

HYPERTENSIONWATCH

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BLOOD PRESSURE MONITORS

BP Monitoring Is Crucial

In the May 1, 2007, issue of *Hypertension*, Daniel Jones, MD, and John Hall, editor of the journal, discussed the importance of lowering blood pressure (BP) to prevent other health problems. The authors noted that small changes in BP can have a major impact. In fact, they cited a study of >1 million individuals that suggested that a 3- to 4-mm-Hg rise in systolic pressure would convert into a 20% higher stroke death rate and a 12% higher death rate from ischemic heart disease.

To prevent hypertension, the authors suggested that individuals have their BP checked regularly and live a healthy lifestyle. They also emphasized that individuals with hypertension should monitor their BP and keep it controlled under a physician's care. For information on morning hypertension, visit www.morningbp.com/pt10

Hypertension and Diabetes Contribute to Heart Failure

Increased rates of hypertension and diabetes could be responsible for the high rate of heart failure among black Americans, according to findings presented at the March 27, 2007, American College of Cardiology meeting.

The study included 7000 men and women of various ethnic backgrounds with no existing heart-disease symptoms. The results showed that black Americans developed heart failure at a significantly higher rate (4.6 per 1000 individuals per year), compared with those of all other races. In addition to increased screening or greater emphasis on drug therapies, monitoring blood pressure at home and keeping diabetes in check may help keep these 2 risk factors under control. For information on morning hypertension, visit www.morningbp.com/pt11

Home BP Monitoring Offers Many Benefits

Home blood pressure (BP) monitoring is an important part of managing hypertension, according to the Mayo Clinic. The benefits of home monitoring, outlined by the clinic, include the following:

- Helping to track treatment: Self-monitoring provides key information between physician visits
- Encouraging better control: Patients taking their own BP measurements have been shown to experience better BP control and greater success in meeting BP targets

- Cutting health care costs: Home monitoring may reduce physician visits and thus lower overall health care costs

Furthermore, the Mayo Clinic said that home or work monitoring may help if an individual has high BP or white-coat hypertension. Home and workplace monitoring also may help when BP is normal at the physician's office, but elevated elsewhere. This type of BP is referred to as masked hypertension. For information on morning hypertension, visit www.morningbp.com/pt12

Timing of BP Readings Impacts OSA Severity


The results of a study, reported in the *American Journal of Hypertension* (October 2006), examined whether PM-to-AM differences in blood pressure (BP) correlated with the severity of obstructive sleep apnea (OSA) as well as gender.

For the study, 1566 men (696 with hypertension and 870 without it) and 443 women (185 with hypertension and 258 without it) had 4 BP measurements taken. The relationship between evening-to-morning differences in BP and the number of apneas/hypopneas divided by hours of sleep were analyzed separately for the 4 groups.

The researchers concluded that evening-to-morning differences in BP in men with OSA were linearly related to the severity of OSA in patients both with and without hypertension. The findings underscore how important it is for patients with hypertension and OSA to monitor their BP on a regular basis. For information on morning hypertension, visit www.morningbp.com/pt13

Study Finds Hot Flashes/High BP Link

The results of a study, reported in *Menopause* (March/April 2007), suggested a relationship between hot flashes and high blood pressure (BP), independent of menopausal status. The findings, based on readings from 154 women who wore ambulatory BP monitors for 24 hours, showed that average systolic BP while awake and asleep were significantly higher in women who experienced hot flashes, compared with women who did not.

The participants with hot flashes had average systolic awake and asleep BPs of 141 mm Hg and 129 mm Hg, respectively, compared with 132 mm Hg and 119 mm Hg, respectively, for the patients not experiencing hot flashes. The researchers said that more studies are needed to determine whether hot flashes cause high BP, or whether they are related to one or more shared factors. For information on morning hypertension, visit www.morningbp.com/pt14 

FAST FACT: It is estimated that, by 2025, 1.56 billion people will have high blood pressure.