The Science of Million Hearts®

- **Racial/ethnic differences confirmed for hypertension awareness, treatment, and control.** CDC has released a new report entitled “Racial/Ethnic Disparities in the Awareness, Treatment, and Control of Hypertension—United States, 2003–2010” that confirms well-documented racial/ethnic disparities among people with hypertension. According to the study, Mexican Americans have lower awareness and treatment of hypertension compared to African Americans and whites. Although African Americans had the highest levels of hypertension awareness and treatment, this group had one of the lowest rates of blood pressure control. The report findings reinforce the need for continued implementation of proven, evidence-based strategies that improve blood pressure treatment and control for those with hypertension across all racial/ethnic groups.

- **Self-reported hypertension increased nearly 10% in U.S. from 2005 to 2009.** In April, CDC released a new report entitled “Self-Reported Hypertension and Use of Antihypertensive Medication Among Adults—United States, 2005–2009.” The report reveals recent trends in state-level hypertension awareness and treatment among U.S. adults, including medications used to treat high blood pressure. The report also notes significant disparities in hypertension prevalence and treatment by age, sex, race/ethnicity, and level of education. The elderly, men, non-Hispanic blacks, and individuals with less than a high school education were significantly more likely to report having hypertension compared to younger people, women, non-Hispanic Asians, and individuals with higher levels of education.

- **About 15% of U.S. adults check blood pressure at home at least once a month. According to a new study in the American Journal of Hypertension entitled “Home Blood Pressure Monitoring and Hypertension Status Among US Adults: The National Health and Nutrition Examination Survey (NHANES), 2009–2010,” people with high blood pressure who are unaware, untreated, or not under control are the least likely groups to report checking their blood pressure regularly at home. Even among those who are aware, treated, or under control, fewer than half were monitoring blood pressure at home. More work is needed to spread the message that self-measured blood pressure monitoring, plus clinical support, is a key tool for control.”