

Currently, more than 6.3 million South Africans live with high blood pressure (also called hypertension)*, giving us one of the highest rates of hypertension in the world. According to the Heart and Stroke Foundation of South Africa, studies report between 35% and 80% of South Africans have high blood pressure, depending on the age group.*

As South Africans, our unique risk factors include a combination of genetic predisposition and soaring rates of obesity, poor eating habits, low levels of physical activity, and high alcohol consumption. We are also less likely to detect hypertension early through screening tests, which increases the risk of developing complications from the condition.

Untreated high blood pressure leads to heart disease and stroke among other chronic conditions. In fact, hypertension is responsible for a staggering 50% of all strokes, 40% of heart attacks and 60% of kidney disease.**

WHAT YOU NEED TO KNOW ABOUT BLOOD PRESSURE

We all need blood pressure in our blood vessels to help our blood to flow through our bodies. What you don't need is for the walls of the larger arteries to lose their elasticity and become rigid and your smaller blood vessels to become narrower. This is what is known as high blood pressure or hypertension. When this happens, you put a lot of strain on your internal organs, especially your heart, which is why hypertension often leads to severe illness and even heart attacks.

Because hypertension often has no symptoms, it's known as the silent killer. The World Hypertension League recommends that everyone should get their blood pressure checked at least once every year. If you have a close relative with hypertension, it is especially important to pay attention to your blood pressure reading. The disease is already quite advanced by the time you experience some of its symptoms, like:



The Southern African Hypertension Society suggests the following:

- If your blood pressure is below 120/80 (meaning less than 120 mmHg of systolic blood pressure and less than 80 mmHg of diastolic blood pressure) then you have a normal healthy blood pressure. Continue to monitor your blood pressure at least once a year to check this has not changed.
- If your blood pressure is less than 140/90 but more than 120/80, you are at a risk of becoming hypertensive. You need to immediately start improving your lifestyle.
- If your blood pressure is above 140/90, you need to see a doctor urgently to assess your risk and discuss management and treatment strategies to help avoid heart disease and stroke.

 $^{^* \ \, \}text{Source: (https://hsrc.ac.za/news/hsc/study-reveals-south-africa-has-worlds-highest-rate-of-high-blood-pressure/)}$

^{**} Source (https://heartfoundation.co.za/blood-pressure/)

MANAGING HIGH BLOOD PRESSURE

Changing your lifestyle is a cornerstone of blood pressure management. Try these five tips:



MAINTAIN A HEALTHY WEIGHT

Blood pressure often increases as weight increases. This makes weight loss one of the most effective changes for controlling blood pressure. If you are overweight, losing just 5 - 10% of your weight can help reduce your blood pressure. A combination of exercise and healthy eating is the most effective weight-loss strategy.



MAKE EXERCISE PART OF YOUR DAY

Not only does regular exercise make your heart muscle stronger, it also increases the ability of your blood vessels to dilate, decreasing the force on your arteries and in turn lowering your blood pressure. This reduces the risk of a blockage and subsequent stroke or heart attack. You can reduce your systolic and diastolic blood pressure with regular moderate aerobic exercise by 10.5 mmHg and 7.6 mmHg respectively. Although hypertension medicine is the main treatment, exercise can potentially help to decrease the need for blood pressure medicine. Aim for at least 30 minutes of cardiovascular exercise most days of the week.



EAT WELL

A diet that includes wholegrains, fruit, vegetables and low-fat dairy products, lean proteins and healthy fats can lower high blood pressure. Replace unhealthy saturated and trans fats (like fatty and processed meats, full-cream dairy products and butter) with healthier unsaturated fats (like sunflower and olive oils, peanut butter, nuts and seeds, avocado and fish). You should also include at least five helpings of fruits and vegetables in your diet every day. This eating plan is known as the Dietary Approaches to Stop Hypertension (DASH) diet. We have included an article on the DASH diet in your physical wellbeing library.



DITCH THE SALT

Eating less than five grams of salt (one teaspoon) a day - and less than that for people with high blood pressure, diabetes or chronic kidney disease. Did you know in South Arica, bread, followed by margarine, are the two biggest culprits of high sodium intake? Reading labels is essential, as many packaged foods are high in salt, as are takeaways and some restaurant meals. This makes home cooking using herbs and spices instead of salt for flavour the best choice.



QUIT ALCOHOL AND CIGARETTES

Drinking more than a moderate amount of alcohol can raise your blood pressure by several points. It can also reduce the effectiveness of blood pressure medicine. Smoking also raises blood pressure. It's emerging that second-hand smoke can be as dangerous as smoking cigarettes yourself.

Regularly monitoring your blood pressure is one of the best tools for managing hypertension.

Have your blood pressure tested at least once a year or more regularly if your parents also suffered from high blood pressure, as hypertension is often hereditary.

Resources: Southern African Hypertension Society | The Heart and Stroke Foundation South Africa





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