Introduction and Aim of the Work

Introduction

During the last 25 years,24- hours noninvasive ambulatory blood pressure monitoring (ABPM) has evolved from a research tool of limited clinical use into an important tool for stratifying cardiovascular risk and guiding therapeutic decisions, ***(Michael et al .,2002)***.

Until recently , clinical use of (ABPM) focused on identifying patients with white- coat hypertension , but accumulated evidence now points to greater prognostic significance of (ABPM) in determining risk for target organ damage compared with that of office blood pressure measurements ***(Michael et al .,2002)***..

Probably the most common indication for (ABPM) is the suspicion of white- coat hypertension , a phenomenon where by some patients who apparently have raised blood pressure actually have normal blood pressure when measurement is repeated away from medical field , ***(Pickering et al ., 1988).***

Patients with white - coat hypertension may receive an incorrect diagnosis of sustained hypertension, this phenomenon has been reported in as many as 15-30% of patients labeled and treated as hypertensives (Nearly one in every five patients , may receive antihypertensive drugs inappropriately), ***(Pickering et al ., 1988)***

White - coat hypertension defined by the following criteria:

1-Office blood pressure greater than 140/90 mm Hg during three different visits.

2-At least two measurements outside the physician's office with blood pressure lower than 140/90 mm Hg.

3-Daytime ambulatory blood pressure lower than 135/85 mmHg, ***(Verdecchia et al., 2003).***

Even using this restrictive definition for white - coat hypertension , a significantly higher incidence of target organ damage (as left ventricular hypertrophy , retinopathy) was observed in a population with white coat hypertension compared with normotensive persons, ***(Palatini et al ., 1998).***

According to available evidence to date , one can hypothesize that white - coat hypertension may be a " Prehypertensive" state , and these patients are prone to develop sustained hypertension overtime, ***(Palatini et al ., 1998).***

Whether treatment is necessary? Remains unknown and further longitudinal studies are being carried out to answer this question ! ***(Palatini et al ., 1998).***