## Blood pressure

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## SUMMARY

■ Mean systolic blood pressure (SBP) was 133 mmHg in men and 126 mmHg in women. Mean SBP was lower in boys $(102 \mathrm{mmHg})$ and girls $(104 \mathrm{mmHg})$ aged $4-10$ than in children aged II18 (mean II4mmHg in boys, 109 mmHg in girls). In adults, mean SBP was 127 mmHg in men aged $19-34$ and 140 mmHg in those aged 65 and over $(113 \mathrm{mmHg}$ and 141 mmHg for women aged 19-34 and 65 and over, respectively).

■ Mean diastolic blood pressure (DBP) was 74 mmHg in men and 73 mmHg in women. Mean DBP varied less by age, ranging from 62 mmHg in boys and 64 mmHg in girls aged $4-10$ to 77 mmHg in men and 78 mmHg in women aged $50-64$, with older adults having levels of 71 mmHg in men and 72 mmHg in women.

■ Forty-two percent of men and $35 \%$ of women had hypertension (SBP $\geq 140 \mathrm{mmHg}$ and/or DBP $\geq 90 \mathrm{mmHg}$ and/or on medication for hypertension). This was higher in men and women aged 65 and over ( $62 \%$ and $63 \%$, respectively) compared with those aged $19-34$ ( $18 \%$ and $7 \%$, respectively). There was a male preponderance in prevalence in those aged under 50.

- Forty-five percent of men and $60 \%$ of women with hypertension were on drug treatment; adequate control of blood pressure was obtained in only $53 \%$ of men and $48 \%$ of women on drug treatment.
- Age-standardised mean SBP and DBP were significantly higher in men in Northern Ireland than in England or Scotland. Mean DBP was lower in women from Wales than in women from the other three countries. In women but not men, age-standardised prevalence of hypertension was substantially higher in Scotland (56\%) than in the other three countries (Northern Ireland 4I\%, Wales 35\%, England 34\%).
- Mean SBP and DBP in the Low Income Diet and Nutrition Survey (LIDNS) were very similar to findings from the most recent national surveys of the general population in England (Health Survey for England (HSE) 2003) and Scotland (Scottish Health Survey (SHS) 2003). However, prevalence of hypertension appeared to be higher in LIDNS than in HSE 2003 for men and than in SHS 2003 for men and women. This may reflect the different age profiles of the surveys or the greater prevalence of cardiovascular risk factors in more deprived groups, giving a lower threshold for treating hypertension.


### 13.1 Introduction

This chapter presents results on blood pressure in two ways: as levels of systolic and diastolic pressure in both adults and children, and as prevalence and treatment of hypertension among adults (Sections I3.3-I3.5). First, there is a short introduction (Section I3.I) explaining why raised blood pressure is important, the links between blood pressure and diet, and between blood pressure and socio-economic factors. It also describes the measurement method and the definitions used for this chapter, which is followed by response rates to the blood pressure measurements (Section I3.2). Finally, in Section I3.6, comparisons of blood pressure in LIDNS are made with the general population from other national surveys.

Hypertension, persistently high blood pressure, is the second most important preventable risk factor for premature death in economically developed countries, accounting for almost II\% of loss of healthy life.' It is a major predisposing factor for stroke and other cerebrovascular disease ${ }^{2}$ as well as for heart disease,' with a continuous positive relationship between increased blood pressure level and risk of disease. ${ }^{3}$ Current guidelines define hypertension as sustained blood pressure $\geq 140 / 90$ (systolic blood pressure (SBP) $\geq 140$ and/or diastolic blood pressure $($ DBP) $\geq 90) .{ }^{456}$ Drug treatment is recommended for anyone with sustained blood pressure $\geq 160 / 100$, and at lower levels for those with existing cardiovascular disease, diabetes, or with damage caused by the raised $\mathrm{BP} .^{4}$

Blood pressure is related to nutrient intake both directly and indirectly. Dietary sodium increases BP and there are therefore national guidelines for sodium intake. ${ }^{378910}$ Fruit and vegetable consumption may decrease BP owing to their potassium content. ${ }^{811}$ Alcohol increases SBP ${ }^{12}$ but appears to decrease DBP. ${ }^{8}$ Blood pressure also rises with increasing body mass index. ${ }^{13}$ Regular physical activity can reduce blood pressure; ${ }^{5}$ a sedentary lifestyle increases the risk of hypertension both through lack of activity and through an increased risk of obesity.

