

# Surgeon General's Call to Action to Control Hypertension











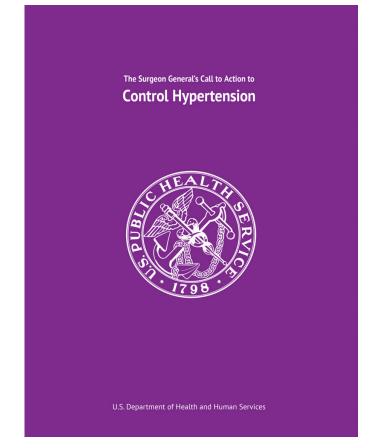


# We've D Got This!

High blood pressure control is possible.

### The Surgeon General's Call to Action to Control Hypertension

- Summarizes recent hypertension control data
- Focuses on adults who already have hypertension
- Outlines goals and identifies strategies to achieve control
  - Goal 1. Make hypertension control a national priority.
  - Goal 2. Ensure that the places where people live, learn, work, and play support hypertension control.
  - Goal 3. Optimize patient care for hypertension.







### A Note from the U.S. Surgeon General

"The Surgeon General's Call to Action...provides a roadmap for helping individuals, communities, health professionals, and others improve the heart health of our nation. [We can] reduce health disparities that persist by working together to eliminate differences in access to quality health care and addressing social factors that influence overall health."

VADM Jerome M. Adams, M.D., M.P.H. U.S. Surgeon General







### **Key Messages**

Figure 1. Prevalence, Control Status, and Treatment of Hypertension Among U.S. Adults, National Health and Nutrition Examination Survey, 2013–2016



- <sup>a</sup> Based on the American College of Cardiology and American Heart Association's 2017 Hypertension Clinical Practice guideline for adults aged 18 years or older who have blood pressure ≥130/80 mmHg or who are currently using prescription medication to lower their blood pressure.
- <sup>b</sup> Among those recommended to take prescription medication and make lifestyle changes .



- Hypertension control is possible.
- Hypertension is common; control is not; together, we can change that.
- Progress has stalled and disparities persist.
- We know what works to control hypertension; we must tailor, replicate, and scale those interventions.
- Partners are critical to achieving hypertension control among all Americans.



#### Main Call to Action Document

- Section 1: Evidence and the Need for Action
  - Summarizes the current state of hypertension control
  - Includes effective solutions, barriers, and broad factors that influence burden and control
- Section 2: Goals and Strategies: The Call to Action
  - Summarizes 3 goals and 10 associated strategies to improve hypertension control
  - Strategies intended to promote awareness and effective interventions
- Section 3: Sector-Specific Actions
  - Acknowledges the need for diverse sectors (i.e., partners) to improve control
  - Linked with Sector Guides





#### **Goals and Strategies to Improve Hypertension Control**



#### Prioritize Control Nationally

- Increase Awareness of Health Risks
- Recognize Economic
  Burden
- Eliminate Disparities



#### Cultivate Community Supports

- Promote Physical Activity Opportunities
- Promote Healthy Food Opportunities
- Connect to Lifestyle Change Resources



# **Optimize Patient Care**

- Use Standardized Treatment Approaches
- Promote Team-Based Care
- Empower and Equip Patients
- Recognize and Reward Clinicians





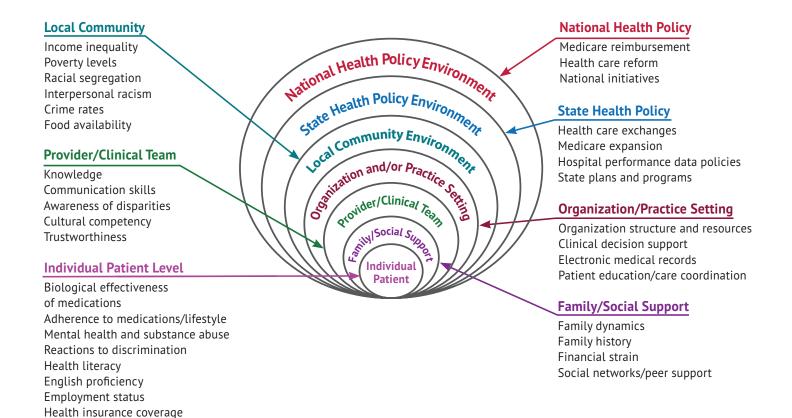
Promoting Health Equity





### Many Factors Influence Hypertension Control

Figure 4. Multilevel Influences on Disparities in Hypertension Prevention and Control







### Partnerships Central to Improving Control

- Identifies specific partners to promote hypertension control
- Highlights the many partners needed to improve hypertension control
- **Sector Guides:** 
  - Recommended Actions
  - Resources





**Health Care Professionals** 





**Employers and** 

**Health Plan Purchasers** 

















**Health Plans and Managed Care Organizations** 





**Academic Institutions** and Researchers





**Health Care Practices. Health** Centers, and Health Systems



















#### Health Care Practices, Health Centers, and Health Systems





## Actions You Can Take

- Put validated and calibrated automated blood pressure monitors with the correct-size cuffs in all exam rooms.
- Provide regular training on how to measure and document blood pressure accurately.
- Implement protocols to standardize patient care.
- Include high blood pressure control in your quality improvement efforts.
- Use data from clinician dashboards and patient registries to highlight gaps in care.
- Ensure that the interventions you use are culturally and linguistically appropriate to the communities you serve.
- Recognize and reward clinical teams that achieve high levels of success in high blood pressure control.

