



## **BLOOD PRESSURE CONTROL RATES MUST BE IMPROVED**

EMBARGOED UNTIL 12:01am Monday 6 December 2021

OF Australians with raised blood pressure, only 32% of them have their hypertension under control, prompting an urgent call for the establishment of a national taskforce to double the current control rates. Raised blood pressure is the leading cause of death, and by improving control, the risks of coronary heart disease, dementia, and cerebrovascular disease will be substantially reduced.

Writing in the *Medical Journal of Australia*, Professor Alta Schutte, Professor of Cardiovascular Medicine at UNSW Sydney and a Professorial Fellow at The George Institute for Global Health, and colleagues, said Australia was lagging behind other countries.

"With a control rate of 44% in the US sparking a national commitment, the question could be asked as to why Australia is not prioritising BP control," wrote Schutte and colleagues.

"A 2020 Australian report acknowledged blood pressure as a biological factor and determinant of health, and listed hypertension as a potentially modifiable condition which leads to hospitalisation, while reiterating coronary heart disease as the leading cause of death.

"Noteworthy is that Australia had similar rates of hypertension awareness and treatment to the US in the 1990s, but over the past decades this has gradually declined, along with a plateauing of control rates.

"Unfortunately, there seems to be no urgency or priority to address blood pressure control in Australia."

Schutte and colleagues proposed the following actions:

- Creation of a national taskforce with a remit to improve blood pressure control in Australia to at least 70%, which is a doubling of the current control rates. "Representation on this taskforce should include a broad range of stakeholders, with a focus on primary care (with nearly 37 000 general practitioners in Australia, compared with 1200 cardiologists, the focus on management of high blood pressure in the community must include primary care practitioners, pharmacists, remote health care workers and nurses)."
- Increasing the amount of funding blood pressure research, "which is currently under-represented in major funding bodies' priority research areas. A focus should be on the implementation and scaling up of proven strategies to improve blood pressure management and control across the life course."
- Creating wide-scale opportunities for population-based screening and raised awareness.
- Promoting population-based measures such as salt and sugar reduction, increased fibre intake, smoking cessation, and reduced alcohol consumption.
- Adopting lifestyle approaches, including intersectoral approaches to increasing capacity and opportunity for physical activity.
- Providing affordable and validated blood pressure devices alongside training to encourage home monitoring.
- Improving training on the measurement and management of elevated blood pressure in clinical practice, including strategies to overcome clinician inertia.
- Providing refresher courses and educating GPs on emerging evidence-based best practice. This includes use of single pill combination therapy early in the treatment algorithm as per international guidelines, based on clear evidence that it improves adherence and blood pressure control.

"If we could achieve a 25% reduction in the current prevalence of hypertension (34%) through population-based approaches, we could save 37 000 lives and return \$34.3 billion in gross domestic product to the Australian economy," Schutte and colleagues concluded.



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The Medical Journal of Australia

## Media Release

"Adequately treating and managing people currently living with hypertension would save 83 000 lives over the working lifetime and save \$91.6 billion in gross domestic product.

"This is an outstanding return on investment, and we have the tools required to achieve it. What remains is to take the first step."

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