In economically developed countries, both SBP and prevalence of hypertension are inversely related to social class and education level, after adjustment for age. The differences in mean blood pressure are not due to differential rates of diagnosis or treatment. A substantial part of the socio-economic differences in SBP and DBP is explained by changes in body mass index (BMI). ${ }^{14}$

For the Low Income Diet and Nutrition Survey (LIDNS), BP was measured in the respondent's home by a trained nurse, using the Omron HEM 907. This machine was chosen as it is used in the Health Survey for England (HSE), having been validated as an accurate way to measure BP in the community. ${ }^{15}$ Using the appropriate size cuff, three measurements were taken at one minute intervals after a five minute rest, using the right arm, with the respondent seated. The nurse also asked about medication used and its purpose. The results presented in this chapter are based on the means of the second and third measurements of SBP and DBP.

Hypertension is defined using the threshold value of $S B P \geq 140 \mathrm{mmHg}$ or $D B P \geq 90 \mathrm{mmHg}^{1}$ or the use of medication prescribed to lower blood pressure, in line with current guidance. ${ }^{4}$ Adults were classified into one of four groups:

| Normotensive - untreated: | SBP $<140$ and $D B P<90$ and not currently on medication <br> prescribed specifically to treat raised $B P$ |
| :--- | :--- |
| Hypertensive - controlled | $S B P<140$ and $D B P<90$ and currently on medication prescribed <br> specifically to treat raised BP |
| Hypertensive - uncontrolled | SBP $\geq 140$ and $/$ or DBP $\geq 90$ and currently on medication <br> prescribed specifically to treat raised BP |
| Hypertensive - untreated | SBP $\geq 140$ and $/$ or DBP $\geq 90$ and not currently on medication <br> prescribed specifically to treat raised BP |

The last three groups together comprise those with hypertension for the purpose of this report. When interpreting the results, it should be taken into account that hypertension can be diagnosed only when sustained rises in BP are detected, while this study measured BP on a single occasion. The reported rates of hypertension, therefore, are likely to be overestimates.

As blood pressure and the prevalence of hypertension are known to increase substantially with age, results presented are either age-specific or, for adults, are age-standardised, e.g. to enable comparisons across countries. The results were age-standardised using the overall LIDNS adult population.

### 13.2 Response rate

Based on respondents who were visited by a nurse, BP measurements were attempted from $99 \%$ of men and $98 \%$ of women aged 19 and over, and from $78 \%$ of boys and $76 \%$ girls aged 4 - I8. However, the measurements from some respondents were excluded because they had eaten, drunk alcohol, exercised or smoked in the half hour preceding the nurse visit; the proportion who had done so varied from $33 \%$ of men and $25 \%$ of women aged $19-34$ to II\% and $\mathrm{I} 2 \%$ respectively aged 65 and over. Small numbers of respondents were excluded because the measurement was refused or three valid readings were not obtained or attempted. Thus $70 \%$ of men and $76 \%$ of women who had a nurse visit had three valid BP measurements, as did $60 \%$ of boys and $66 \%$ of girls.

Subsequent analyses are restricted to respondents with three valid BP measurements. Results have been weighted for non-response to the nurse visit, in an attempt to make the results representative of the low income population (see Chapter 2 and Appendix O, LIDNS CD).
(Table I3.1)

### 13.3 Blood pressure by sex and age

### 13.3.I Systolic blood pressure (SBP)

Mean SBP was 133 mmHg in men and 126 mmHg in women. There were no differences by sex in either children aged $4-I I$ or adults aged 50 and over, but it was lower in females than males age groups II-I8, I9-34 and 35-49. Mean SBP varied by age, ranging from 127 mmHg in men aged 1934 to 140 mmHg aged 65 and over, and from 113 mmHg to 141 mmHg , respectively, in women. In children, mean SBP was 102 mmHg in boys aged $4-10$ and $I 14 \mathrm{mmHg}$ in boys aged II-I8, and 104 mmHg and 109 mmHg in those age groups, respectively, in girls. Median and mean SBP were very similar to each other in every age group in both males and females.

