

Year V, v.2 2025 | Submission: 12/19/2025 | Accepted: 12/21/2025 | Publication: 12/23/2025 The role of Primary Health Care in the follow-up of patients with systemic arterial hypertension: a narrative review.

The role of Primary Health Care in the follow-up of patients with systemic arterial hypertension: a narrative review

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#### **Summary**

Systemic arterial hypertension (SAH) is one of the most prevalent chronic conditions in the adult population and represents a significant public health problem due to its association with cardiovascular, cerebrovascular, and renal diseases. Within the context of the Brazilian Unified Health System (SUS), Primary Health Care (PHC) occupies a strategic position in the follow-up of these patients, enabling continuous care, care coordination, and a person-centered approach. The objective of this article is to analyze, through a narrative literature review, the role of PHC in the follow-up of patients with systemic arterial hypertension. The method consisted of analyzing national guidelines, documents from the Ministry of Health, and scientific studies in the areas of public health and Primary Health Care. The literature indicates that strategies based on longitudinal care, health education, strengthening the professional-user bond, and multidisciplinary action contribute to improved therapeutic adherence and blood pressure control. It is concluded that strengthening structured practices in PHC is fundamental for addressing arterial hypertension and improving the quality of care for chronic conditions.

Keywords: Systemic arterial hypertension. Primary Health Care. Family and Community Medicine. Chronic diseases.

### **Abstract**

Systemic arterial hypertension (SAH) is one of the most prevalent chronic conditions among adults and represents a major public health problem due to its association with cardiovascular, cerebrovascular, and renal diseases. Within the Brazilian Unified Health System, Primary Health Care (PHC) plays a strategic role in the follow-up of hypertensive patients by enabling continuous care, care coordination, and a person-centered approach. This article aims to analyze, through a narrative literature review, the role of PHC in the follow-up of patients with systemic arterial hypertension.

The method consisted of analyzing national guidelines, documents from the Ministry of Health, and scientific studies in the fields of public health and Primary Health Care. The literature indicates that strategies based on longitudinal care, health education, strengthening the professional-patient bond, and multiprofessional practice contribute to improved treatment adherence and blood pressure control. It is concluded that strengthening structured practices in PHC is essential for addressing systemic arterial hypertension and improving the quality of care for chronic conditions.

Keywords: Systemic arterial hypertension. Primary Health Care. Family Medicine. Chronic diseases.

# 1. Introduction

Systemic arterial hypertension (SAH) is recognized as one of the main diseases chronic non-communicable diseases, both due to their high prevalence and their impact on the Cardiovascular morbidity and mortality. It is estimated that approximately 30% of the adult population will experience cardiovascular disease. Brazilian women present with elevated blood pressure levels, which directly impacts the increased risk of cardiovascular events and healthcare system costs (Barroso et al., 2021).

Primary Health Care (PHC) is responsible for monitoring most patients with hypertension within the Unified Health System (SUS). Among its responsibilities are:

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early diagnosis, longitudinal follow-up, care coordination, and development of

Health promotion and complication prevention actions (Brazil, 2006). The proximity of Primary Health Care.

relating to the territory and the daily lives of its users gives it a central role in managing the conditions.

chronicles.

Despite the wide availability of clinical guidelines, adequate blood pressure control

This still represents a challenge in healthcare services. Difficulties related to adherence to treatment,

the continuity of monitoring and the incorporation of recommendations into the daily routine of primary health care are

frequently described in the literature (Gonzalez, 2015). In this context, this article aims to...

The objective is to analyze the role of Primary Health Care in the follow-up of patients with

Systemic arterial hypertension, based on a narrative literature review.

2. Theoretical Framework / Results

2.1 Primary Health Care and the management of arterial hypertension

Primary health care (PHC) is the main point of attention for the management of hypertension.

Systemic, because it allows for continuous monitoring and a comprehensive approach to the individual.

