

Additional blood pressure screening may reduce incidence of CVD events and death by up to 3 percent

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A 25 per cent increase in high blood pressure screening in 19 developing countries would reduce the number of cardiovascular disease (CVD) events and deaths that occur each year by up to 3 per cent in these countries. The preliminary data presented today at the World Congress of Cardiology are the first findings from a new report from Harvard that will be published later this year.

The study found that around 900 million people in developing countries have [high blood pressure](#) but that only one-third are aware of their disease. Moreover, only 100 million of these people receive treatment, while only 5 per cent of the total are controlled.

Against this backdrop, this study was designed to assess the cost-effectiveness of an intervention to increase screening by 25 per cent in developing countries using a non-lab screening tool to treat those with a [systolic blood pressure](#) of greater than 140 mmHg and CVD risk of greater than 20 per cent.

The study found that screening an additional 25 per cent of the population would lead to an increase of more than 10 per cent in the rate of appropriate [treatment of hypertension](#) in high-risk individuals. The intervention would lead to about a 1-3 per cent reduction in CVD events and deaths. Furthermore, the incremental cost-effectiveness ratios of these screening programs were found to be well below one times GDP

per capita in the 19 developing countries assessed.

"Strategies to increase the screening for [hypertension](#) could lead to significant reductions in CVD deaths, at costs that are considered to be acceptable according to WHO recommendations," said Dr. Thomas Gaziano, assistant professor, Harvard School of Medicine.

Provided by World Heart Federation

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