

SAND abstract No. 59 from the BEACH program 2003–04

Subject: Hypertension management and control in general practice patients

Organisation supporting this study: Australian Government Department of Health and Ageing.

Issues: The prevalence of hypertension (either controlled or uncontrolled), proportion of patients with hypertension taking a combination angiotensin converting enzyme (ACE) inhibitor/diuretic or angiotensin II antagonist (A2RA)/diuretic, length of time on the combination medication, who initiated the combination medication, control of blood pressure after taking this combination.

Sample: 2,647 respondents from 92 GPs; data collection period: 10/06/2003–14/07/2003.

Method: Detailed in the paper entitled 'SAND Method 2003–04' on this website:
<http://www.fmrc.org.au/publications/SAND_abstracts.htm>.

Summary of results

The age–sex distribution of respondents was similar to the distribution for all BEACH encounters, with the majority (59.5%) of patients being female.

Of the 2,647 respondents, 23.8% had either controlled or uncontrolled hypertension. Among the 611 hypertension patients who responded to the question about combination product use, one in five (20.0%, n=123) were taking either an ACE inhibitor/diuretic (9.5%, n=58) or an A2RA/diuretic (10.6%, n=65).

Of the 123 patients taking a combination medication, 122 reported the duration of its usage. The majority (82.8%) of these 122 patients had been using the combination for more than 3 months and the remaining (17.2%) had been using it for less than 3 months.

The majority (86.1%) of the combination medications were reported as initiated by a GP and the remaining combination medications (13.9%) by a specialist. GPs indicated that blood pressure was well controlled for the majority (81.8%) of patients since commencing their combination medication, and was too high for the remaining 18.2%.

Of 117 respondents, 94.9% had used at least one medication for hypertension prior to commencing the combination products. More than one previous medication could be recorded for each patient. More than half (52.1%) of these patients had previously used an ACE inhibitor, 27.4% had used an A2RA, 17.9% a beta-blocker, and 15.4% a diuretic.

The GP reported that for 83.5% of patients currently taking a combination product and previously using medication other than a combination product, their blood pressure had been too high on previous medication. The remainder (16.5%) had been well controlled on previous medication.

The reasons for prescribing the combination medication were to improve blood pressure control (66.7%), to simplify therapy (29.3%), and to add a second drug (17.1%) for the care of 123 patients currently taking a combination medication. More than one reason could be chosen per patient.

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