**Online Supplement**

***Empirical data on blood pressure measurement variability for different office and out of office measurement methods***

Empirical data on within person variation in blood pressure are provided by a study of Warren et al of 163 adults who were part of a clinical trial of ‘Asparagus-P’ and were living in Germany1. The clinical trial was a proof of principle study, and no convincing evidence was found that the intervention had any effect on blood pressure. Trial participants were adults who were perceived to be at increased cardiovascular risk on the basis of a reported previous diagnosis of hypertension, or an elevated body mass index, and represented a mixture of general public and primary care patients. The authors sought to determine the average within individual coefficient of variation for three methods of blood pressure measurement: (i) office blood pressure measured in duplicate, and repeated 6 weeks apart (OBPM); (ii) daytime average from 24-hour ambulatory monitoring repeated 6 weeks apart (ABPM); and (iii) home self-monitoring of blood pressure from 7 days of self-monitoring with replicate measurements taken twice daily and the first day’s data discarded, and repeated 6 weeks apart (HBPM). These empirical data were calculated from ‘raw’ BPs on the natural scale, and allow estimation of the effect of averaging two office measurements made in replicate, or of averaging out of office measurements, as is recommended in the new ACC/AHA high BP guideline.

1. Warren RE, Marshall T, Padfield PL, Chrubasik S. Variability of office, 24-hour ambulatory, and self-monitored blood pressure measurements. *British Journal of General Practice.* 2010;60(578):675.