

Controlling High Blood Pressure

Impact of Heart Disease in Rural Northern California

- One in three U.S. adults will develop hypertension in their lifetime¹ and more than half of Americans with high blood pressure do not have it under control.²
- In Rural Northern California 47.5% of adults aged 55 and older have been diagnosed with high blood pressure.³
- 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 35,000 adults in Rural Northern California.⁴
- Proper management of hypertension, along with adopting healthy lifestyle behaviors, correlates with the prevention of 80% percent of all cardiovascular diseases and a 64% reduction in the development of heart failure.⁵

How Health Centers Provide the Necessary Care

Clinical Interventions

- Provide at least 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, especially when blood pressure is 140/90 or higher. 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.
- Integrate evidence-based guidelines and treatment support tools into the electronic health record and conduct annual proper blood pressure technique trainings for care teams.
- Actively engage patients in their own care by providing home blood pressure monitoring kits, offering nurse education visits, and regular communication with the care team via appointment or patient portal.

Community Interventions

- Educate patients about maintaining a healthy diet, reducing sodium intake to no more than 2,300 mg per day, 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 smoking cessation materials at health fairs and community events.

¹ Nelson, Sarah, Whitsel, Laurie, et al. Projections of Cardiovascular Disease Prevalence and Costs: 2015-2035. Nov 2016.

² National Center for Health Statistics. Centers for Disease Control and Prevention and Nutrition Examination Surveys. 2013-2016. 2017 ACC/AHA Criteria Hypertension Guidelines applied.

³ California Health Interview Survey. CHIS 2019 Adult Public Use File. Los Angeles, CA: UCLA Center for Health Policy Research.

⁴ Ibid.

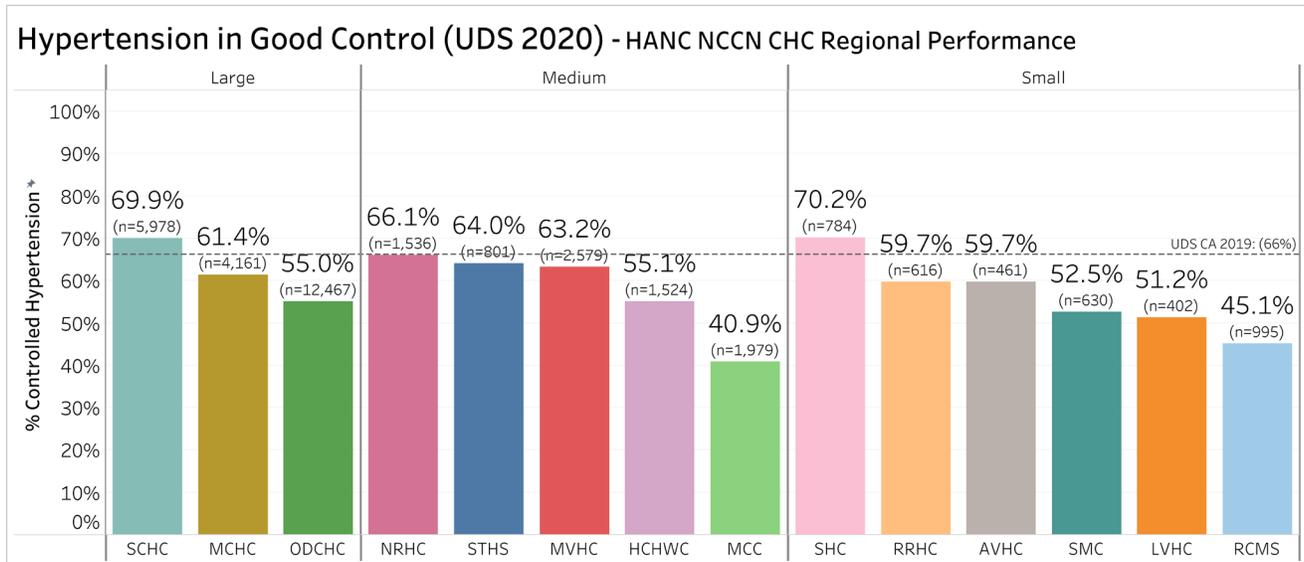
⁵ Tackling G, Borhade MB. Hypertensive Heart Disease. [Updated 2019 May 5]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2020 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK539800/>

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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.⁶



Quality Measure Definition (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 and State Quality Benchmarks

UDS 2019 U.S. Average: The average performance among health centers across the U.S. was 64.6%.

UDS CA 2019 Average: The average performance among health centers in California was 66.2%.

⁶ 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