



(Front cover)

TEKTURNA

You inherited your grandma's smile, your mom's hair and your big sister's sense of style...

But you don't have to inherit their uncontrolled high blood pressure.

(Inside front cover)

Callout: One African American dies every hour from hypertension in the U.S.¹

(Page 1; 210 words)

High blood pressure may run in your family—but it doesn't have to run your life.

If you're African American, it's likely someone in your family has high blood pressure—also known as *hypertension*. More than 40% of all African Americans suffer from this life-threatening disease.

The “Silent Killer” hits African Americans harder than others.

Hypertension is called the “Silent Killer” because it has no symptoms. One quarter of all African Americans with hypertension go undiagnosed: many of us don't know we have the disease until we have a heart attack, stroke or kidney failure. The numbers tell an alarming story:

- African Americans have nearly twice the hypertension death rate of other Americans.²
- High blood pressure is the leading cause of congestive heart failure in African Americans.³
- Only one in four African Americans with hypertension have the disease under control.⁴

Today you can beat the numbers.

At Novartis, we're here to help you take charge of your high blood pressure. This brochure is packed with information on lifestyle, healthy eating, exercise—and a new medication—that may help you control your hypertension. So your kids can inherit a new family heritage: Good health.

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

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Callout:

Myth: “Blood pressure medicine doesn’t work for African Americans.”

Fact: African Americans often have stubborn hypertension. But our high blood pressure responds very well to a healthy food plan, lifestyle change-
- and aggressive treatment with the right medication.

(Page 3; 213 words)

Hypertension myths and facts

Just like bad habits and old stereotypes, misunderstandings about hypertension die hard. Here are some common myths about hypertension—followed by the facts.

Myth: “All the women in our family have pressure. It’s just something we have to live with.”

Fact: While you can’t control your family history, there’s plenty you can do to control your blood pressure. Healthier lifestyle and food choices—and TEKTURNA, a new medication—may help lower your blood pressure—even if other medications failed.

Myth: “I’m too young to have high blood pressure—it’s an old-folks’ disease.”

Fact: Ten percent of all Americans aged 20-44 have hypertension. The rate is twice as high for African Americans the same age.⁵

Myth: “I don’t need to take my blood pressure medicine—I feel just fine.”

Fact: High blood pressure has no symptoms. It can silently destroy your blood vessels, heart and kidneys. Don’t stop taking your medication unless your doctor says so.

Don’t let old myths stand in the way of your health.

Get the help you need to lower your blood pressure today. Ask your doctor about TEKTURNA, the breakthrough medication that offers a completely new approach to hypertension control.

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

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For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

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Callout: Finally. Something new in hypertension control

(Page 7; 149 words)

Section 1: TEKTURNA: A medical breakthrough in hypertension treatment

Are you at the end of your rope with stubborn high blood pressure?

You take your medicine, cut back on salt, watch your diet and try to exercise—and your pressure still won't budge.

Introducing a breakthrough hypertension treatment

If lifestyle change and medication haven't helped lower your blood pressure, ask your doctor about TEKTURNA.

TEKTURNA is a completely new approach to blood pressure control. Unlike other hypertension medications, TEKTURNA goes directly to an important source of high blood pressure. TEKTURNA is proven to help people with stubborn hypertension—people whose pressure won't budge.

TEKTURNA:

- Is the first new class of hypertension medications in ten years
- Treats hypertension in a completely new way
- Can stop a hypertension chain reaction before it starts

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(Page 8; 163 words)

Hypertension: A dangerous chain reaction inside your body

Ever knock over a burning candle? If you don't put out the fire, it spreads from candle to table and then from room to room. It's an unstoppable chain reaction.

High blood pressure works the same way in your body. Hypertension is sparked by a protein called renin (pronounced ree-nin) produced in your kidneys. Renin begins a chain reaction that moves through your body causing it to:

- Tighten blood vessels
- Slow blood flow to organs
- Strain your heart
- Stress your kidneys

These tensions cause your blood pressure to rise.

Permanent organ damage: The high price of hypertension

Just as fire releases deadly smoke, renin's chain reaction releases dangerous materials in your body. Materials that can damage your heart and blood vessels. This is how stroke, heart failure and kidney disease begin.

