

Control of high blood pressure improving in US, but prevalence not decreasing

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About 50 percent of patients with hypertension have adequate control of their blood pressure, meeting a goal of Healthy People 2010, but the rate of hypertension in the U.S. has not decreased in recent years, according to a study in the May 26 issue of *JAMA*.

"[Hypertension](#) is a prevalent condition affecting approximately 65 million individuals in the United States based on a preliminary report from the National Health and Nutrition Examination Survey (NHANES) 2005-2006 and coincident U.S. population estimates. Given the prevalence and impact of hypertension on health outcomes and disparities, several national initiatives developed programs, guidelines, and policies to facilitate hypertension prevention, detection/awareness, treatment, and control," according to background information in the article. Hypertension control (defined as systolic blood pressure [BP] values of less than 140 mm Hg and diastolic BP values of less than 90 mm Hg) increased from 10 percent in NHANES II (1976-1980) to 31 percent in 1999-2000. The Healthy People 2010 goal was to achieve BP control in 50 percent of the U.S. population.

Brent M. Egan, M.D., of the Medical University of South Carolina, Charleston, and colleagues examined changes in hypertension prevalence, awareness, treatment, and control for all adults combined and for subsets by age, race/ ethnicity, and sex across NHANES 1988-1994 and 1999-2008 in five 2-year blocks, which included 42,856 adults older than 18 years, representing a sample of the U.S. population. Hypertension was defined as systolic BP of at least 140 mm Hg and

diastolic BP of at least 90 mm Hg, self-reported use of antihypertensive medications, or both.

The researchers found that the rates of hypertension increased from 23.9 percent in 1988-1994 to 28.5 percent in 1999-2000, but did not change between 1999-2000 and 2007-2008 (29.0 percent). "... prevalent hypertension is not decreasing toward the national goal of 16 percent and will likely remain high unless adverse trends in population nutrition and body mass index occur or pharmacological approaches to hypertension prevention are adopted," they write.

Hypertension control increased from 27.3 percent in 1988-1994 to 50.1 percent in 2007-2008, and BP among patients with hypertension decreased from 143.0/80.4 mm Hg to 135.2/74.1 mm Hg.

"Blood pressure control improved significantly more in absolute percentages between 1999-2000 and 2007-2008 vs. 1988-1994 and 1999-2000. Better BP control reflected improvements in awareness, treatment, and proportion of patients who were treated and had controlled hypertension. Hypertension control improved significantly between 1988-1994 and 2007-2008, across age, race, and sex groups, but was lower among individuals aged 18 to 39 years vs. 40 to 59 years and 60 years or older, and in Hispanic vs. white individuals," the authors write.

"Hypertension control improved, despite adverse changes in nutrition and body mass index and reflects increases in awareness, treatment, and patients who were treated attaining target BP, in all individuals with hypertension combined and all age, race, and sex subgroups. However, demographic disparities exist. Broad-based efforts to improve awareness, treatment, and proportion of patients treated and controlled are important for increasing BP control in all groups. Complementary programs to raise awareness and treatment among 18 to 39 years,

Hispanic, and male groups and to increase the proportion of patients treated and controlled among 60 years or older, black, and female groups are important for improving hypertension control and reducing disparities," the researchers conclude.

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