The 5th and IOth centile levels of SBP varied little with age and were very similar in males and females for each age group. The 90th and 95th centiles varied more markedly with age and showed a larger sex difference. Figure I3A shows mean, IOth and 90th centiles for SBP by sex and age.
(Table I3.2, Figure I3A)

### 13.3.2 Diastolic blood pressure (DBP)

Mean DBP was 74 mmHg in men and 73 mmHg in women. There were no differences by sex in either adults or children. Mean DBP varied with age, from 62 mmHg in boys and 64 mmHg in girls aged $4-10$ to 77 mmHg in men and 78 mmHg in women aged $50-64$, but was lower in adults aged 65 and over ( 71 mmHg in men and 72 mmHg in women). The lower mean DBP levels in adults aged 65 and over may represent a survivor effect, whereby those with raised DBP were more likely to have died prematurely or not to have been included in the survey, being too ill or disabled to take part or not living in a private household, or that drug treatment for hypertension (particularly isolated systolic hypertension, common in older people) resulted in lower DBP levels.

Median and mean DBP were very similar to each other in every age group in both sexes. The 90th and 95th centiles varied markedly with age and peaked in the 50-64 age group. The 5th and 10th centile levels of DBP varied less with age. There was little difference between sexes. Figure I3B shows mean, IOth and 90th centiles for DBP by sex and age.
(Table I3.3,Figure I3B)


### 13.3.3 High blood pressure in adults

Forty-two percent of men and $35 \%$ of women had hypertension (i.e. were taking drugs prescribed to lower their blood pressure or had a measured SBP $\geq 140 \mathrm{mmHg}$ or a measured DBP $\geq 90 \mathrm{mmHg}$ ). This varied from $18 \%$ of men and $7 \%$ of women aged $19-34$ to $62 \%$ of men and $63 \%$ of women aged 65 and over. The male preponderance in prevalence disappeared by age 5064 ( $49 \%$ of men, $5 \mathrm{I} \%$ of women).

Figure I3C shows the prevalence of untreated, treated but uncontrolled, and well-controlled hypertension by sex and age. In the youngest men, no cases of high blood pressure detected in the survey were being treated. It should be remembered that hypertension is diagnosed, and treatment indicated, on the basis of sustained high blood pressure but measurements were taken only on a single occasion for LIDNS. There were fewer of the youngest women with hypertension but one-third were being treated. This may be because blood pressure is measured routinely when women attend health services for contraception or antenatal care. Young men are much less likely to visit a doctor and are less likely to have their BP measured routinely. More than half the women aged 35 and over with hypertension were on drug treatment but for men this was achieved only in those aged 65 and over. Only one-third of men aged 35-64 with raised blood pressure were on drug treatment. However, of those on drug treatment, adequate control of $B P(<140 / 90)$ was achieved in almost all men aged 35-49 and in around half of men aged 50 and over. Adequate BP control was attained in almost all women aged 19-34 on drug treatment, but in less than two-fifths of women aged 65 and over.
(Tables I3.4, I3.5, Figure I3C)

Figure 13B


### 13.4 Blood pressure by country/region

Observed ${ }^{16}$ mean SBP in men varied significantly between countries. It was lowest in Scotland $(129 \mathrm{mmHg})$ and highest in Wales $(138 \mathrm{mmHg})$ and Northern Ireland $(139 \mathrm{mmHg})$. Observed mean SBP did not vary significantly across the English regions. After age-standardisation to the overall LIDNS population, mean SBP remained significantly higher in Northern Ireland than in England or Scotland.

In men, observed mean DBP did not vary between countries or regions but after agestandardisation, DBP was also higher in Northern Ireland than in England or Scotland.

