criteria) [36]. Participants were divided (as per their baseline BP) into, normotensive (SBP < 120 mmHg and DBP < 80 mmHg), Pre-hypertensive (SBP 120 - 140 mmHg and DBP 80 - 90 mmHg) and Hypertensive (SBP > 140 mmHg and/ or DBP > 90 mmHg), or presently taking anti-hypertensive medication. Further, hypertensives (presently taking anti-hypertensive medication or/ and with a history of HTN diagnosed by a medical physician) including the pre hypertensive were combined in one group opposed to normotensive controls. Self reported cases and individuals with FPG > 126 mg/dl and PGLU > 200 mg/dl were defined as diabetes [37]. Diabetics under treatment and long term management of blood glucose were defined as controlled diabetes with HbA1c values 6% - 8%. On the contrary above 8% were considered uncontrolled diabetes [38]. All self-reported cases were further validated by medical record review and supplementary questionnaires.

## 2.5. Statistical Analysis

The analysis has been carried out after segregating the cases and controls further into hypertensives and nor-

motensives, resulting into four groups in total. The results have been reported as mean  $\pm$  standard deviation. One-way analysis of variance (ANOVA) was used to analyze the statistical differences in the mean of various parameters between the groups.  $\chi^2$ -test was used to compare the proportion of the subjects between different dichotomized variables. Logistic regression analysis was performed to assess the independent effect of hypertensive status on the odds of occurrence of diabetes, after adjusting for confounders. Statistical analyses were performed using SPSS version 12.0 software (SPSS, Chicago, IL, USA). All the reported P-values were two-tailed, and those less than 0.05 were considered statistically significant.

## 3. Results

**Table 1** shows the distribution of HTN across sex, age groups, diabetes status and addiction habits. The overall prevalence rate of HTN was found to be 37.1%, 33.8% of male and 41% in females. However, the intergroup difference is statistically similar (P > 0.05). Among different age groups, the rate of HTN increased with age from

Table 1. Distribution of hypertension across age, gender, BMI, habits and clinical history.

Variables	Category	Normotensive		Hypertensive		Total		P value
		N	%	N	%	N	%	
Diabetes status	Type 2 Diabetes	142	48.1	153	51.9	295	100	< 0.001
	Non Diabetes	258	75.7	83	24.3	341	100	
Sex	Female	173	59	120	41	293	100	0.63
	Male	227	66.2	116	33.8	343	100	
Age groups	30 - 39	79	86.8	12	13.2	91	100	<0.001
	40 - 49	141	76.2	44	23.8	185	100	
	50 - 59	67	50.8	65	49.2	132	100	
	60 - 69	70	47.6	77	52.4	147	100	
	70 - 79	34	50	34	50	68	100	
	80+	9	69.2	4	30.8	13	100	
BMI groups	Normal (<25)	179	69.6	78	30.4	257	100	0.009
	Overweight (25 - 30)	158	59.8	106	40.2	264	100	
	Obese (>30)	65	54.8	53	45.2	118	100	
Smoking	Yes	76	71.7	30	28.3	106	100	0.03
	No	296	62.3	179	37.7	475	100	
	Quit	28	50.9	27	49.1	55	100	
Alcohol intake	Yes	100	67.6	48	32.4	148	100	NS
	No	287	62	176	38	463	100	
	Quit	13	52	12	48	25	100	
Glycated haemoglobin A1c	<6%	270	71.8	106	28.2	376	100	<0.001
	6% - 8%	87	50.9	84	49.1	171	100	
	>8%	43	48.3	46	51.7	89	100	
	Total	400	62.9	236	37.1	636	100	

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