

Undiagnosed hypertension more likely in rheumatoid arthritis

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seen than with other comorbidities.

"Given heightened cardiovascular risks in RA and the importance of hypertension diagnosis as a first step toward controlling risk, rheumatologists should collaborate to improve rates of diagnosis for this modifiable cardiovascular risk factor," the authors write.

More information: Abstract
Full Text (subscription or payment may be required)

(HealthDay)—Among patients meeting guideline-based criteria for hypertension, those with rheumatoid arthritis (RA) are less likely to receive a diagnosis of hypertension, according to a study published in the September issue of *Arthritis Care & Research*.

Christie M. Bartels, M.D., from the University of Wisconsin School of Medicine and Public Health in Madison, and colleagues conducted a cohort study to examine whether RA is a risk factor for not receiving a diagnosis of hypertension. Data were obtained from adult patients with and without RA/inflammatory arthritis from an academic multispecialty practice. All participants were seen regularly in primary care and met the clinical guideline criteria for hypertension, but had not been diagnosed with or received treatment for hypertension.

The researchers found that 201 patients of the 14,974 with undiagnosed hypertension had RA codes. Compared with patients without RA, those with RA had equivalent primary care visits and more total visits. The likelihood of hypertension diagnosis was 36 percent in RA patients and 51 percent in patients without RA. The risk of hypertension diagnosis was significantly lower for patients with RA in adjusted Cox models (hazard ratio, 0.71), with more undiagnosed hypertension

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