Although observed mean SBP in women was higher in Scotland ( 131 mmHg ) than in Northern Ireland $(123 \mathrm{mmHg})$, the differences between countries were due to differences in the ages of the adults. Following age-standardisation, mean SBP was significantly higher in women in the North of England (age-standardised mean 129 mmHg ) compared with those from the South (age-standardised mean 124 mmHg ).

Age-standardised mean DBP was lower in women from Wales than in women from the other three countries.

The prevalence of hypertension did not differ significantly between countries or regions in men. However, in women, the age-standardised prevalence of hypertension was substantially higher in Scotland (56\%) than in the other three countries (Northern Ireland 4I\%, Wales 35\%, England 34\%).
(Tables 13.6a, I3.6b, I3.6c, 13.6d)


### 13.5 Blood pressure by household type

As blood pressure varies so significantly with age, it is unsurprising that mean SBP, mean DBP and prevalence of hypertension were higher in households comprising retired adults than in households of working age adults. It was not possible to age-standardise the results for household type because the categorisation is based on adults' ages.

## I3.6 Comparison with other surveys

13.6.1 Adults

Comparisons with the general population can be made with national surveys, including the HSE and the Scottish Health Survey (SHS). However, such comparisons need to be treated with caution, as there are disproportionately more young and old people in the low income population than in the general population. (This differs from the comparisons made between countries in Section I3.4, when the results were age-standardised; the reference population used for the age standardisation in that analysis was not an external population but the total adults LIDNS population.)

SBP in LIDNS varied markedly with age, as has been found in other national surveys. ${ }^{1417}$ In all of these studies, it was higher in men than women up to the age of 65 but was higher in women than men in adults aged 65 and over.

National surveys undertaken in 2003 in England (HSE) and Scotland (SHS) were used to compare results from LIDNS with the general population. Both HSE and SHS used the same measurement protocol and equipment (Omron) as LIDNS for measuring blood pressure. Mean SBP in LIDNS was very similar to the findings in HSE $2003{ }^{14}$ and in SHS 2003. ${ }^{1718}$
(Table 13.7)
The HSE 2003 and SHS 2003 showed mean DBP varied less than SBP with age, values being highest around age 55 and lower in older people; this was similar to the LIDNS results. Neither HSE 2003 nor SHS 2003 found a relationship between quintile of income and mean blood pressure after adjustment for age. ${ }^{1417}$

Prevalence and treatment of hypertension
LIDNS also used the same definition of hypertension as HSE 2003 and SHS 2003. In HSE 2003, $32 \%$ of men and $30 \%$ of women (aged I6 and over) had hypertension; ${ }^{14}$ in SHS 2003, the equivalent figures were $33 \%$ of men and $32 \%$ of women. ${ }^{17}$ These rates appear to be lower than those in LIDNS for men and women in Scotland and for men in England. However, it is difficult to make precise comparisons, as both blood pressure and hypertension vary so much with age: the observed prevalence of hypertension among Scottish men participating in LIDNS was $37 \%$, but was $47 \%$ after age-standardisation to the LIDNS population (and neither of these figures relate directly to the age distribution of the general population in Scotland).

Income was inversely, and area deprivation positively, associated with increased prevalence of hypertension in the SHS 2003. Income and National Statistics Socio-Economic Classification (NS-SEC) were inversely associated with prevalence of hypertension in HSE 2003. ${ }^{14}$ Agestandardisation abolished most associations with socio-economic inequalities in HSE 2003 ${ }^{14}$ and SHS 2003. ${ }^{17}$ However, the association persisted for the age-standardised prevalence of hypertension in women with income in HSE 2003 ${ }^{14}$ and with area deprivation in SHS 2003. ${ }^{17}$ Age-standardisation reduced the associations with NS-SEC in HSE 2003. ${ }^{14}$ It is possible that differences in the age distribution of adults in these surveys accounts for part of the difference in prevalence, as LIDNS included a slightly larger proportion of older people, in whom hypertension is much more common, than in the general population (see Chapter 3). Although mean BP in men did not differ substantially between these three surveys, there is also some evidence that hypertension is being diagnosed and treated more often in those at higher risk of cardiovascular disease, which includes a higher proportion of those in deprived circumstances. ${ }^{19}$
(Table I3.7)
Of those identified in HSE 2003 as having hypertension, this had been diagnosed in 54\% of men and $59 \%$ of women, was being treated in $37 \%$ of men and $46 \%$ of women, and was successfully controlled in $46 \%$ of men and $44 \%$ of women who were on treatment. ${ }^{14}$ In Scotland, hypertension had been diagnosed in $37 \%$ of men and $49 \%$ of women identified in SHS 2003 as having hypertension. It was successfully controlled in $48 \%$ of men and $44 \%$ of women who were on treatment. ${ }^{17}$ (Table not available.)