(Graphic: Hypertension cycle before TEKTURNA?)

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(Page 9; 116 words)

TEKTURNA stops the chain reaction.

What if you blow out the candle before it tips over and starts a fire?

That's how TEKTURNA works in your body.

TEKTURNA is the first-ever medication in a new class of drugs called Direct Renin Inhibitors (DRI). These DRIs stop renin before it can start a dangerous chain reaction. Before damaging materials can be released in your body.

With renin safely blocked:

- Blood vessels relax
- Blood flows smoothly
- The heart beats with less strain
- Kidneys function better

And blood pressure can drop to healthier lower levels.

(Graphic: Hypertension cycle after TEKTURNA?)

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(Page 11; 195 words)

TEKTURNA: Something new in blood pressure control

TEKTURNA's renin-blocking action is a medical breakthrough. It gives you an entirely new way to control blood pressure. Other hypertension medications try to "put out the fire" *after* renin's chain reaction begins. TEKTURNA "stops the fire" *before* it starts.

TEKTURNA may help prevent organ damage.

TEKTURNA blocks renin and stops its dangerous chain reaction before it starts. This halts the release of harmful materials in your body, and may help prevent damage to your heart and blood vessels.

Powerful hypertension treatment without life-altering side-effects

If you can't tolerate the strong side effects of other hypertension medications, TEKTURNA may be the choice for you. In clinical studies, TEKTURNA's side effects included headache, dizziness, fatigue, back pain and cough. These side effects were usually mild and brief.

And TEKTURNA gives you:

- The convenience of once-a-day dosage
- Smooth twenty-four hour control—even in the morning hours when blood pressure usually rises
- Treatment that's as individual as you are. TEKTURNA is highly effective alone—or it can be safely combined with other blood pressure medications.

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(Page 13; 238 words)

Section 2: About blood pressure and hypertension

Blood pressure is not your enemy.

Everyone needs blood pressure. It's the force that pushes blood through your body.

- **Blood pressure stays normal** when your heart pumps smoothly and blood vessels are relaxed.
- **Blood pressure raises** when a lot of blood is pumped with strong force—or when blood vessels are tight.
- **Normally, blood pressure rises and falls throughout the day** due to exercise, stress and other factors.
- **Hypertension is blood pressure “stuck” on high.** When pressure remains high for more than a day or two—say, you ate a lot of salty food—your blood pressure resets itself to *stay* high. Once “stuck” on high, blood pressure is very hard to move.

“Why do I have high blood pressure?”

No one knows exactly what causes high blood pressure—but age, race and family history seem to play a part. Eating salty, fatty foods, stress, drinking too much alcohol, smoking and being overweight make high blood pressure worse.

Health risks for African Americans with high blood pressure

High blood pressure can cause stroke, heart disease, kidney failure and blindness. Risks are higher for African Americans. High blood pressure hits us at a younger age than other Americans. And we have more complicated high blood pressure and higher rates of hypertension-related death.

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(Page 14; 211 words)

Why you need to know your numbers.

Remember, hypertension has no symptoms. To protect yourself from stroke, heart attack and kidney disease, you need to see your doctor regularly—and keep close track of your blood pressure numbers.

Look inside your heart to learn about blood pressure numbers.

Your heart beats in two movements. It squeezes when it pushes blood out. And it pauses to rest and refill. When you measure the pressure of these two movements—using a blood pressure meter—you get your blood pressure numbers.

Let's say your blood pressure is 140/90mm Hg:

- The top number—140mm Hg—measures your blood pressure when your heart squeezes.
- The bottom number—90mm Hg—measures your blood pressure when your heart rests and refills.
- “mm Hg” is a scientific term to describe the way the meter measures your blood pressure.

The higher your numbers, the higher your risk:

- **Normal blood pressure** for most people is 120/80mm Hg or lower.
- **Hypertension starts** at 140/90mm Hg.
- **For most people with hypertension, health risks double** with every 20/10mm Hg your blood pressure rises over 115/75mm Hg.

(Graphic: Blood pressure chart from General Brochure?)