Brazilian guidelines on arterial hypertension highlight that adequate blood pressure control depends

the association between pharmacological treatment, lifestyle changes and regular follow-up of

patients (Barroso et al., 2021).

Longitudinal care, a central characteristic of primary health care and family and community medicine,

It allows monitoring the patient over time, facilitating the early identification of problems.

therapeutic and treatment-related difficulties. However, the literature indicates that the low

Therapeutic adherence remains one of the main obstacles to the control of hypertension (Gonzalez, 2015).

2.2 Health education and adherence to treatment

Health education is widely recognized as a fundamental strategy in the management of

High blood pressure. Studies indicate that educational initiatives contribute to increasing knowledge.

to educate users about the disease, promote self-care, and encourage sustainable lifestyle changes.

life (Menezes et al., 2020).

Strategies such as individualized guidance, educational groups, and follow-up.

Systematic treatment shows a positive association with better levels of adherence to treatment and control.

pressure-based, reinforcing the role of primary health care as a privileged space for these interventions.

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# 2.3 Organization of care and coordination in Primary Health Care

The organization of care in Primary Health Care is described in the literature as an essential element for the effective monitoring of people with systemic arterial hypertension.

When primary health care (APS) assumes the coordination of care, it becomes responsible for coordinating clinical actions. preventive and health promotion measures, ensuring continuity of care and avoiding fragmentation. of care (Brazil, 2006).

Studies highlight that defining care flows and scheduling regular appointments are crucial.

Follow-up and the systematic use of clinical protocols contribute to greater resolution.

In the management of hypertension, care coordination is also fundamental in cases where there is...

The need for referral to other levels of care, ensuring timely return to primary health care.

and continuity of clinical follow-up (Barroso et al., 2021).

In this sense, primary health care is consolidated as a strategic space for the management of care for... chronic conditions, especially when integrated with health information systems and practices continuous clinical monitoring, facilitating decision-making and the evaluation of the effectiveness of interventions over time.

# 2. Material and Method

This is a narrative literature review. Normative documents were analyzed.

Ministry of Health, national guidelines on hypertension and scientific articles published in The selection of material prioritized studies that...

that they addressed the monitoring of patients with hypertension within the scope of primary health care, with an emphasis on care. Longitudinal approach, health education, and multidisciplinary practice.

# 3. Results and Discussion

The literature reviewed shows that primary health care plays a central role in monitoring...

Patients with systemic arterial hypertension. Strategies based on longitudinal care, in

Strengthening the professional-user bond and fostering multidisciplinary practice are recurring themes in...

Studies on factors associated with improved therapeutic adherence and blood pressure control include:

(Menezes et al., 2020).

However, studies also point to gaps related to the standardization of actions, to The sustainability of strategies over time and the continuous training of teams. These

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The findings reinforce the need for investments in the organization of the work process and in

Ongoing evaluation of practices developed in primary health care.

In addition to the positive aspects described, the literature also points to important limitations in Monitoring of systemic arterial hypertension in Primary Health Care. Structural barriers,

Factors such as team overload, high staff turnover, and resource limitations can

to compromise the continuity of care and the effectiveness of the proposed strategies.

These challenges highlight that the success of actions aimed at controlling hypertension does not depend not only from the adoption of clinical protocols, but also from favorable organizational conditions and public policies that strengthen primary health care. Thus, a critical analysis of the studies reinforces the need of continuous investments in team training and work process organization, of in order to sustain care strategies over time.

## **Final Considerations**

This narrative review shows that Primary Health Care plays a role.

fundamental in the monitoring of patients with systemic arterial hypertension. The care

Longitudinal care, combined with health education and multidisciplinary action, proves essential for the

Improved therapeutic adherence and blood pressure control.

It is concluded that strengthening structured primary health care practices is essential for... coping with arterial hypertension. It is suggested that future research should further evaluate the effectiveness of these strategies in different territorial contexts, contributing to the qualification of Be careful with chronic conditions.

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