

Hypertension disparity linked to environment

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Social environment may play a greater role in the disparity between the numbers of African Americans living with hypertension compared to non-Hispanic whites with the disease. A study by researchers at the Johns Hopkins Bloomberg School of Public Health found that the disparity was substantially reduced when comparing groups of African Americans and non-Hispanic whites living in similar social environments. The results are published in the November 2008 print edition of *Social Science and Medicine*.

"Our study found that nearly 31 percent of the hypertension disparity among African Americans and non-Hispanic whites is attributable to environmental factors," says Roland James Thorpe Jr., PhD, lead author of the study and an assistant scientist with the Bloomberg School's Hopkins Center for Health Disparities Solutions. "These findings show that ethnic disparities could be linked to a number of factors other than race. Careful review of psychosocial factors, stress, coping strategies, discrimination and other personality characteristics could play a large role in reducing or eliminating the disparity."

Commonly referred to as the "silent killer," hypertension is the most common cardiovascular disease, affecting 65 million adults in the U.S. Hypertension is a serious condition that can damage the heart and blood vessels and eventually lead to stroke, heart failure, heart attack, kidney failure and vision problems. Previous studies have found that African Americans tend to have an earlier onset and higher prevalence of the disease than non-Hispanic whites.

Thorpe, along with colleagues from the Bloomberg School's Center for Health Disparities Solutions and North Carolina Central University, compared data from the Exploring Health Disparities in the Integrated Communities (EHDIC) study and the National Health and Nutrition Examinations Survey (NHANES) to determine if racial disparities in hypertension persisted in communities where there is a minimal difference in social environments. The EHDIC study examines racial disparities among African Americans and non-Hispanic whites with the same median socioeconomic status who reside in the same community. NHANES, a cross-sectional survey, reviews the health, function and nutritional status of people in U.S.

"After adjusting for demographic variables, our research found that while African Americans still displayed greater odds of being hypertensive compared to non-Hispanic whites, there was a dramatic decrease in the ratio. Our study concluded that race differences in social and environmental exposures partially accounted for race differences in hypertension," said Thomas LaVeist, PhD, senior author of the study and director of the Hopkins Center for Health Disparities Solutions. "These findings support our theory that the disparity is likely caused by environmental factors along with several external factors and not biological differences among race groups, as previously suspected."

Source: Johns Hopkins University Bloomberg School of Public Health

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