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(Page 15; 195 words)

Health alert: New medical guidelines for African Americans with high blood pressure

In response to the African American hypertension crisis, the American Heart Association and the Association of Black Cardiologists recently changed blood pressure treatment guidelines. They suggest that African Americans with hypertension:

- **Aim for a blood pressure goal of 130/80mm Hg or lower.**
- **Try two medications**—rather than one—when starting blood pressure treatment. Medical experts advise that one of the medications be a diuretic—a treatment that helps rid your body of extra water.

TEKTURNA works safely and effectively with other medications.

TEKTURNA is a completely new approach to blood pressure control. It works safely and effectively alone. And TEKTURNA may provide even more benefits when combined with a diuretic or other treatment suggested by your doctor.

Find your Blood Pressure Success Zone—and stay there.

According to the latest research, blood pressure that falls between 120/80mm Hg and 139/89mm Hg may prevent many serious health conditions. At Novartis, we call this range your Blood Pressure Success Zone. To learn more, visit our website at www.bpsuccesszone.com.

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

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Callout: Today you're not powerless over hypertension. It's time to take charge.

(Page 17; 192 words)

Section 3: You can take charge of your hypertension.

“I can take charge of my life.”

While there are some things about hypertension you *can't* control—age, race, family history—there are plenty of things you *can* do to make a difference. With an extra boost from TEKTURNA, changes in lifestyle, food choices and exercise go a long way in lowering your blood pressure.

As you begin to plan healthy new choices, remember:

It's not all or nothing. Change can be challenging. Don't make it harder by setting impossible goals. Instead of a starvation diet, try eating healthy, balanced meals like those on Dietary Approaches to Stop Hypertension—the DASH food plan. (See **My Take-Charge Card: Food Plan**, next page.)

Don't do it alone. It's easier to make lifestyle changes with the support of the people you love. Tell your family and friends at work and church about your commitment to controlling blood pressure. Rely on your doctor for advice on breaking the nicotine habit, suggestions for diet and exercise—and the latest news on hypertension medication.

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(Side A; 189 words)

My Take-Charge Card: Food Plan

A healthy food plan that can lower blood pressure in 14 days.

When you're struggling with hypertension, sometimes it helps to see fast results. Many people quickly lower their blood pressure after starting Dietary Approaches to Stop Hypertension—the DASH food plan

The DASH food plan:

- Is proven to lower blood pressure in two weeks
- May improve response to TEKTURNA and other hypertension medications
- Reduces insulin resistance

Make a DASH for healthy eating while still enjoying the foods you love:

- Instead of salt, season recipes with herbs, lemon and lime juices and Caribbean, East Indian or no-salt spice mixes.
- Adapt your favorite foods for healthier meals—broil chicken and fish instead of frying, skip apple pie and enjoy a baked apple instead.
- Stop buying salty, high-fat packaged snacks—pop your own no-fat popcorn, oven-fry sweet potatoes with herbs and a teaspoon of oil, munch carrot sticks instead of cheese puffs.

To learn more about the DASH food plan, turn this card over.

(Side B; 49 + words)

My Take-Charge Card: Food Plan

Make a DASH for good health today.

DASH is a healthy food plan that lets you eat deliciously while lowering fat and salt in your meals. DASH includes:

(Note: See meal in **Following the DASH Eating Plan** on page 14 of NIH's *Your Guide to Lowering your Blood Pressure with DASH*,

http://www.nhlbi.nih.gov/health/public/heart/hbp/dash/new_dash.pdf)

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(168 words)

My Take-Charge Card: Lifestyle

You deserve positive change.

Half the battle of lifestyle change is inside your head. Commit yourself to one of these positive changes today—and watch your attitude follow:

- **Spend a day on the DASH food plan** or another balanced diet.
- **Attend a smoker's support group.** Or speak to your doctor about a patch or other medication you may need to kick the nicotine habit.
- **Enjoy alcohol in moderation.** Limit yourself to two drinks at parties. Light beer or a wine spritzer—half white wine, half seltzer—are good choices.
- **Stay active and move around.** Turn off the TV, go outside on your lunch break, wash your car.
- **Reduce stress.** Take breaks at work, allow time to prepare and eat a healthy meal with your family, try deep breathing or another relaxation technique, set aside ten minutes for prayer, meditation or writing in a journal.

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(233 words)

My Take-Charge Card: Realistic Exercise

No need to be a pro athlete. Just move!

