

Study: High blood pressure increasing in low-income adults, while diabetes, obesity on the rise in higher-income adults

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A study of more than 20,000 middle-aged U.S. adults found that lower-income status was associated with an increased risk for hypertension

compared to other middle-aged adults with higher incomes. Those with higher incomes were found to be at increased risk for diabetes and obesity. The findings are published in [Annals of Internal Medicine](#).

Declines in cardiovascular mortality have stagnated over the past decade in the United States, driven in part by an increase in deaths among middle-aged adults. There is growing concern that these changes have been concentrated in middle-aged adults with low incomes, a population that is disproportionately affected by social determinants linked to poor cardiovascular health. However, little is known about how the burden of cardiovascular risk factors has changed among middle-aged adults by income level over the past two decades.

Researchers from Beth Israel Deaconess Medical Center and Harvard Medical School studied NHANES (National Health and Nutrition Examination Survey) data for 20,761 adults aged 40 to 64 years from 1999 to March 2020 to evaluate trends in the prevalence, treatment, and control of cardiovascular risk factors among low-income and higher-income middle-aged adults and how social determinants contribute to recent associations between income and cardiovascular health.

The data showed that low-income adults had an increase in hypertension over the study period, with 44.7% of low-income adults diagnosed with hypertension by 2020. There were no changes in rates of diabetes or obesity in low-income adults.

In contrast, higher-income adults did not have a change in hypertension but had increases in diabetes in obesity that, with 44% of higher-income adults having been diagnosed with obesity by 2020. Income-based disparities in hypertension, diabetes, and cigarette use persisted in more recent years even after adjustment for insurance coverage, health care access, and food insecurity.

According to the authors, these findings suggest that targeted public health and policy initiatives to improve the prevention, diagnosis, and treatment of cardiovascular risk factors, particularly among low-income communities, are urgently needed to address the ongoing increase in cardiovascular mortality among middle-aged adults.

More information: Michael Liu et al, Cardiovascular Health of Middle-Aged U.S. Adults by Income Level, 1999 to March 2020, *Annals of Internal Medicine* (2023). [DOI: 10.7326/M23-2109](https://doi.org/10.7326/M23-2109)

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