

WHAT CAN WE LEARN FROM A UNREPRESENTATIVE POPULATION SCREENING FOR HYPERTENSION ?

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AIM: May Measurement Month (MMM) survey was initiated by ISH and approached more than 100 countries for contribution to improve awareness of hypertension (HT) which remains a worldwide problem. Present study reports the statistics for a belgian regional screening organized in May 2017 in the University Hospital of Liege.

METHOD: 468 participants (≥ 18 years) attended a 4 days screening, they were interviewed to collect: weight, height, antihypertensive treatment, diabetes, smoking, alcohol consumption and history of cv events. Three consecutive BP measurements were done with Omron M6. Participants received advices on how to maintain a good cv health and a card with their BP to share with their physician. Those with high BP (≥ 140 and/or ≥ 90 mmhg) received explanations on their readings and actions needed. We added questions on Home Blood Pressure (HBP) to assess the frequency of people who practice HBP and the importance they gave it in the management of HT by physicians.

RESULTS: 91% of participants were white, mean age: 52.2 ± 18 , women: 56%, 10% had diabetes, 23% were current smokers, less than 5% had a history of heart attack or stroke. Alcohol consumption was regular in 40%. As a whole, HT was identified in 23% and 1/3 were treated. In those treated, BP was uncontrolled in 31.5%. No significant difference of cv profile was found between uncontrolled and controlled treated participants. However, the untreated HT were significantly older, had a higher BMI and a higher consumption of alcohol than untreated NT. At home, 52 % had an HBP monitor and measured their BP 5 times/month on average. When treated, at least 50% being either controlled or not considered that HBP should be integrated by the physician into the management of their HT.

CONCLUSION: Despite the limits of such tool to assess prevalence of HT, screening offered a great opportunity to inform people on HT and cv risks, on how correctly measure BP and on the importance of adherence to treatment.