Trends in Hypertension Control and Management Disparities in U.S. Adults: A NHANES Analysis from 1999-2020

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Introduction: Background

Background

 Hypertension is a leading risk factor for cardiovascular diseases, affecting public health worldwide and prominently in the U.S.

Problem

Following an initial improvement in blood pressure control among U.S. adults with hypertension from 1999-2000 to 2007-2008, there was a stagnation and subsequent decrease post-2013 (Muntner P, et al., 2020).

Introduction

Motivation

 This study is motivated by the need to investigate the reasons behind this decline and to identify factors contributing to the diminishing control of hypertension in recent years.

Study Objective

- Examining the trends, awareness, and medication use in stage 2 hypertension among U.S. adults.
- Assessing the impact of demographic factors and comorbid conditions on hypertension control.

Methodology

Methodology

- Weighting and multiple year adjustment
- Multiple Imputation to address missing data
- Oscillation

 Logistic Regression Models (Dobson, 2008):

Suppose there are n covariates X_i , i=1, ... n, the model can be expressed as:

$$\log(\frac{\pi}{1-\pi}) = X\beta = \beta_0 + \beta_1 X_1 + \dots + \beta_n X_n$$

- \bullet π is the risk
- $\frac{\pi}{1-\pi}$ is the odds
- β_0 is the log odds for $X_i's = 0$
- β_i is the log odds ratio per unit change of X_i , holding all other covariates fixed

Table 1: Participant Characteristics and Comorbidity Status of Uncontrolled Stage 2 Hypertension, Awareness, and Medication Use in US Adults, 1999-2020

| | Stage 2 Hypertension | Awareness | Medication Use $N = 6.891^3$ | |
|------------------------|----------------------|----------------|------------------------------|--|
| Characteristic | $N = 56,017^{-1}$ | $N = 10,923^2$ | | |
| Age | 64 (52, 74) | 65 (54, 75) | 68 (59, 77) | |
| Race/Ethnicity | | | | |
| Non-Hispanic White | 4,627 (42%) | 2,841 (41%) | 2,223 (42%) | |
| Hispanic/Asian/Other | 3,221 (29%) | 1,909 (28%) | 1,406 (27%) | |
| Non-Hispanic Black | 3,075 (28%) | 2,141 (31%) | 1,664 (31%) | |
| Gender | | | | |
| Male | 5,510 (50%) | 3,249 (47%) | 2,338 (44%) | |
| Female | 5,413 (50%) | 3,642 (53%) | 2,955 (56%) | |
| BMI | | | | |
| <25 | 2,584 (24%) | 1,423 (21%) | 1,067 (21%) | |
| 25 to 30 | 3,604 (34%) | 2,202 (33%) | 1,700 (33%) | |
| 30+ | 4,408 (42%) | 3,057 (46%) | 2,359 (46%) | |
| Unknown | 327 | 209 | 167 | |
| Diabetes | 2,410 (22%) | 1,867 (27%) | 1,661 (31%) | |
| Chronic Kidney Disease | 3,653 (33%) | 2,702 (39%) | 2,272 (43%) | |
| History of CVD | 1,920 (18%) | 1,588 (23%) | 1,395 (26%) | |

Stage 2 Hypertension Prevalence: Among the 56,017 participants, 10,923 (19%) have stage 2 hypertension.

 $^{^2}$ Awareness Among Those with Stage 2 Hypertension: 6,891 (63%) of them are aware of their condition.

 $^{^3}$ Medication Usage Among Aware Participants: 5,293 (77%) of them are taking medication .

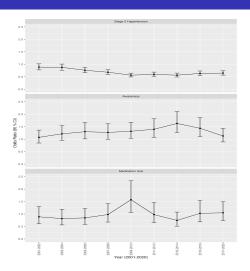


Figure 1: Odds Ratios and 95% CI of Uncontrolled Stage 2 Hypertension, Awareness, and Self-reported Antihypertensive Medication Use in US Adults by Year

Table 2: Odds Ratios and 95% CI of Uncontrolled Stage 2 Hypertension, Awareness, and Medication Use in US Adults, 1999-2020

| | Model 1: Stage 2 Hypertension $N = 56,\!017 \label{eq:N}$ | | Model 2: Awareness $N = 10,923$ | | Model 3: Medication Use $N = 6,891$ | |
|------------------------|---|----------|---------------------------------|----------|-------------------------------------|----------|
| | | | | | | |
| Characteristic | OR (95% CI) | P-value | OR (95% CI) | P-value | OR (95% CI) | P-value |
| Age | 1.06 (1.06, 1.06) | < 0.0001 | 1.02 (1.01, 1.02) | < 0.0001 | 1.06 (1.05, 1.07) | < 0.0001 |
| Race/Ethnicity | | | | | | |
| Non-Hispanic White | Ref | Ref | Ref | Ref | | |
| Hispanic/Asian/Other | 1.23 (1.14, 1.33) | < 0.0001 | 0.98 (0.86, 1.13) | < 0.0001 | 0.93 (0.76, 1.15) | 0.0517 |
| Non-Hispanic Black | 2.09 (1.94, 2.24) | < 0.0001 | 1.49 (1.32, 1.70) | < 0.0001 | 1.38 (1.15, 1.66) | < 0.0001 |
| Gender | | | | | | |
| Male | Ref | Ref | Ref | Ref | | |
| Female | 0.83 (0.78, 0.89) | < 0.0001 | 1.24 (1.10, 1.40) | < 0.0001 | 1.39 (1.17, 1.65) | < 0.0001 |
| BMI | | | | | | |
| < 25 | Ref | Ref | Ref | Ref | | |
| 25 to 30 | 1.16 (1.06, 1.26) | < 0.0001 | 1.41 (1.21, 1.64) | < 0.0001 | 1.26 (1.00, 1.65) | 0.0050 |
| 30+ | 1.57 (1.44, 1.70) | < 0.0001 | 2.26 (1.93, 2.64) | < 0.0001 | 1.62 (1.28, 2.03) | < 0.0001 |
| Diabetes | 1.02 (0.93, 1.12) | 0.0652 | 1.68 (1.42, 1.98) | < 0.0001 | 2.10 (1.63, 2.70) | < 0.0001 |
| Chronic Kidney Disease | 1.72 (1.59, 1.87) | < 0.0001 | 1.56 (1.36, 1.77) | < 0.0001 | 1.10 (0.91, 1.34) | 0.0335 |
| History of CVD | 0.84 (0.76, 0.92) | < 0.0001 | 2.79 (2.33, 3.36) | < 0.0001 | 1.61 (1.26, 2.05) | < 0.0001 |

SBP: Systolic Blood Pressure; DBP: Diastolic Blood Pressure.

Stage 1 Hypertension: SBP \geqslant 130 mm Hg or DBP \geqslant 80 mm Hg.

Stage 2 Hypertension: SBP \geqslant 140 mm Hg or DBP \geqslant 90 mm Hg.



Discussion

Discussion

Data source

• NHANES data (1999-2020).

Method

• Descriptive statistics and logistic regression

Findings

- Significant gap in high blood pressure treatment
- Overall increase in awareness and treatment since 1999, but a notable decline in recent years.
- Age, race, BMI, and additional health conditions, particularly diabetes, have a considerable impact on high blood pressure management.

Limitations

 Potential inaccuracies in self-reported data and the exclusion of certain variables that might influence the outcomes.

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