Hypertension, or high blood pressure, is called the “silent killer” because it often has no symptoms. Hypertension increases a person’s risk for heart disease, stroke, heart attack and other conditions.\(^1\) One-third of Americans ages 18 years or older have hypertension.\(^2\)

Studies suggest American Indians and Alaska Natives (AI/ANs), compared to Caucasians, are at increased risk for developing hypertension and heart disease, few studies have examined hypertension and related health risk factors among older AI/AN populations. The purposes of this study were to: 1) determine the prevalence of hypertension among AI/AN elders; 2) assess gender and age patterns of hypertension prevalence; 3) determine other disorders that are commonly found among AI/AN elders with hypertension; and 4) examine the relationship between hypertension, physical activity, and body mass index (BMI). BMI is a reliable and commonly used indicator of total body fat.\(^3\)

**Findings: One of Two American Indian and Alaska Native Elders have Hypertension**

Slightly more than one-half (52\%) of AI/AN elders (aged 55 and older) reported they had hypertension. Overall, women were slightly more likely than men to have been diagnosed with hypertension. An increase in age corresponded to an increased likelihood of having hypertension. Women were also more likely to report hypertension as they age compared to men (Figure 1).

**American Indian and Alaska Native Elders with Hypertension are More Likely to Have Other Health Conditions**

Other health conditions were examined to determine which were significantly associated with hypertension. Figure 2 provides the prevalence of hypertension by the presence or absence of these other conditions. Congestive heart failure (CHF) had the strongest link to hypertension with 72\% of persons with CHF also having hypertension versus 49.7\% of persons without CHF having hypertension. Other conditions that were linked to hypertension included stroke, depression, diabetes, cataracts, and arthritis (Figure 2).
American Indian and Alaska Native Elders with Hypertension are Less Active and Heavier

Figure 3 illustrates the prevalence of hypertension based on frequency of physical exertion and BMI category. People who exercise less and are overweight or obese are more likely to have hypertension.

Implications
Hypertension is a very common, serious health condition among older AI/AN populations. Elders with certain chronic conditions such as CHF and diabetes, and those who are physically inactive and overweight/obese are at increased risk for hypertension.

Be Proactive
Hypertension is easily detectable and usually can be controlled. All elders should have their blood pressure checked at least once a year. Persons with hypertension should check their blood pressure frequently and have regular visits to a healthcare provider. Also, several lifestyle modifications can help reduce high blood pressure or maintain healthy blood pressure. These include increasing moderate or vigorous exercise, reducing caloric intake, increasing daily consumption of fruits, vegetables and whole-grains, reducing excess body weight, curbing sodium intake, quitting smoking and reducing or eliminating alcohol consumption. AI/AN elders who do not have hypertension should also regularly monitor their blood pressure and practice a healthy lifestyle to increase the likelihood of preventing this condition.

Method
The Identifying Our Needs: A Survey of Elders II was administered by community members in tribes and villages to American Indians and Alaska Natives aged 55 or older, via voluntary face-to-face interviews. The survey methods were developed by the National Resource Center on Native American Aging at the University of North Dakota. Data from 8,305 AI/AN elders were analyzed for this fact sheet.

Funder

References