

International Journal of Population Data Science



Swansea University
Prifysgol Abertawe

Journal Website: www.ijpds.org

Prevalence and incidence of diagnosed hypertension in Alberta, Canada

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Introduction

The prevalence of diagnosed hypertension in Canada is projected to increase despite the incidence rate decreasing. Previous work around the world has utilized survey data to provide estimates of prevalence and incidence. Administrative data is population-level, and may provide more reliable estimates of provincial prevalence and incidence than could be achieved using survey data.

changes in prevalence are due to actual changes in health status or to changes in diagnosis guidelines.

Objectives and Approach

1. To produce age and sex-specific prevalence and incidence estimates of diagnosed hypertension in Alberta from 2007 to 2015,
2. To project estimates to the fiscal year of 2019/2020.

Data from the Discharge Abstract Database, physician claims database, National Ambulatory Care Reporting System, and provincial health insurance registry will be linked using unique anonymous personal identifier and gender. A validated case definition of diagnosed hypertension for use in administrative datasets will be used to identify annual prevalent and incident cases from claims data. Obstetric cases will be excluded. The provincial health insurance registry will be used to estimate denominator values.

Results

Results of this analysis are not available for the time of abstract submission as the timeline for this analysis projects completion in April 2018.

Conclusion/Implications

Maintained surveillance of diagnosed hypertension is important to inform health policy and spending decisions, to monitor efficacy of public health interventions, and to inform patient care. Furthermore, diagnosis guidelines have been updated since 2017. Providing estimates for the prevalence of diagnosed hypertension in Alberta five years into the future to compare to actual prevalence estimates may indicate whether