Rates of treatment and control of hypertension in adults aged 65 and over are given in Table 13.8. The rate of drug treatment in women was higher for respondents in LIDNS than in HSE. ${ }^{14}$ No other differences were significant. ${ }^{17}$
(Table I3.8)

## I3.6.2 Children

For children, it is difficult to compare SBP levels between LIDNS and other surveys because SBP varies with height and age; moreover, the age groups used for reporting results vary between different national surveys. ${ }^{20}$ The most recent population BP levels in children living in Scotland come from the SHS 2003, and in children living in England from the HSE 200 I/02. ${ }^{20}$ (The English data were measured using a Dinamap BP machine but the results had already been converted using regression equations to be equivalent to Omron readings, to enable comparisons to be made.) ${ }^{1820}$

Mean DBP was higher in boys aged II-I8 in LIDNS than in boys aged IO-I5 in HSE or SHS ( $\mathrm{p}<0.004$ ). This could be due to differences in age and/or height. No other differences were seen in mean SBP or mean DBP. Table I3.9 shows results from HSE for comparison with LIDNS results for England; for comparisons with SHS, it is necessary to compare with overall LIDNS results, as numbers were too small to separately analyse Scottish children in LIDNS. (Table 13.9)

## Notes and references

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16 Because the population age structure differed between countries and regions, results are presented as observed and age-standardized.

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## Tables

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Table I3.I
Response to blood pressure measurement, by sex and age

| Aged 4 and over who had a nurse visit |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Response to blood pressure measurement | Age group |  |  |  |  |  |  |  | Total |
|  | 4-10 | II-18 | Total children | 19-34 | 35-49 | 50-64 | 65+ | Total adults |  |
|  | \% | \% | \% | \% | \% | \% | \% | \% | \% |
| Males |  |  |  |  |  |  |  |  |  |
| Three valid BP measurements | 47 | 74 | 60 | 63 | 61 | 68 | 85 | 70 | 66 |
| Ate, drank alcohol or smoked in the previous half hour | 28 | 22 | 25 | 33 | 36 | 32 | 11 | 26 | 26 |
| Not known if ate, drank, or smoked | - | - | - | - | - | - | - | - | - |
| Three valid readings not obtained | 17 | 3 | 10 | 1 | 2 | 0 | 3 | 2 | 5 |
| Refused, not obtained, not attempted | 9 | 0 | 5 | 3 | 1 | - | 2 | 2 | 3 |
| Females |  |  |  |  |  |  |  |  |  |
| Three valid BP measurements | 61 | 70 | 66 | 72 | 69 | 76 | 85 | 76 | 73 |
| Ate, drank alcohol or smoked in the previous half hour | 20 | 24 | 22 | 25 | 28 | 22 | 12 | 21 | 21 |
| Not known if ate, drank, or smoked | - | 1 | 1 | - | 0 | - | - | 0 | 0 |
| Three valid readings not obtained | 6 | 0 | 3 | 1 | 3 | 2 | 3 | 2 | 3 |
| Refused, not obtained, not attempted | 13 | 4 | 9 | 2 | - | 1 | I | 1 | 3 |
|  |  |  |  |  |  |  |  |  |  |
| Base (unweighted) |  |  |  |  |  |  |  |  |  |
| Males | 116 | 129 | 245 | 118 | 157 | 206 | 209 | 690 | 935 |
| Females | 143 | 154 | 297 | 339 | 377 | 273 | 395 | 1384 | 1681 |

- No observations.