Exercise is one of the best ways to control high blood pressure. It strengthens your heart and veins, gets your blood moving, helps you lose weight and reduces stress.

You don't need to join a gym or hire a personal trainer to start exercising. Try some of the following suggestions to raise your heartbeat to a healthy level and get your blood going:

- Walk to the store, church or to visit a friend, instead of driving or taking the bus.
- If you ride the bus, get off one or two stops early and walk the rest of the way.
- Meet a friend at the mall for a brisk walk and window shopping. Many malls open early just for exercisers.
- Take the stairs instead of an elevator or escalator.
- Dance. Enjoy an evening out with your spouse, or turn up the music at home.
- Take a stretch and walk around for a few minutes every hour or so, if you work at a computer or sit a lot at your job.
- Don't eat lunch at your desk. Go outside for quick walk and breath of fresh air.
- Weed the garden, mow the lawn, plant a flower bed.

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(Page 18)

Callout: Your mom. Your son. Your girlfriend. Your neighbor. Your co-worker. Your doctor. Your health partners at Novartis. Your circle of support.

(Page 19; 211 words)

Section 4: Widen your circle of support to control hypertension.

Hypertension *can* be controlled.

For a variety of reasons, African Americans often have more stubborn and complicated high blood pressure than other Americans. But with personal commitment and supportive healthcare, our hypertension can be successfully treated and controlled.

A recent study reported that young urban African American men with hypertension—a group often considered difficult to reach medically—dramatically lowered and maintained reduced blood pressure.⁶ What made the difference? A team approach that involved the young men, the community and healthcare staff.

Partner with your doctor to get the most out of treatment.

African Americans have traditionally depended on family and community to manage many health issues. But high blood pressure is a complicated disease that requires medical expertise. Your doctor can:

- Evaluate your health history
- Help you find your own Blood Pressure Success Zone—the blood pressure goal that’s right for you
- Monitor your blood pressure regularly
- Give practical advice on lifestyle change that works for you
- Help you find a healthy food and exercise plan
- Give you the inside story on TEKTURNA, the new approach to hypertension control

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(Side A; 207 words)

My Take-Charge Card: Talking To My Doctor⁷

Five tips to help you talk to your doctor

Who isn't tongue-tied in the face of a jam-packed waiting room, rushed medical staff and a busy physician? Here are some tips to help you talk to your doctor and get the most out of your visit.

- 1. Make a list.** Before your visit, write a list of questions. Put your most important concerns at the top of the list.
- 2. Bring everything you need.** Your TEKTURNA brochure, insurance or Medicare card, names and phone numbers of your other doctors, medical records, test results and a list of all the medications you take. Or bring all your medications inside a clear plastic bag.
- 3. Fill in your doctor.** Tell him or her about any other doctor's or emergency room visits, new medicines—or changes in weight, appetite, energy and mood.
- 4. Carry a note pad and pencil** and jot down your doctor's responses and recommendations.
- 5. Take a family member** along. In addition to emotional support, a relative—or friend—can remind you to ask questions and help you remember answers.

Have a feeling your blood pressure numbers are wrong?

Turn this card over to find out what you can do.

(Side B; 163 words)

My Take-Charge Card: Talking To My Doctor

When you think your numbers are wrong

You checked your blood pressure at home or at a community center—and the numbers are different from the reading at your doctor’s office. Here are some pointers that may provide a more accurate reading.

- **Make sure the blood pressure cuff fits.** If you have a big arm and the cuff is too small, you won’t get a correct reading. Ask for a cuff that fits.
- **Ask about “ambulatory” monitoring.** If your numbers are low outside your doctor’s office and high during visits, you may have “white coat hypertension.” This stress-related condition makes your blood pressure rise during a doctor’s visit. Ask about at-home or “ambulatory” monitoring.
- **Check your blood pressure regularly.** Since each person’s hypertension is different, rely on your doctor to tell you how often you should be monitored.

