

Impact of Heart Disease in Rural Northern California

- One in three U.S. adults will develop hypertension in their lifetime²⁵ and more than half of Americans with high blood pressure do not have it under control.²⁶
- In Rural Northern California 1 in 2 adults age 55 and older have been diagnosed with high blood pressure.²⁷
- High blood pressure that is left untreated can result in heart attack, stroke, vision loss, memory loss and congestive heart failure.
- Heart disease affects more than 30,000 adults in Rural Northern California.²⁸

How Health Centers Provide the Necessary Care

Clinical Interventions

- Provide annual blood pressure screenings for adults 18 and older.
- During the primary care visit, take multiple blood pressure readings to accurately assess the patient's status. Breathing exercises may help some patients relax and lower blood pressure.
- Screen men aged 35 and older for lipid disorders and screen women 45 and older for lipid disorders if they are at increased risk for heart disease.
- The use of aspirin may reduce the risk for some men age 45 to 79 of myocardial infarctions and in some women age 55 to 79 years of ischemic stroke.
- Educate adults in the community on reducing sodium intake to no more than 2,300 mg per day.

Community Interventions

- Educate patients about maintaining a healthy diet and including at least 30 minutes of physical activity most days of the week.
- Promote meditation and other relaxation methods to support healthy blood pressure.
- Disseminate educational materials on smoking cessation at health fairs and community events.

²⁵ Appel LJ, ED Frolich, JE Hall, TA Pearson, RL Sacco, DR Seals, FM Sacks, SC Smith Jr., DK Vafiadis, LV Van Horn. The Importance of Population-Wide Sodium Reduction as a Means to Prevent Cardiovascular Disease and Stroke: A Call to Action from the American Heart Association. *Circulation*. 2011;123:1138-1143; originally published online January 13, 2011. doi: 10.1161/CIR.0b013e31820d0793

²⁶ Ostchega Y, Yoon SS, Hughes J, et al. Hypertension awareness, treatment, and control—continued disparities in adults: United States, 2005-2006. [NCHS Data Brief] Centers for Disease Control and Prevention, National Center for Health Statistics, Division of Health and Nutrition Examination Surveys; 2008. Available from: <http://www.cdc.gov/nchs/data/databriefs/db03.pdf> [PDF - 1.16 MB]

²⁷ California Health Interview Survey. CHIS 2009 Adult Public Use File. Los Angeles, CA: UCLA Center for Health Policy Research, April 2013.

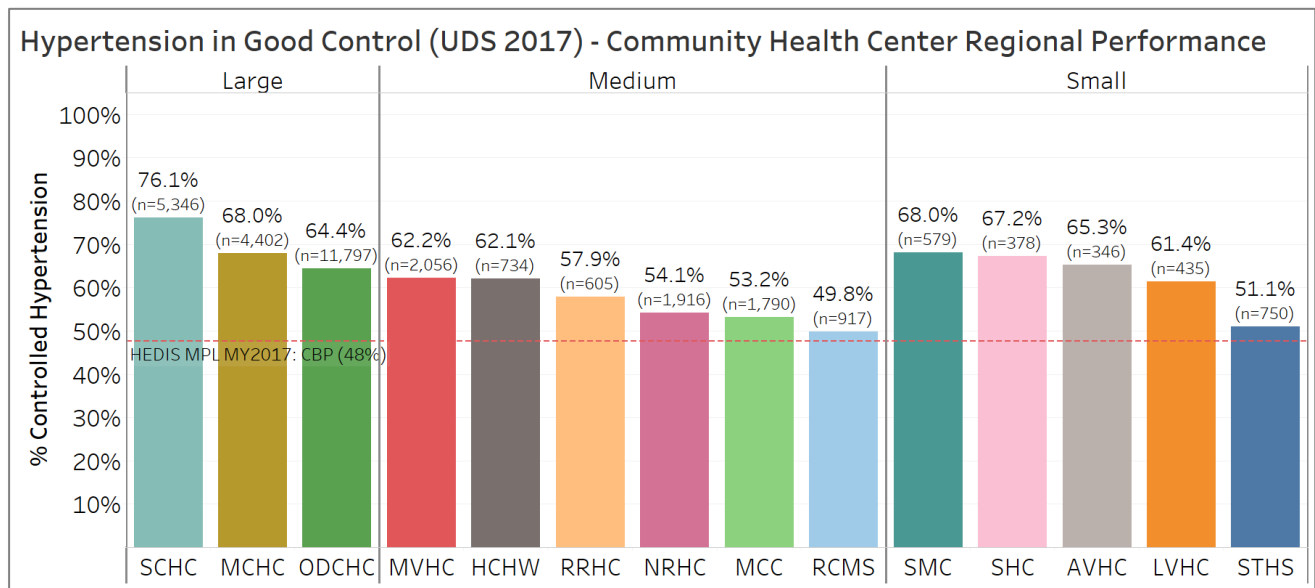
²⁸ Ibid.

Controlling High Blood Pressure

Rural Northern California Health Center Data

Key Points

- Many patients experience “white coat hypertension,” causing them to be anxious as they arrive for their primary care visit. This can contribute to elevated blood pressure readings.
- There is no cure for hypertension, unless a specific cause is found and corrected. Medical therapy and/or lifestyle modification can control hypertension and in many cases prevent complications.²⁹



Quality Measure Definitions (UDS)

The percentage of adults aged 18-85 who have received a diagnosis of hypertension and whose blood pressure is less than 140/90 mm Hg.

- Normal blood pressure levels are less than 120/80 mmHg.
- Hypertensive patients who reduce their blood pressure to less than 140/90 are considered under control.

National Quality Goals and Benchmarks

HEDIS 25th (MPL) for Measurement Year 2017: HEDIS is a national data set, which measures the performance of health plans on quality of care. The Minimum Performance Level (MPL), or 25th percentile for the Controlling High Blood Pressure measure is 47.69%.

²⁹ Medline Plus U.S. National Library of Medicine National Institutes of Health Updated July 13, 2016 retrieved from web July 26, 2016. www.nlm.nih.gov/medlineplus