



# Hypertension

Hypertension is directly and indirectly associated with some of the most common underlying public health risk factors: raised blood pressure and elevated blood lipids. The interconnections between hypertension/cardiovascular disease and diabetes mean that the prevention, screening, and treatment for raised sugar, blood pressure, and lipids are best done together.

With its focus on resource poor countries, the Defeat-NCD Partnership is hoping to diagnose and treat what has been called a “silent killer” that affects more than a billion people, most of whom live in low- and middle income countries. Though easily controlled with medication if detected, the challenge in many of these countries is the reliable availability and affordability of medicines, diagnostics, and equipment. By making these available, the ordinary person can avoid the huge personal, social and economic impacts that their premature demise or impaired productivity can cause.

Hypertension is a long-term condition that occurs when the pressure of the blood pushing against the walls of blood vessels (arteries), is consistently too high. Also known as a “silent killer” because it does not usually cause symptoms, the untreated complications include coronary heart disease, heart failure, stroke, and peripheral vascular disease, as well as renal and visual impairment that can lead, in extreme cases, to kidney failure and blindness. Hypertension is also a risk factor for cognitive impairment such as in dementia, itself a major problem of aging populations.

Ninety to ninety-five per cent of hypertension is classified as primary high blood pressure due to lifestyle and genetic factors. The remaining cases are secondary to specific identifiable causes. One of these is a particularly dangerous form of high blood pressure that occurs in pregnancy: pre-eclampsia and eclampsia. This can arise as an emergency and kill both mother and baby. Women who suffer from this may have gestational diabetes too and tend to develop chronic hypertension and diabetes later on in life.

If hypertension is picked up through screening programmes or discovered incidentally while investigating other conditions, it can be easily controlled through lifestyle changes (obesity and dietary salt reduction, exercise, not smoking and managing stress) and oral anti-hypertension medication. Some form of medication usually become necessary to prevent progression and complications. Depending on the stage of the hypertension, there are several drug types and combinations available to optimise treatment on an individual basis.

More than a billion people around the world suffer from raised blood pressure and account for 57 million disability-adjusted life years lost. In Africa, for example, the adult prevalence of raised blood pressure is highest at over 40%.

The hypertensive disorders of pregnancy are significant contributors to maternal and perinatal mortality: affecting some 5-10% of all deliveries, rising to as high as 18% in parts of Africa.