## Table I3.2

Systolic blood pressure (SBP), by sex and age
Aged 4 and over with valid blood pressure readings

| Systolic blood pressure ( mmHg ) | Age group |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 4-10 | 11-18 | Total children | 19-34 | 35-49 | 50-64 | 65+ | Total adults |
| Males |  |  |  |  |  |  |  |  |
| Mean | 102 | 114 | 109 | 127 | 125 | 132 | 140 | 133 |
| Standard deviation | 10.4 | 12.7 | 13.2 | 12.6 | 14.6 | 16.7 | 22.7 | 19.2 |
| 5th Percentile | 83 | 99 | 90 | 111 | 104 | 105 | 110 | 106 |
| 10th Percentile | 90 | 102 | 95 | 114 | 107 | 109 | 114 | 112 |
| Median | 105 | 113 | 108 | 126 | 127 | 133 | 137 | 130 |
| 90th Percentile | 111 | 128 | 126 | 147 | 145 | 157 | 171 | 158 |
| 95th Percentile | 121 | 133 | 129 | 153 | 154 | 163 | 186 | 167 |
| Females |  |  |  |  |  |  |  |  |
| Mean | 104 | 109 | 106 | 113 | 118 | 129 | 141 | 126 |
| Standard deviation | 10.4 | 9.9 | 10.4 | 11.1 | 13.3 | 16.5 | 22.0 | 20.5 |
| 5th Percentile | 92 | 97 | 93 | 96 | 99 | 104 | 109 | 99 |
| 10th Percentile | 94 | 97 | 95 | 99 | 103 | 109 | 116 | 104 |
| Median | 102 | 107 | 104 | 112 | 117 | 128 | 138 | 123 |
| 90th Percentile | 116 | 123 | 121 | 128 | 136 | 149 | 170 | 154 |
| 95th Percentile | 128 | 129 | 127 | 130 | 141 | 156 | 180 | 165 |
| Base (unweighted) |  |  |  |  |  |  |  |  |
| Males | 63 | 99 | 162 | 77 | 88 | 145 | 175 | 485 |
| Females | 90 | 117 | 207 | 222 | 245 | 208 | 325 | 1000 |

Diastolic blood pressure (DBP), by sex and age
Aged 4 and over with valid blood pressure readings

| Diastolic blood pressure ( mmHg ) | Age group |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 4-10 | 11-18 | Total children | 19-34 | 35-49 | 50-64 | 65+ | Total adults |
| Males |  |  |  |  |  |  |  |  |
| Mean | 62 | 64 | 63 | 71 | 77 | 77 | 71 | 74 |
| Standard deviation | 10.6 | 8.9 | 9.7 | 9.2 | 10.4 | 12.6 | 11.5 | 11.5 |
| 5th Percentile | 43 | 46 | 45 | 57 | 56 | 55 | 52 | 55 |
| 10th Percentile | 46 | 51 | 48 | 59 | 66 | 61 | 56 | 59 |
| Median | 63 | 64 | 64 | 72 | 77 | 77 | 71 | 75 |
| 90th Percentile | 77 | 75 | 75 | 83 | 89 | 96 | 86 | 89 |
| 95th Percentile | 78 | 76 | 77 | 87 | 94 | 100 | 90 | 95 |
| Females |  |  |  |  |  |  |  |  |
| Mean | 64 | 63 | 64 | 70 | 74 | 78 | 72 | 73 |
| Standard deviation | 12.1 | 9.9 | 11.1 | 10.6 | 11.6 | 12.1 | 11.2 | 11.5 |
| 5th Percentile | 50 | 47 | 50 | 53 | 56 | 60 | 55 | 56 |
| 10th Percentile | 52 | 53 | 52 | 58 | 59 | 64 | 58 | 59 |
| Median | 61 | 63 | 63 | 70 | 75 | 76 | 72 | 73 |
| 90th Percentile | 74 | 77 | 74 | 84 | 88 | 94 | 87 | 88 |
| 95th Percentile | 83 | 79 | 79 | 88 | 96 | 98 | 92 | 94 |
| Base (unweighted) |  |  |  |  |  |  |  |  |
| Males | 63 | 99 | 162 | 77 | 88 | 145 | 175 | 485 |
| Females | 90 | 117 | 207 | 222 | 245 | 208 | 325 | 1000 |

