

Delaware Hypertension Data Summary

In 2021, **36.2 percent** (about 288,000 people) of Delaware residents ages 18 and older reported they had been told by a health care professional that they **have high blood pressure**, also known as hypertension.

Hypertension is a condition caused by increased force of blood pushing against the artery walls. When blood pressure remains high over extended periods of time, it can damage the heart and cause other health problems. It is known as the **“silent killer”** because there usually are no symptoms. In some rare cases, it can cause headaches and vomiting. However, the only way to know if someone has hypertension is to have a health professional measure blood pressure over time.

The Delaware Behavior Risk Factor Survey (BRFS) asks questions about hypertension awareness in odd-numbered years. Prevalence has remained steady for the past nine years—**34.8 percent in 2011, 35.6 percent in 2013, 34.5 percent in 2015, 34.9 percent in 2017, and 36.4 percent in 2019, and 36.2 percent in 2021**. There is no statistically significant difference in prevalence between men (37.7 percent) and women (34.9 percent).

In 2021, Non-Hispanic Black adults (**42.5 percent**) had a slightly (but not significantly) higher prevalence of reported hypertension than Non-Hispanic White adults (37.5 percent).

Hypertension prevalence increases with age. Prevalence of hypertension among Delaware adults by age:

- **16.8 percent** of 18-44 year-olds
- **32.8 percent** of 45-54 year-olds
- **46.6 percent** of adults age 55-64, and
- **62.4 percent** of age 65 or older

As education and income increases, the prevalence of hypertension decreases. Among Delaware adults with a high school diploma or GED, 37.9

percent report being diagnosed with hypertension, compared with 33.8 percent of those with a college degree. Likewise, 45 percent of adults \$25,000.00 reported they have high blood pressure, compared with 33.1 percent of adults with incomes higher than \$100,000 a year.

Risk Factors

Risk factors for hypertension include health conditions, lifestyle risks, and family history or genetics.

Conditions: Diabetes is known to be associated with hypertension. Of Delaware adults with diabetes, **73.1 percent** also report being told by a health professional they have hypertension.

Behavior: Behavioral risk factors include poor diet, high sodium (salt) intake, physical inactivity, obesity, excessive alcohol consumption, and tobacco use. Among adults who are physically inactive, **43.8 percent** report having hypertension (compared with 33.4 percent who reported no leisure-time physical activity); and **47.7 percent** of obese adults have hypertension.

Family history and genetics: Family history and genetics are likely to play a role in whether an individual develops hypertension. The risk of hypertension can increase when someone who has a family history of hypertension also engages in other behavioral risk factors, such as smoking or physical inactivity.

Medication

For some people with hypertension, medication in conjunction with reducing risk factors can be an effective way to control blood pressure.

Of Delaware adults who have hypertension, **79.1 percent** are currently taking medication for hypertension. As age increases, so does hypertension medication usage. Of those Delawareans with hypertension ages 45-54, 75.1 percent report they are currently taking medication, compared to 87.6 percent of adults ages 55-64, and 92.8 percent of adults age 65 and older.

Complications:

Uncontrolled hypertension can cause damage to a number of different organs within the body. These organs include the heart, brain, and kidneys.

- **Heart:** Over time, uncontrolled hypertension can cause arteriosclerosis, or hardening of the arteries, decreasing the flow of blood to a person's heart

leading to heart disease. This, in turn, can lead to angina or chest pain, heart failure, and heart attack.

- **Brain:** Uncontrolled hypertension can cause stroke by causing a burst or block in an artery in the brain.
- **Kidneys:** People with uncontrolled hypertension are at risk for developing chronic kidney disease, a loss of kidney function. This condition can cause retention of fluid, electrolytes, and wastes in the body because the kidneys are unable to filter the blood. As the chronic kidney disease progresses, it can be fatal without dialysis (artificial filtering of the blood) or a kidney transplant.

What You Can Do

Use Medicines As Directed

There are medications that can help lower and control hypertension, decreasing the risk of complications. If a medicine is prescribed for you, take it as instructed. If you reduce risk factors—for example by starting an exercise program or changing your diet—tell your doctor or health care team. Your medication may need to be adjusted.

Make Healthy Lifestyle Changes

- Some research suggests **self-monitoring your blood pressure** at home with a self-monitoring device may help you lower your blood pressure. If you are willing and able to self-monitor, you may want to discuss this option in conjunction with other treatments with your health care team. The Division of Public Health offers free classes to promote the use of blood pressure self-monitoring. More information is available [on the HealthyDelaware website](#).

- Manage any other health conditions you have. If you need help learning to manage any diagnosed chronic disease, the Division of Public Health offers free classes. A class schedule is available [on the Healthy Delaware website](#).
- **Don't smoke.** If you don't smoke, don't start. If you smoke, try to quit. And if you smoke, don't expose others to your second-hand smoke. If you need help quitting, call the **toll-free Delaware Quitline at 1-866-409-1858**.
- Be **physically active**, including both **strength-building and aerobic exercise**. Children and youth should get an hour of physical activity daily, and adults should get at least 30 minutes a day at least 5 days a week.
- Maintain a **healthy weight**.
- Eat a diet high in vegetables and fruits, and low in saturated fats, refined carbohydrates, and sugars. **Eat primarily high nutrient, low-calorie foods**.
- **Eat a low-sodium diet.** Don't add salt to foods, and choose foods that are lower in sodium. For individuals with hypertension, reduction to 1,500 mg. per day can result in greater blood pressure reduction
- If you drink alcoholic beverages, **do so in moderation** — up to one per day for women or smaller adults or up to two per day for men or larger adults. Never drink when it could put you or others at risk. Women who are pregnant should not drink alcohol.
- For more information regarding hypertension and other chronic diseases and their related risk factors, visit [HealthyDelaware.org](#).
- If you have been told by your provider you have high blood pressure, you can register **for a free Chronic Disease Self-Management Program** using our [online registration at HealthyDelaware.org](#) or by calling 302-990-0522.