What Is High Blood Pressure?

- Blood pressure is the measurement of the blood’s force on the arteries as the heart pushes the blood through the body. High blood pressure is defined as a reading of 140/90 or higher.
- Risk factors include those with high-normal blood pressure, a family history of high blood pressure, overweight or obesity, sedentary lifestyle, too much dietary sodium, too little potassium or drinking too much alcohol.

What Are the Dangers Associated with High Blood Pressure?

- **High blood pressure leads to heart disease and stroke.** High blood pressure is a factor in 69 percent of heart attacks, 77 percent of strokes and 74 percent of cases of heart failure.

- **Other health problems are linked to high blood pressure.** As blood pressure increases, so does the risk of heart attack, heart failure, stroke and kidney disease regardless of presence of high cholesterol, obesity or tobacco use.

- **High blood pressure is sometimes called the “silent killer.”** Almost 70 percent of people with high blood pressure do not have it under control and 30 percent are unaware they have it.

How Common Is High Blood Pressure?

- More than 65 million American adults—one in three—have high blood pressure. An additional 59 million have pre-hypertension.

- More than half of adults 60 and older have high blood pressure.

- The lifetime risk of developing high blood pressure for adults 55 and older is 90 percent.

What Are The Economic Effects of High Blood Pressure?

- High blood pressure causes more doctor visits than any other condition.

- High blood pressure and its complications cost the U.S. more than $64 billion each year.

- A 10 percent decline in the number of doctor visits would save $478 million each year in health care costs.

- Checking blood pressure every two years is cost-effective—45 percent of the costs will be recovered in the long run.

- U.S. adults substantially lowered their blood pressure, high cholesterol levels and other heart disease risk factors during the 1980s. As a result, costs associated with coronary heart disease declined by an estimated 9 percent, from about $240 billion in 1981 to about $220 billion in 1990.
What Disparities Are Associated with High Blood Pressure?
- High blood pressure is the primary reason that African–Americans are four times more likely than whites to develop kidney failure.
- High blood pressure is consistently associated with low income and low educational levels.

Antihypertensive Medication Is Available to Control High Blood Pressure
- Three main classes of antihypertensive drugs are diuretics (which reduce the amount of fluid in the blood), sympathetic nervous inhibitors (which slow the heart) and vasodilators (which open blood vessels).
- Americans spent approximately $12 billion on pharmaceutical products to treat hypertension in 2002.

What Can State Legislators Do?
State legislators can play an important role in reducing the number of people with high blood pressure. State legislators can:
- Take a leadership role by spreading the word about high blood pressure control and displaying educational materials about high blood pressure in your office.
- Learn about the burden high blood pressure and its complications place on your state by contacting your state health department.
- Promote visibility for high blood pressure by supporting awareness campaigns. For example, work with your local chapter of the American Heart Association to organize a Blood Pressure Challenge between your state’s House and Senate to see which group has the lowest average blood pressure.
- Ensure education and support for health care providers to encourage the use of science–based treatments.
- Support action to make healthy choices easier, such as working with employers to promote worksite wellness, providing opportunities for exercise by enhancing access to parks, walking trails and bike paths and promoting school health programs that maintain or enhance physical education classes.
- Consider focusing funding on groups at high risk for high blood pressure, such as blacks and older Americans, for blood pressure screening programs or community programs that monitor adherence to treatment.
- Support policies that encourage health care coverage to include blood pressure screening, treatment and control.
- Work to include preventive services and incentives for prevention in state employee health benefit plans.

For more detail, see the Legislator Policy Brief, “Controlling High Blood Pressure,” by visiting: http://www.healthystates.csg.org/Publications/.

If you would like more information, references, or to explore this topic in greater depth, please:
- send your inquiry to http://www.healthystates.csg.org/ (keyword: inquiry) or
- call the CSG Health Policy Group at (859) 244–8000.

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