

Efforts needed to improve the diets of African-Americans with uncontrolled hypertension

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Many African Americans with uncontrolled hypertension do not have recommended food categories in their homes and are not having adequate discussions with their doctors about diet. The findings come from two studies that will be presented at ASN Kidney Week 2015 November 3-8 at the San Diego Convention Center in San Diego, CA.

The Dietary Approaches to Stop Hypertension (DASH) [diet](#) is recommended for the treatment of hypertension, especially among African Americans. To assess barriers to following the diet, Deidra Crews, MD, ScM, FASN (Johns Hopkins University School of Medicine) and her colleagues conducted interviews and inspected the homes of 159 African Americans with [uncontrolled hypertension](#) residing in Baltimore, MD.

Among the major findings:

- 14.5 % of patients had 5 of the DASH food categories in their homes (fruits, vegetables, low fat dairy, whole grains, and plant proteins).
- More than 80% had full-sized ovens and refrigerators to allow for DASH meal preparation, but low health literacy was associated with a lower likelihood of having these full-sized appliances.
- Persons with chronic kidney disease were less likely to have

fresh fruits than those with normal kidney function.

- Younger patients and those with lower annual incomes were less likely to have whole grains in their homes.
- Younger persons also were less likely to have plant proteins.

"The homes of urban African Americans with risk factors for chronic kidney disease were often lacking either the foods or needed appliances for preparing DASH diet accordant meals," said Dr. Crews.

"Interventions to improve the dietary quality of this high-risk group should consider these factors."

In a second study, Dr. Crews and her colleagues looked at the frequency of diet discussions among African Americans with uncontrolled hypertension, who are at increased risk for chronic kidney disease, and their primary care physicians.

The investigators audio-recorded 127 patients' routine visits with their primary care physicians at the first visit following study enrollment. Diet was discussed in 73% of visits, but only 12% of visits included discussion of the DASH diet, despite the DASH diet being shown to be particularly beneficial for African Americans with hypertension. Discussions about diet were more likely to occur when the visits were longer, were centered on patient priorities, and were attended by patients with higher incomes.

"Improvements in the content of diet discussions in the context of clinical care for African Americans at risk for chronic kidney disease may be needed, and could potentially lead to mitigation of racial disparities in [kidney disease](#)," said Dr. Crews.

More information: 1) "DASH Diet Accordant Foods in the Homes of Urban African Americans at Risk for CKD" (Abstract SA-PO711).

2) "Engaging Urban African Americans at Risk for CKD in Discussions about their Diet" (Abstract SA-PO715).

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