

Every 39 seconds, a person dies from heart attack, stroke, or other vascular disease.



# High Blood Pressure & Cholesterol

## Q&A

### How can I prevent high blood pressure and/or cholesterol?

- ◇ Eat a healthy diet that is low in salt; low in total fat, saturated fat, and cholesterol; and rich in fresh fruits and vegetables.
- ◇ Take a brisk 10-minute walk, 3 times a day, 5 days a week.
- ◇ Don't smoke. If you do smoke, quit as soon as possible.

To learn more, visit [www.cdc.gov/vitalsigns](http://www.cdc.gov/vitalsigns).

### How do I know if I have high blood pressure?

Getting your blood pressure checked is important because high blood pressure often has no symptoms. Your doctor can measure your blood pressure, or you can use a machine available at many pharmacies. You also can use a home monitoring device to measure your blood pressure. Normal blood pressure is defined as 120/80 mm Hg. If the systolic number (the first one) is greater than 140 mm Hg or the diastolic (second) number is greater than 90 mm Hg, you may have high blood pressure.

### How often should I check my blood pressure?

For most people, a blood pressure measurement should be taken at each doctor visit, but at least every

two years. If you have already been diagnosed with heart disease or other risk factors for heart disease, your blood pressure measurement should be more closely monitored.

### What can I do about my high blood pressure?

If you already have high blood pressure, your doctor may prescribe medications in addition to lifestyle changes. All drugs could have side effects, so talk with your doctor on a regular basis. Don't go off your medications without first consulting your doctor. As your blood pressure improves, your doctor will want to monitor it often. Lifestyle changes, such as healthy eating and exercise, are just as important in controlling high blood pressure as taking medications.

### How do I know if I have high cholesterol?

High cholesterol usually has no signs or symptoms. Only a doctor's check will reveal it. Your doctor can do a simple blood test to check your cholesterol levels. The test is called a lipoprotein profile. It measures several kinds of cholesterol as well as triglycerides, a fat found in the blood that can play a role in cardiovascular disease. Some doctors do a simpler blood test that just checks total and HDL or "good" cholesterol, but it's important to find out your LDL or "bad" cholesterol level.

## **What can I do about my high cholesterol?**

If you have high cholesterol, your doctor may prescribe medications and suggest lifestyle changes, such as healthy eating and exercise. Controlling LDL cholesterol is the primary focus of treatment. Your treatment plan will depend on your current LDL level and risk for heart disease and stroke. Your risk for heart disease and stroke depends on other risk factors, including high blood pressure, smoking status, age, HDL level, and family history of early heart disease. In addition, people with existing cardiovascular disease or diabetes are at high risk for high cholesterol.

## **What's the difference between "bad" and "good" cholesterol?**

Particles called lipoproteins carry cholesterol in the blood. There are two kinds of lipoproteins: LDL and HDL.

Low-density lipoproteins (LDL) make up the majority of the body's cholesterol. LDL is known as "bad" cholesterol because having high levels can lead to buildup in the arteries and result in heart disease.

High-density lipoproteins (HDL) absorb cholesterol and carry it back to the liver, which flushes it from the body. High levels of HDL, or "good" cholesterol, reduce the risk for heart disease and stroke.

## **Why bring up artificial trans-fats again? Now that food manufacturers are required to list them on their labels, doesn't that cover it?**

Eating artificial trans-fats raises bad (LDL) cholesterol levels among both adults and children. Avoiding them can help you stay healthy.

In most places, when you go out to eat or buy fast food, you can hardly avoid artificial trans-fats. Only 1 in 5 Americans lives where there are policies that eliminate artificial trans-fat from restaurant foods. However, in some areas, legislators have acted to restrict the use of trans-fats in restaurants and manufacturing. For example, in California, all oils, margarines, and shortenings used in frying must contain less than 0.5% artificial trans-fat per serving. Food manufacturers and restaurants that violate the legislation face fines of up to \$1,000. Restrictions like this make healthy eating easier for everyone.

## **You say that most people who don't have their high blood pressure or cholesterol under control actually have health insurance. So if they're under a doctor's care, why aren't these conditions better controlled?**

Indeed, nearly 80% of people who don't have their blood pressure or cholesterol under control actually

have health insurance. Not only do individuals need to be checked continually for these conditions, but they also need adequate, affordable treatment along with consistent follow-up care.

To improve blood pressure and cholesterol control levels among U.S. adults in every age group, a comprehensive approach that involves policy and systems changes to improve health care access, quality of preventive care, and patient adherence to treatment is needed. The Affordable Care Act provides coverage for blood pressure and cholesterol screenings. Additional health care system improvements—including electronic health records—will improve follow-up treatment and management and can improve patient-physician interaction. Allied health professionals (nurses, dietitians, health educators, and pharmacists) also could help increase patient adherence to medications.

## **Where can I go to find out more information about health care reform?**

For information about health care reform, visit <http://www.healthcare.gov>.

## **Where can providers go to get more information on current guidelines?**

The most updated guidelines for providers are available from the National Heart, Lung, and Blood Institute, part of the National Institutes of Health.

Current guidelines for high blood pressure (JNC 7) are online at <http://www.nhlbi.nih.gov/guidelines/hypertension>.

Current guidelines for cholesterol (ATP III) are online at <http://www.nhlbi.nih.gov/guidelines/cholesterol>.

New guidelines for both high blood pressure (JNC 8) and cholesterol (ATP IV) are scheduled for release in fall 2011.

**Want to learn more? Visit**

[www](http://www)

<http://www.cdc.gov/vitalsigns>

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