

Black and south Asian people benefiting less from interventions to reduce blood pressure, says study

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People from black and south Asian communities in the UK are not benefiting as much as white people from doctors' interventions to reduce their blood pressure, according to a new study published today in the journal *Annals of Family Medicine*.

The study looked at the treatment of over 8,800 people with high blood pressure, visiting 16 family doctor practices across Wandsworth in southwest London in 2005. It was carried out by researchers from Imperial College London and Wandsworth Primary Care Trust.

The study found that in spite of considerable efforts to improve the treatment of high blood pressure in the UK, including new performance-related pay measures for doctors, differences in management between white, black and south Asian patients have persisted.

It is known that black populations in the UK are more likely to suffer from high blood pressure than other groups. Managing patients with high blood pressure is important because they are at a high risk of developing a range of health problems including heart attacks, strokes and diabetes.

In the new study, black patients previously diagnosed with high blood pressure were significantly less likely to achieve an established target for their blood pressure than white or south Asian patients.

White patients who had high blood pressure and also two or more cardiovascular problems showed significantly improved blood pressure control, but the same improvement was not seen in black or south Asian patients. This finding is of particular concern because these patients are likely to have the greatest health risk, say the researchers.

South Asian patients with poorly controlled high blood pressure were prescribed fewer blood pressure lowering medications than their black or white peers.

Dr Christopher Millett, the lead author of the study from the Division of Epidemiology, Public Health & Primary Care at Imperial College London, said: "It is worrying that differences in blood pressure control between ethnic groups have persisted, particularly in high risk patients, in spite of doctors focusing a lot of effort on this area of patients' health.

"There are a number of potential reasons for the differences in blood pressure control found between white, black and south Asian groups. These include differences in how doctors treat these patients, differences in patient adherence to therapy, and biological differences in the response to antihypertensive therapy. However, further research is required to better understand the reasons for these differences," added Dr Millett.

These findings highlight the importance of ensuring that hypertension is closely monitored and appropriately treated in black and south Asian patients, especially in those with existing cardiovascular conditions, say the researchers.

Source: Imperial College London

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