

HIGH BLOOD PRESSURE: A PUBLIC HEALTH AND HEALTHCARE SUCCESS

Elevated levels of blood pressure, or hypertension, have been observed since the development of blood pressure measurements in the 1800s. It was soon recognized that populations with a high frequency of elevated blood pressure were also populations with a high frequency of strokes, yet the dangers of high blood pressure often went unappreciated until recent years.

High blood pressure is a condition that historically has affected both the privileged and the underprivileged in our society. Presidents Woodrow Wilson and Franklin Delano Roosevelt both had high blood pressure and suffered strokes and heart disease. Today, the condition is disproportionately present among African Americans—15 to 20% have some degree of elevated blood pressure.

For many years, high blood pressure was considered a consequence of disease rather than its cause. Clinicians seeing a patient with a stroke, for instance, often attributed their elevation in blood pressure to the stroke rather than the other way around. Long-term studies, such as the Framingham Heart Study, which followed a large number of individuals for many years, established that the high blood pressure actually preceded strokes and not the other way around. High blood pressure as a contributory cause of strokes, as well as heart and kidney disease, was fully confirmed only after randomized controlled trials in the late 1960s and early 1970s established that lower blood pressure leads to reduced frequency of these diseases. Screening for high blood pressure became widespread in the same period in large part as a result of these investigations.

Elevated levels were initially defined as 140/100 or greater, based upon a range of normal obtained by measur-