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High Blood Pressure Risk Factors

KEY POINTS

- High blood pressure increases the risk for heart disease and stroke, two leading causes of death for Americans.
- Some medical conditions can raise your risk for high blood pressure.
- Your lifestyle choices can increase your risk for high blood pressure.



Know your risk

Risk factors that can increase your risk of high blood pressure include health conditions, your lifestyle, and your family history.

Some of the risk factors for high blood pressure cannot be controlled, such as your age or family history. But you can take steps to [lower your risk](#) by changing the factors you can control.

Conditions that can increase risk

Some medical conditions can raise your risk for high blood pressure. If you have one, you can take steps to manage it and lower your risk for high blood pressure.

Elevated blood pressure

Elevated blood pressure is blood pressure that is slightly higher than normal. High blood pressure usually develops over time. Having blood pressure that is slightly higher than normal increases your risk for developing chronic high blood pressure.

If your blood pressure is between 120/80 mmHg and 129/80 mmHg, you have elevated blood pressure. Learn more about how blood pressure is [measured](#).

You can take steps to [manage](#) your blood pressure and keep it in a healthy range.

Diabetes

About 6 out of 10 of people who have diabetes also have high blood pressure. [\[1\]](#) Diabetes causes sugars to build up in the blood and also increases the risk for heart disease.

Talk with your doctor about ways to manage diabetes and control other risk factors.

Behaviors that can increase risk

Your lifestyle choices can increase your risk for high blood pressure. To reduce your risk, your doctor may recommend changes to your lifestyle.

The good news is that healthy behaviors can [lower your risk](#) for high blood pressure.

Unhealthy diet

A diet that is too high in sodium and too low in potassium puts you at risk for high blood pressure.

Eating too much sodium—an element in table salt—increases blood pressure. Most of the sodium we eat comes from processed and restaurant foods.

Not eating enough [potassium](#) [↗](#)—a mineral that your body needs to work properly—also can increase blood pressure. Potassium is found in many foods; bananas, potatoes, beans, and yogurt have high levels of potassium.

Physical inactivity

Getting regular physical activity helps your heart and blood vessels stay strong and healthy, which may help lower your blood pressure. Regular physical activity can also help you keep a healthy weight, which may also help lower your blood pressure.

Obesity

Having obesity is having excess body fat. Having obesity or overweight also means your heart must work harder to pump blood and oxygen around your body. Over time, this can add stress to your heart and blood vessels.

Obesity is linked to higher "bad" cholesterol and triglyceride levels and to lower "good" cholesterol levels.

In addition to high blood pressure, having obesity can also lead to heart disease and diabetes. Talk to your health care team about a plan to reduce your weight to a healthy level.

Too much alcohol

Drinking too much alcohol can raise your blood pressure.

- Women should have no more than one drink a day.
- Men should have no more than two drinks a day.

Tobacco use

Tobacco use increases your risk for high blood pressure. Smoking can damage the heart and blood vessels. Nicotine raises blood pressure, and breathing in carbon monoxide—which is produced from smoking tobacco—reduces the amount of oxygen that your blood can carry.

Other factors that can increase risk

Family members share genes, behaviors, lifestyles, and environments that can influence their health and their risk for disease. High blood pressure can run in a family, and your risk for high blood pressure can increase based on your age and your race or ethnicity.

Genetics and family history

When members of a family pass traits from one generation to another through genes, that process is called heredity.

Genes likely play some role in high blood pressure, heart disease, and other related conditions. However, it is also likely that people with a family history of high blood pressure share common environments and other potential factors that increase their risk.

The risk for high blood pressure can increase even more when heredity combines with unhealthy lifestyle choices, such as smoking and eating an unhealthy diet.

Keep Reading:
[Genetics Basics](#)

Family health history is a record of the diseases and health conditions people in your family have had. Family health history is a useful tool for understanding health risks and preventing disease.

Other characteristics

Both men and women can have high blood pressure. Some other characteristics that you cannot control—such as your age, race, or ethnicity—can affect your risk for high blood pressure.

- **Age.** Because your blood pressure tends to rise as you get older, your risk for high blood pressure increases with age. About 9 out of 10 Americans will develop high blood pressure during their lifetime. [\[2\]](#)
- **Sex.** Women are about as likely as men to develop high blood pressure at some point during their lives.
- **Race or ethnicity.** Black people develop high blood pressure more often than white people, Hispanics, Asians, Pacific Islanders, American Indians, or Alaska Natives do. Compared with White people, Black people also develop high blood pressure earlier in life. [\[3\]](#)

SOURCES

CONTENT SOURCE:
[National Center for Chronic Disease Prevention and Health Promotion; About the Division for Heart Disease and Stroke Prevention](#)

REFERENCES

1. National High Blood Pressure Education Program. [*The Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure*](#) [PDF – 223K]. National Heart, Lung, and Blood Institute; 2003.
2. Vasan RS, Beiser A, Seshadri S, et al. [Residual lifetime risk for developing hypertension in middle-aged women and men: the Framingham Heart Study](#). *JAMA*. 2002;287(8):1003–1010.
3. Benjamin EJ, Muntner P, Alonso A, et al. [Heart disease and stroke statistics—2019 update: a report from the American Heart Association](#). *Circulation*. 2019;139(10):e1–e473.