#### **Selected Resources**

American Heart Association: <u>The Importance of Measuring Blood</u>
<u>Pressure Accurately Webinar</u>

Target: BP: <u>In-Office Measuring</u> <u>Blood Pressure Infographic</u>

#### Million Hearts®:

- Hypertension Treatment
   Protocols
- Hypertension Control Change Package





### Working Together to Improve Hypertension Control

- Resources to accelerate change
  - Sector-specific actions
  - Partner Toolkit
- Download, share, and use the Call to Action report and resources to leverage and extend the work of improving hypertension control among those you serve.

Learn more at <a href="https://www.cdc.gov/hypertensionCTA">www.cdc.gov/hypertensionCTA</a>.











For additional information: <a href="https://www.cdc.gov/hypertensionCTA">www.cdc.gov/hypertensionCTA</a>



Optional Slides

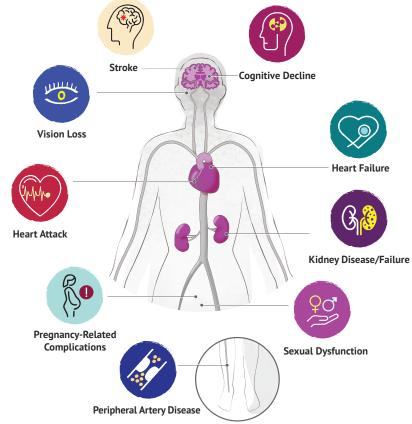




#### Health Problems Caused by Uncontrolled Hypertension



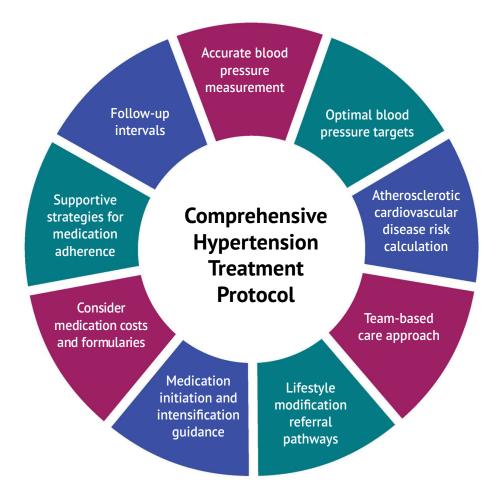
Figure 2. Health Problems Caused by Hypertension





#### **Essential Components of a Treatment Protocol**

Figure 5. Characteristics of a Comprehensive Treatment Protocol for Hypertension Management

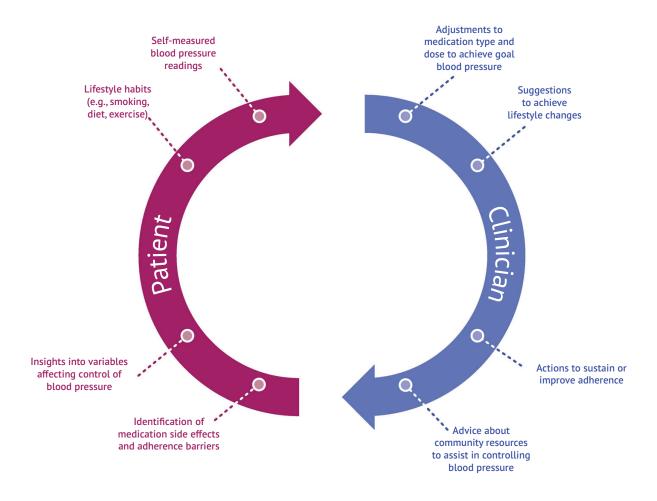






#### Self-Measured Blood Pressure Monitoring

Figure 6. Feedback Loop Supporting Effective Use of Self-Measured Blood Pressure Monitoring







#### Sources

- Figure 1: Centers for Disease Control and Prevention (CDC). Hypertension Cascade: Hypertension Prevalence, Treatment and Control Estimates Among US Adults Aged 18 Years and Older Applying the Criteria From the American College of Cardiology and American Heart Association's 2017 Hypertension Guideline —NHANES 2013—2016. Atlanta, GA: US Department of Health and Human Services; 2019.
- **Top 10 Strategies**: Adapted from the U.S. Department of Health and Human Services. *The Surgeon General's Call to Action to Control Hypertension*. Washington, DC: U.S. Dept. of Health and Human Services, Office of the Surgeon General; 2020.
- **Figure 4**: Mueller M, Purnell TS, Mensah GA, Cooper LA. Reducing racial and ethnic disparities in hypertension prevention and control: what will it take to translate research into practice and policy? *Am J Hypertens*. 2015;28(6):699–704.
- Figure 2:
  - Whelton PK, Carey RM, Aronow WS, et al. 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APhA/ASH/ASPC/NMA/PCNA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults: Executive Summary: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. *Hypertension*. 2018;71(6):1269-1324.
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  - Bhargava, M., Ikram, M. & Wong, T. How does hypertension affect your eyes? J Hum Hypertens. 2012;26(2):71-83.
- **Figure 5**: Figure adapted from Centers for Disease Control and Prevention. *Hypertension Control Change Package*. 2nd ed. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Dept of Health and Human Services; 2020.
- Figure 6: Centers for Disease Control and Prevention. Self-Measured Blood Pressure Monitoring: Actions Steps for Clinicians.



