Classification of Hypertension: How Does Inclusion of Prehypertension Affect Health Care in Indian Scenario?

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Abstract

Hypertension, type 2 diabetes and obesity are the silent killers of the society. Last one decade has witnessed a paradigm shift in defining what constitutes a detrimental level of blood pressure? Entire classification of hypertension has been revised by JNC VII. A distinct concept of prehypertension (systolic blood pressure 120-139 and diastolic blood pressure 80-89 mm Hg) has emerged out of the belief that slightest increase in normal blood pressure carries adverse cardiovascular morbidity. This has wide epidemiological, clinical, therapeutic and economical ramifications. There is also a genuine fear that prehypertension may progress to hypertension over the years. Moreover, prehypertension has been more commonly reported among young generation. It is reported to be present in more than half cases among diabetic subjects. Stress, obesity, diet, family history, middle income group and central serous chorioretinopathy have been recognized to be risk factors for prehypertension. While realizing the prognostic implications of raised blood pressure, one must restrain himself from over stretching the dangers of prehypertension as the aim of the whole exercise is to reduce the risk of CAD and stroke, not merely the level of blood pressure. Adoption of healthy lifestyle measures which include abstinence from tobacco/ smoking, eating vegetables, fruits, and increasing physical activity along with yoga would hopefully pave way for the prevention, regression and reversal of prehypertension as well as hypertension.

Key words: Hypertension, prehypertension, Indian scenario