

The Medical Journal of Australia • MJA

MEDIA RELEASE

HYPERTENSION: IMPLICATIONS OF LOWERING THRESHOLD

EMBARGOED UNTIL 12:01 am Monday, 6 August 2018

IF the standards of the recently revised American guidelines for the diagnosis and management of hypertension were adopted here, the proportion of Australian adults classified as having high blood pressure would double, according to the authors of a Perspective published today in the *Medical Journal of Australia*.

Professor Garry Jennings, from the University of Sydney and Executive Director of Sydney Health Partners, and colleagues wrote that the American guidelines, released by the American College of Cardiology (ACC) and the American Heart Association (AHA), dropped the definition of hypertension in the general population from $\geq 140/90$ mmHg down to $\geq 130/80$ mmHg.

As a result, the “crude prevalence of hypertension in the US among adults increased from 31.9% to 45.6% by changing the threshold alone, affecting an additional 31 million people”, Jennings and colleagues wrote.

“Adopting the ACC/AHA guidelines throughout Australia would double the proportion of adults classified as having hypertension,” they wrote.

“That is, of the 18 million individuals aged 20 years and over, the health status of 4.5 million would change.

“It would also increase the proportion of adults recommended for antihypertensive therapy based on blood pressure readings in the general population, and even more so in populations with chronic diseases (individuals who reported having diabetes, heart disease or chronic kidney disease).

“There would be an increase in the proportion of adults who would require intensification of their antihypertensive therapy due to failure to meet blood pressure targets.”

Jennings and colleagues wrote that hypertension had arguably been “a sleeper” in the Australian health scene.

“In a national survey, 71% of the population with blood pressure levels $\geq 140/90$ mmHg, our present threshold, were not aware they had hypertension,” they wrote.

“We recently found that community awareness of high blood pressure as a forerunner of heart disease and stroke is very low in Australia. Without better community awareness and engagement, we are unlikely to make progress.

“If the ACC/AHA guidelines do nothing more than provoke a debate on how we can use new evidence to devise better strategies, we should be grateful.”

Jennings and colleagues concluded that at this time, “we do not feel it is the time to make such change to the Australian guidelines”, preferring to monitor the effects of the new guidelines in the US, ongoing trials and further analysis.

Please remember to credit *The MJA*.

The *Medical Journal of Australia* is a publication of the Australian Medical Association.

The statements or opinions that are expressed in the MJA reflect the views of the authors and do not represent the official policy of the AMA or the MJA unless that is so stated.

CONTACTS: Prof Garry Jennings
Executive Director
Sydney Health Partners
Email: garry.jennings@sydney.edu.au
Ph: 0419 770 043

Mark Mathot
Media
Sydney Health Partners
Ph: 0403 052 522