

Australia's obesity epidemic leading to increased risk of cardiovascular disease

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Researchers from The University of Western Australia and the Royal Perth Hospital Medical Research Foundation are warning that Australia's obesity epidemic is undermining expert attempts to reduce cardiovascular disease.

Cardiovascular disease is the leading cause of death worldwide, affecting 6 million Australians. It is directly linked to 27 percent of deaths in Australia each year. Almost a third of Australians currently have high [blood pressure](#), but only half of them are aware of it.

To examine the relationship between obesity and hypertension, The Dobney Hypertension Centre (a [joint venture](#) between the RPH Research Foundation, Royal Perth Hospital and The University of Western Australia) is looking for patients who are obese and have hypertension to participate in a new clinical trial.

UWA Professor Markus Schlaich, who holds the Dobney Chair in Clinical Research at the Royal

Perth Hospital Medical Research Foundation said being overweight or obese could cause high blood pressure and also worsen for people who already had the condition.

"Studies have already shown a correlation between [weight gain](#) and blood pressure," Professor Schlaich said.

"This is very concerning when you consider that it is projected that 75 percent of women and 83 percent of men, who live in industrialized countries like Australia and the U.S., will be obese by 2025. Statistics indicate that 60 to 70 percent of hypertension diagnoses may be directly attributable to obesity."

UWA lead researcher Dr. Revathy Carnagarin said more research was needed to better understand how to treat [high blood pressure](#) in obese patients.

"This is because many of the current approaches don't address the unique complications caused by being both overweight and hypertensive," Dr. Carnagarin said.

"Obesity-related hypertension (OHT) is a complex disorder and current hypertension guidelines do not provide specific recommendations for treating it.

"Some medications have even been shown to be less effective in obese patients. As such, combinations of various pharmacologic, blood pressure lowering approaches are particularly required in the management of obesity-related hypertension."

Dr. Carnagarin said obesity could trigger a complex chain of events in the human body that elevate blood pressure. This includes [obstructive sleep apnea](#), impaired [kidney function](#), insulin resistance, glucose intolerance and increased sodium sensitivity and reabsorption.

While weight loss and exercise are still at the forefront of tackling obesity and obesity-related hypertension, Dr. Carnagarin said they did not always produce the desired results.

"In addition, most patients fail to implement and sustain the appropriate lifestyle changes long term," Dr. Carnagarin said.

"Achieving long-term [weight loss](#) and lowering blood pressure needs lifestyle changes as well as blood pressure drug therapy."

Those interested in participating in the trial are asked to call 9224 0240 or email Janis.Nolde@uwa.edu.au

Provided by University of Western Australia

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