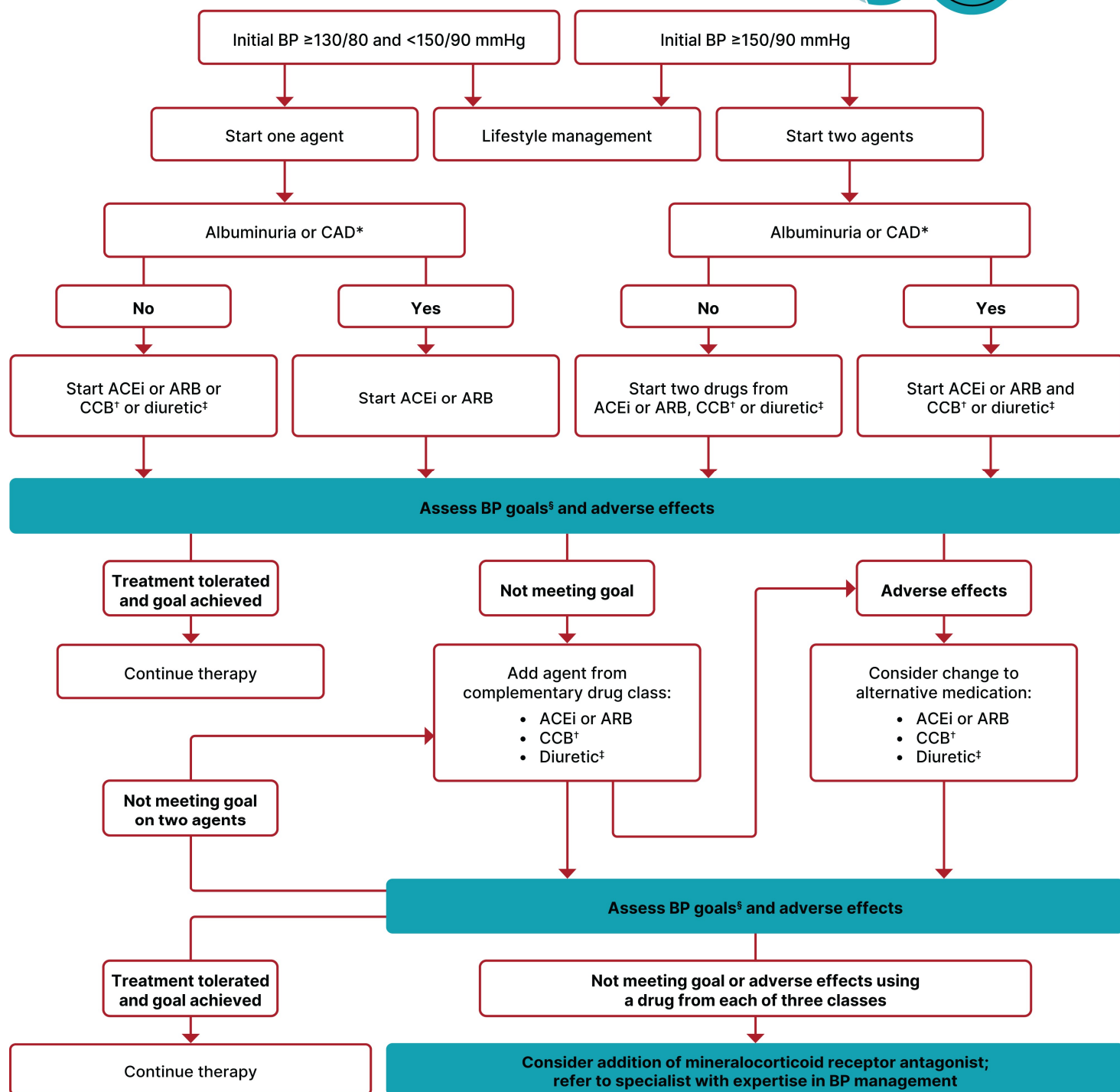


Recommendations for the treatment of confirmed hypertension in nonpregnant people with diabetes



Recommendations for the treatment of confirmed hypertension in nonpregnant people with diabetes. *An ACE inhibitor (ACEi) or angiotensin receptor blocker (ARB) is suggested for the treatment of hypertension in people with coronary artery disease (CAD) or urine albumin-to-creatinine ratio 30–299 mg/g creatinine and is strongly recommended for individuals with urine albumin-to-creatinine ratio ≥ 300 mg/g creatinine. [†]Dihydropyridine calcium channel blocker (CCB). [‡]Thiazide-like diuretic; long-acting agents shown to reduce cardiovascular events, such as chlorthalidone and indapamide, are preferred. [§]If it can be safely attained, the on-treatment blood pressure goal is $< 130/80$ mmHg; a systolic blood pressure goal < 120 mmHg should be encouraged in individuals with high cardiovascular or kidney risk. BP, blood pressure. Adapted from de Boer et al. (24).

ADA 2026 Standards of Diabetes Care Figure 10.2 Vol.49, S216–S245

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