

## **PS1.055**

### **Hypertension in the elderly: characterisation of a sample of patients in a primary care health unit**

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**Background:** With population ageing and blood pressure (BP) progressively rising during lifetime, hypertension is an increasingly more common problem amongst the elderly.

**Aim:** to study prevalence of hypertension in elderly patients and its characteristics in a sample from one medical file.

**Methods:** Cross-sectional study in simple random sample of patients aged 65 and over during 2014. Characterisation of guarded hypertensive patients according to: age; genre; body mass index; alcohol and tobacco consumption; dyslipidemia (DLP); diabetes mellitus (DM); glomerular filtration rate (GFR); albuminuria; systolic and diastolic BP; number and class of antihypertensive medications (AHM).

**Results:** Sample of 146 patients, with hypertension prevalence of 51.4%: n=75; mean age 74; 55% are women; 38.7% are overweight; 44% are obese; 44% are alcohol consumers; 2.7% are smokers; 66.7% present dyslipidemia; 30.7% are diabetic; 9.3% present albuminuria (measured only in 31 patients); mean GFR is 78.6 ml/min (creatinine clearance); 25.3% of hypertensive patients (HP) present GFR less than 60 ml/min. Mean BP is 135/74 mmHg, medicated with a mean of two and a maximum of five AHM; 50.7% are normotensive, 45.4% present isolated systolic hypertension. AHM more used are: diuretic (60%), angiotensin II receptor blocker (ARBs - 58.7%) and angiotensin-converting enzyme inhibitor (ACEIs - 40%). AHM combinations more used are: ARBs or ACEIs plus diuretic (30.6%) or calcium channel blockers (8%). 30.7% use three or more AHM.

**Conclusion:** Hypertension prevalence in this sample is lower compared with those of other national studies (under-coding of hypertension could explain those results, among other reasons). However, there is a high prevalence of risk factors and multimorbidities as expected for this age group. There is an under-measurement of albuminuria and a good BP control. AHM combinations predominate over mono-therapy. Despite presenting a small sample size, this study allows us to perceive better the profile of elderly hypertensive patients and their needs.