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(Side A; 175 words)

My Take-Charge Card: Doctor's Visit

My checklist for doctor's visits:

- List of questions, concerns and issues to talk about with my doctor
- Insurance or Medicare cards
- Names and phone numbers of other doctors I see
- Medical records and test results
- List of all the medications I take—or a clear plastic bag with all my medications inside
- My TEKTURNA brochure

Questions for my doctor:

1. How often should I come in for blood pressure monitoring?
2. What are my current blood pressure numbers? _____/_____ mm Hg
3. What blood pressure goal is right for me? _____/_____ mm Hg
4. If I'm not at my blood pressure goal, what suggestions can you give me about lifestyle, diet and exercise that can help me reach my goal?
5. Would it help to add or change my blood pressure medications?
6. Could TEKTURNA help me safely reach my blood pressure goal?
7. Is TEKTURNA covered by my insurance plan?

More questions:

To keep an ongoing record of your blood pressure, turn this card over.

(Side B; 63 words)

My Take-Charge Card: Doctor's Visit

My blood pressure record

My goal blood pressure is: _____ / _____ mm Hg

Today my blood pressure is:

Date	Blood Pressure
_____	_____ / _____ mm Hg
_____	_____ / _____ mm Hg
_____	_____ / _____ mm Hg
_____	_____ / _____ mm Hg
_____	_____ / _____ mm Hg
_____	_____ / _____ mm Hg
_____	_____ / _____ mm Hg
_____	_____ / _____ mm Hg

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(Page 19; 189 words)

Closing message/Call to action

You don't have to live with uncontrolled high blood pressure. TEKTURNA. It's time to take charge.

Uncontrolled blood pressure is a life-threatening condition—especially for African Americans. If other medications haven't helped you lower your blood pressure, ask your doctor about TEKTURNA's new approach to hypertension control.

TEKTURNA is:

- A medical breakthrough. TEKTURNA is the first new class of hypertension medications in ten years.
- A medication that stops a hypertension chain reaction before it starts. TEKTURNA blocks renin and prevents the release of dangerous materials in your body—materials that can damage your heart, blood vessels and kidneys.
- A treatment that helps relax blood vessels and eases stress on your heart.
- An easy-to-take medication. TEKTURNA's once-a-day dose provides long-lasting 24-hour blood pressure control—even in the early morning.
- A new treatment that's effective alone—or can be safely combined with other hypertension medications recommended by your doctor.
- Proven safe and effective in lowering high blood pressure—with fewer side effects than other hypertension medications.

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

(Pocket for PPI; 88 words)

List of reliable resources

Free information on hypertension

Contact the following organizations for a wealth of free information on high blood pressure—and the special health needs of African Americans with hypertension:

The American Heart Association

www.americanheart.org

Call toll-free: 1-800-123-4567

American Society of Hypertension

www.ash-us.org

Call toll-free: 1-800-123-4567

Novartis

www.novartis.com

Call toll-free: 1-800-123-4567 (Will you have a toll-free number?)

Novartis' Blood Pressure Success Zone

www.bpsz.com

International Society on Hypertension in Blacks (ISHIB)

http://www.ishib.org/HI_ishgui.asp

For more information, call 1-888-TEKTURNA or visit www.TEKTURNA.com. See your doctor for full prescribing information.

Footnotes:

¹ University of Maryland Medical Center http://www.umm.edu/heart/blood_pressure.html, December 20, 2006

² University of Maryland Medical Center http://www.umm.edu/heart/blood_pressure.html, December 20, 2006

³ healthology.com http://www.healthology.com/hybrid/hybrid-transcript.aspx?focus_handle=main&content_id=3083&Brand_name=healthology&sv=3, December 20, 2006

⁴ University of Maryland Medical Center http://www.umm.edu/heart/blood_pressure.html, December 20, 2006

⁵ Centers for Disease Control and Prevention, U.S. Department of Health and Human Services, Hypertension Among Adults: U.S., 1999-2002 (Source: NHanes) <http://209.217.72.34/HDAA/TableView/tableView.aspx?reportId=109>, December 20, 2006

⁶ The Johns Hopkins Gazette <http://www.jhu.edu/~gazette/2003/17nov03/17africa.html>, December 20, 2006

⁷ Some suggestions were inspired by *Talking With Your Doctor: A Guide for Older People* at Blackhealthcare.com. I believe I've made this material my own, but please check for copyright issues: <http://www.blackhealthcare.com/BHC/Pamphlets/Talking.asp#wcid>