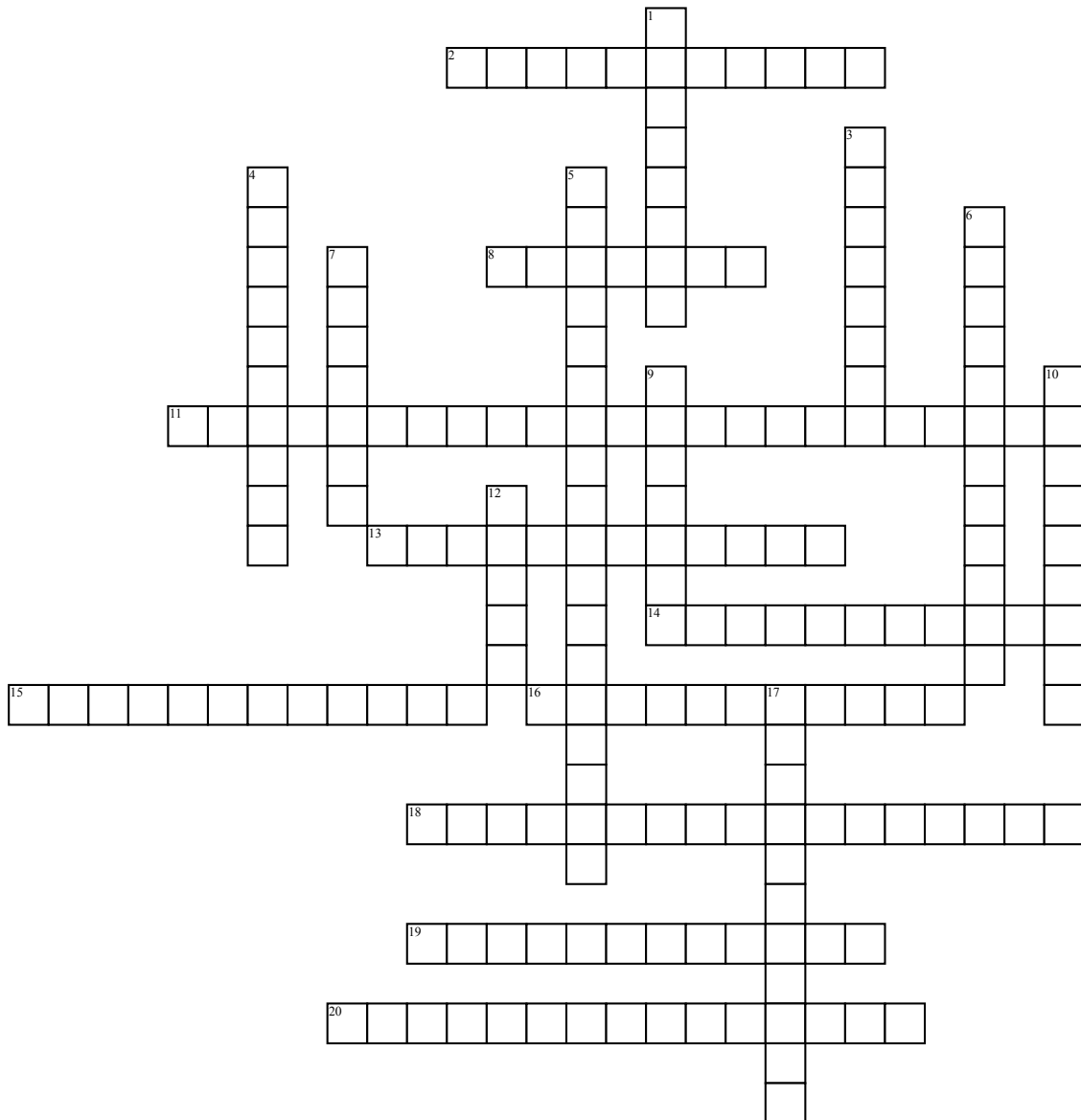


# Blood Pressure Pathologies



## Across

2. Irregular heart rate/rhythm (pounding, racing, fluttering, jumping)  
 8. This type of syncope is associated with increased mortality  
 11. Reduction in blood pressure and HR after rising from a sitting or supine position  
 13. Persistent elevation of blood pressure  
 14. Stimulated by angiotensin II in order to increase vasoconstriction  
 15. This category of medication causes relaxation in vascular smooth muscle, decreasing TPR, venous return, and CO and therefore decrease BP  
 16. This category of medication typically has names ending in "olol"  
 18. Patients on direct vasodilators or alpha-blockers may experience \_\_\_\_\_

19. This type of medication inhibits an enzyme that converts angiotensin I to angiotensin II which reduces vasoconstriction and TPR  
 20. A patient with a blood pressure of 120-139/80-89 would be classified in this stage

## Down

1. Pressure in the arteries when the heart contracts  
 3. Beta blockers work to \_\_\_\_\_ heart rate and heart force of contraction  
 4. Essential hypertension is said to be \_\_\_\_\_ (cause is unknown)  
 5. Short term control of blood pressure is accomplished by \_\_\_\_\_  
 6. Pain or cramping sensation in the lower extremity

7. A temporary loss of consciousness followed by spontaneous recovery (fainting)  
 9. Shortness of breath/difficulty breathing  
 10. Compliance of the blood vessels is \_\_\_\_\_ proportional to BP  
 12. \_\_\_\_\_ Is released in response to low BP and decreased blood flow to kidneys  
 17. Physical stress when upright due to gravitational forces creating the potential for venous pooling