

Blood Pressure Awareness Month

Issue 2

September 2010

Blood Pressure Rise With Aging- is it inevitable?

Given the statistic that in industrialized countries the risk of becoming hypertensive (140/90) during one's lifetime exceeds 90%, it would seem like hypertension is an inevitable part of the aging process. However, that may not be the case. Meet the Kung bushmen and women from Northern Botswana. These hunter-gathers have a low salt intake, are free from the normal stresses of modern civilization, and have high levels of daily activity. Their resting blood pressures also remain normal as they age. True, we can't match their lifestyle (nor would most of us want to), but we may have more control over rising blood pressures than we think.

The Aerobics Center Longitudinal Study used treadmills to measure fitness levels of over 6000 individuals aged 20-65 years. After controlling for age, and dividing them into quintiles according to fitness level, they found that the lowest group was 52% more likely to develop hypertension than those in the highest fitness category. Regular exercise helps us control our weight, cope more effectively with stress, and improve the health of our arteries. That makes it one of the best preventative measures we can take against hypertension.

Attention Employees: Blood Pressure Drive Coming Soon!

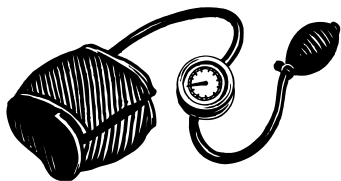
During the second week of October, the Employee Wellness Program will be offering a special service for Messiah College faculty and staff. You will be given the opportunity to stop in at one of three locations to have your blood pressure taken free of charge. Knowing your blood pressure is your first step in managing it wisely. Here's what you need to know about this great opportunity.

What: Employee Blood Pressure Drive

Who: All Messiah College Faculty and Staff

When: October 12th and 13th from 11:00 a.m. to 1:00 p.m.

Where: At the Falcon Fitness Center, in Eisenhower Commons, or at Lenhart Maintenance Building



Test Your Blood Pressure I.Q.

True/False Quiz

1. Normal blood pressure is below 120/80 mmHg.
2. High blood pressure runs in my family, so there's no point in trying to avoid it.
3. High blood pressure is accompanied by obvious symptoms.
4. High blood pressure can lead to problems with memory and understanding.
5. Blood pressure can never be too low.
6. High blood pressure is also referred to as hypertension.
7. High blood pressure can be deadly.
8. Females are more likely to deal with high blood pressure than males.
9. Physical activity is an effective way to manage blood pressure.
10. I have to exercise everyday to reduce my blood pressure.

Answers Below

High Blood Pressure Statistics in the United States

- 74.5 million people in the U.S. over the age of 20 have high blood pressure.
- One out of three adults has high blood pressure
- Only 77.6% of people with high blood pressure are aware of their condition.
- 55.9% of people with high blood pressure do not have it controlled.
- The exact cause of 90% of cases of high blood pressure is unknown, but it is still easily detected and controllable.
- Between the years 1996 and 2006, there was a 48.1% increase in the number of deaths resulting from high blood pressure.
- Non-Hispanic blacks are more likely to suffer from high blood pressure than non-Hispanic whites.
- In 2006, the death rates per 100,000 population caused by high blood pressure were as follows: 15.6 for white males, 51.1 for black males, 14.3 for white females, and 37.7 for black females.

Now that you know the facts, make the choice to be informed about your own blood pressure. Don't be one of the 22.4% unaware of their high blood pressure. Once you know, you can get it under control. If you discover you are among the two out of three adults without high blood pressure, take preventative steps to stay out of the stats!

Answers to Quiz: 1. T, 2. F, 3. F, 4. T, 5. F, 6. T, 7. T, 8. F, 9. T, 10. F

High Blood Pressure Statistics from: <http://www.americanheart.org/presenter.jhtml?identifier=4621>
<http://www.mayoclinic.com/health/high-blood-pressure/DS00100>; Blair et. al, 1984 JAMA, 252:p.487