

Controlling High Blood Pressure

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.

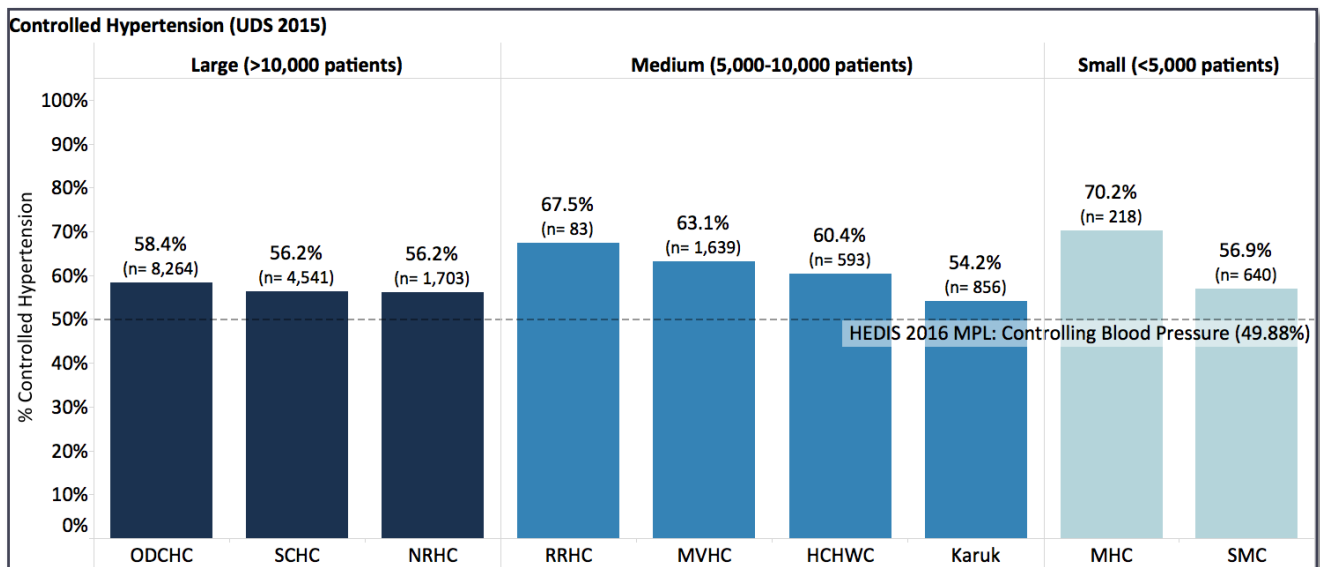
²⁸ Ibid.

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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): 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 controlling high blood pressure is 49.88%.

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