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IMPACT OF NEW BLOOD PRESSURE GUIDELINES ON THE USE OF ANTIHYPERTENSIVE THERAPY IN UNITED STATES

Poster Contributions

Poster Hall B1

Saturday, March 14, 2015, 10:00 a.m.-10:45 a.m.

Session Title: Medical Management of Hypertension

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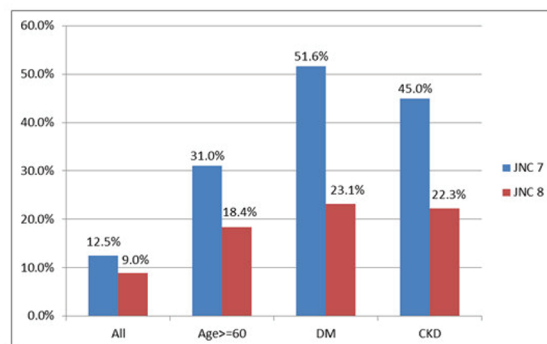
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Background: Latest report from the Eighth Joint National Committee (JNC-8) has significantly liberalized blood pressure goals for treatment of hypertension, especially in elderly patients. We sought to determine potential impact of these new guidelines on the US population. Cohort: Participants in the 2011-2012 National Health & Nutrition Examination Survey (NHANES).

Methods: We selected NHANES participants ≥ 18 years, who were not on antihypertensive therapy. We compared the proportions of participants eligible to receive antihypertensive therapy based on their current blood pressure, according to JNC-7 versus JNC-8 guidelines. We performed subgroup analyses in those with diabetes mellitus (DM), chronic kidney disease (CKD), & the elderly (≥ 60 years).

Results: The sample represented 171.4 million Americans with mean age of 41.9 ± 0.8 years & 49.8% females. The number of Americans eligible to receive antihypertensive therapy would decrease by 6.1 million, from 21.5 million (12.5%) per JNC-7 guidelines to 15.4 million (9.0%) per JNC-8 guidelines (Figure). In the elderly, number of eligible Americans would decrease from 8.2 million (31.0%) to 4.9 million (18.4%). Number of DM & CKD patients eligible to receive therapy would decrease by 3.2 million & 1.5 million, respectively.

Conclusion: Application of the new JNC-8 guidelines would decrease the number of US citizens eligible for antihypertensive therapy by 6.1 million, driven primarily by a substantial decrease amongst the elderly population.



Proportion of subjects eligible to receive antihypertensive therapy per old and new guidelines