

## New Blood Pressure Guidelines for Blacks

African Americans Need More Aggressive Treatment

FROM THE WEBMD ARCHIVES (i)

March 10, 2003 -- Blacks are more than three times as likely to die of complications from high blood pressure and merit more aggressive treatment, according to a new report. Researchers say current treatment strategies have failed African Americans, and for the first time new treatment guidelines have been developed especially for them.

The guidelines, published in the March 10 issue of the *Archives of Internal Medicine*, were developed by the International Society on Hypertension in Blacks (ISHIB) and have been endorsed by the American Heart Association and other groups.

Researchers say one in three African Americans has high blood pressure , and they tend to develop the condition earlier in life as well as have more severe forms of the disease.

"On average, one African American dies from high blood pressure every hour, yet barely a quarter of hypertensive African Americans has the disease under control," says John Flack, MD, president of ISHIB, in a news release.

Flack says these new recommendations were created to give healthcare providers the tools to manage high blood pressure appropriately in blacks and save lives.

The guidelines urge doctors to aggressively treat African American patients with high blood pressure as well as other risk factors and lower their blood pressure from the normally recommended 140/90 mm Hg to 130/80 mm Hg.

Those additional risk factors include heart disease and diabetes, which can increase the risk of death due to high blood pressure. Researchers say nearly 40% of blacks suffer from heart disease , 13% have diabetes , and 32% of all people on dialysis due to kidney failure are black.

The recommendations also call for starting many African Americans on a combination of at least two types of blood pressure-lowering medications, such as ACE inhibitors and calcium-channel blockers.

Researchers say African Americans with diabetes should also receive medications proven to slow the progression of kidney disease, including angiotensin II-receptor blockers and ACE inhibitors as a part of their blood pressure treatment.

In addition, the ISHIB guidelines also stress the need for people with high blood pressure to make lifestyle and dietary modifications to help get their disease under control. They urge healthcare providers to encourage black patients to exercise regularly, moderate their alcohol intake, and avoid tobacco.

They also advocate use of the Dietary Approaches to Stop Hypertension (DASH) diet, which emphasizes the consumption of a diet rich in fruits, vegetables, and fiber and low-fat dairy foods, meats, and poultry.

SOURCE: *Archives of Internal Medicine*, March 10, 2003. News release, International Society on Hypertension in Blacks.

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