutritional deficiency pointing principally to an *intracellular magnesium deficiency*.

5. Bradycardia is indicative of a very serious overall nutritional deficiency pointing principally to an *intracellular magnesium deficiency*.

The Interpretation of These Numbers

- The interpretation of these numbers (pertaining to Cardiac Efficiency) is as follows:
- In a normally health young person, with good cardiac efficiency, the systolic, diastolic and heart rate should increase by 10 to 15 points upon standing up.
- Poor or small increase in any or all of these numbers is indicative of poor cardiac efficiency.
- A fall in any of these numbers is indicative of a serious cardiac inefficiency and is foreboding of an eminent cardiac event.
- Tachycardia or Bradycardia is indicative of a serious overall nutritional deficiency pointing principally to an intracellular magnesium deficiency.

"Cardiac Efficiency"

- BP = 110 / 70 mm Hg (Systolic / Diastolic)
- P = 70 beats per minute (after 10 mins. rest)
- BPs = 120 to 125 / 80 to 85 mm Hg (after immediately standing up)
- Ps = Standing Heart Rate = 80 to 85 beats per minute (must increase ↑ on exercise)
- No increase in BP or Heart Rate indicates Poor Cardiac Efficiency
- Falling U BP or Pulse is indicative of an Serious
 Cardiac Inefficiency and is a foreboding of an *Eminent Cardiac Event*.

From a prevention point of view, It is more important to routinely check for "cardiac efficiency" and correct it in the initial stage, rather than wait for the next stage when blood pressure rises and/or tachycardia / bradycardia manifests itself.

In case of exceedingly low heart rate, below 60 bpm, please check for missed heart beats. This is a serious cardiac problem which requires immediate attention and correction.

For the complete paper on: **Reversal of Hypertension** & **Increasing Cardiac Efficiency** please download from:

http://www.space-age.com/HighBloodPressure.pdf

This 100 page tutorial contains a full refresher course (at graduate and post graduate level) with numerous case studies and special emphasis on intracellular magnesium and vitamin D which play a very important role in cardiac health.

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Testimonials of Cardiologists

Excellent reminder like CME for all concerned. keep up the good work Dr. Vora.

A very logical way to understand important cardiology aspects from grass root level. Once your fundamentals are clarified then rest just automatically follows. You have indeed brought about your own unique method of simplifying cardiology-kudos Dr. Vora!

We should try to link up with your expertise which would benefit people in this part of the world.

HAVE KNOWN THAT SALT RESTRICTION DOES NOT WORK EQUALLY FOR ALL HYPERTENSIVES BUT YOUR CONCEPT IS TOTALLY NEW BALL GAME TO ME WHICH I AM SURE AHA & OTHER SOCIETIES WOULD APPROVE IN TIME TO COME & CHANGE THE WHOLE IDEA OF SALT RESTRICTION SPECTRUM & HTN. Kind regards Dr. Ranjeet S. Baral MBBS, (JIPMER) Ph.D.(Clinical Cardiology) DCC (Health Ministry, JAPAN) FAPSC (Fellowship cardiology) Av.Med (King¹s College, London) Consultant Cardiologist/Physician/Chief AME

Dr. Vora

Thank you for your review and updates about how to properly perform BP measurement. Kenneth Phillips MD, FCCP

I thank you for your very comprehensive post on this so important subject. Invaluable information. I also visited your links, a gold mine of information. Thank you for sharing your knowledge...

Best Regards Fernando M. Branco, Berlin, Germany.

Dear Dr. Pramod

I was astonished to find that you could use such a simple BP apparatus to use as a prognostic tool.

Really true functioning of the heart can be assessed not just by very advanced imaging technologies but also by simple tools.

Dr.Murali Krishna, Orthopedic Surgeon

Great post Pramod, If more GP's and hospitals adopted this approach the pharmaceutical industry would take a severe hit! Having the patient relax before taking a blood pressure may take extra time but it would almost certainly reduce anxiety and stress, which are inevitably the fundamental precipitators of Cardiovascular illnesses.

Adam Shaw, The Heart Guy at Adam Shaw Heart Wellbeing, <u>St Albans, United</u> <u>Kingdom</u>

Thank you so much for sharing with me. The articles you have written are awesome !!

I have been reading your articles all day long!! I am truly impressed with how you have taken what is so complicated for most of us to understand and made it simple. Thank you so much!! I look forward to using your therapies to not only heal myself but for my patients as well.

Dr. Michael Carter, M.D., Atlanta, Georgia

-----Dear Pramod Vora,

It is a great honor for me to connect with you. I am following your discussions and, can say so- I am learning from your experience. I am from Latvia, and, seems are the first in my country speaking about micronutrients in primary and secondary prophylaxis. You can imagine what a "wall" I meet by my colleges, working in classical medicine (following "evidence based" guidelines). I am graduated doctor in Internal medicine, but I have private practice where I am working with micronutrients. Actually in the field of orthomolecular medicine I am autodidact. I have really good experience by degenerative joint diseases and metabolic syndrome.

And, I just wanted to say, I am really thankful for your ideas, links etc.- this is a support for my daily practice.

Regards, Antra Briede, M.D. Latvia

Dear Dr. Vora,

I find your comments very informative and thorough on Naturopathic Cardiology Group on LinkedIn.

I loved the hypertension material. It was a treat to read.

I trained under Dr. Martin Milner at NCNM in his heart and lung clinic.

It is serendipitous to be connected to you. You truly are exemplary in your dissemination of information, education and perceptive demeanor. I would love to meet you in person someday. Shalini Kapoor

Naturopathic Physician Portland, Oregon, USA

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