## Table I3.4

Blood pressure level using $140 / 90 \mathrm{mmHg}$ definition, ${ }^{\text {a }}$ adults, by sex and age

| Aged 19 and over |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Adults aged 19 and over with valid blood pressure readings | Age group |  |  |  | Total |
|  | 19-34 | 35-49 | 50-64 | 65+ |  |
|  | \% | \% | \% | \% | \% |
| Men |  |  |  |  |  |
| Normotensive untreated | 82 | 80 | 51 | 38 | 58 |
| Hypertensive controlled | - | 6 | 10 | 17 | 10 |
| Hypertensive uncontrolled | - | 0 | 7 | 18 | 9 |
| Hypertensive untreated | 18 | 13 | 31 | 27 | 23 |
| Total with hypertension | 18 | 20 | 49 | 62 | 42 |
| Women |  |  |  |  |  |
| Normotensive untreated | 93 | 85 | 49 | 37 | 65 |
| Hypertensive controlled | 2 | 5 | 19 | 15 | 10 |
| Hypertensive uncontrolled | 0 | 2 | 9 | 25 | 11 |
| Hypertensive untreated | 4 | 7 | 23 | 23 | 14 |
| Total with hypertension | 7 | 15 | 51 | 63 | 35 |
| Base (unweighted) |  |  |  |  |  |
| Men | 77 | 88 | 145 | 175 | 485 |
| Women | 222 | 245 | 208 | 325 | 1000 |

- No observations.
a Informants where considered hypertensive if their systolic blood pressure was 140 mmHg or over, or their diastolic blood pressure was 90 mmHg or over, or they were taking medicine to lower blood pressure

Normotensive untreated: $\mathrm{SBP}<140 \mathrm{mmHg}$ and $\mathrm{DBP}<90 \mathrm{mmHg}$ and not taking medicine prescribed for high blood pressure.

Hypertensive controlled: $\mathrm{SBP}<140 \mathrm{mmHg}$ and DBP $<90 \mathrm{mmHg}$ and taking medicine prescribed for high blood pressure.

Hypertensive uncontrolled: $\mathrm{SBP} \geq 140 \mathrm{mmHg}$ or $\mathrm{DBP} \geq 90 \mathrm{mmHg}$ and taking medicine prescribed for high blood pressure.

Hypertensive untreated: $\mathrm{SBP} \geq 140 \mathrm{mmHg}$ or DBP $\geq 90 \mathrm{mmHg}$ and not taking medicine prescribed for high blood pressure.

Percentage with hypertension who were being treated and controlled, adults, by sex and age

| Aged 19 and over with hypertension |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Treatment and control rates | Age group |  |  |  | Total |
|  | 19-34 | 35-49 | 50-64 | 65+ |  |
|  | \% | \% | \% | \% | \% |
| Men |  |  |  |  |  |
| Drug treatment rate ${ }^{\text {a }}$ | [0] | [35] | 37 | 56 | 45 |
| Adequate control of $\mathrm{BP}^{\text {b }}$ | - | [93] | [57] | 49 | 53 |
| Women |  |  |  |  |  |
| Drug treatment rate ${ }^{\text {a }}$ | [60] | 53 | 55 | 63 | 60 |
| Adequate control of BPb | [92] | [70] | 67 | 38 | 48 |
| Base (unweighted) |  |  |  |  |  |
| Men with hypertension | 14 | 17 | 71 | 109 | 204 |
| Men on treatment for hypertension | - | 6 | 26 | 61 | 90 |
| Women with hypertension | 14 | 37 | 107 | 205 | 352 |
| Women on treatment for hypertension | n 5 | 19 | 60 | 130 | 208 |

- No observations.
[] Fewer than 30 observations.
a Percentage on drug treatment for hypertension as a proportion of those found in the survey to have hypertension (defined as a raised $B P(S B P \geq 140 \mathrm{mmHG}$ or $D B P \geq 90 \mathrm{mmHg}$ ) and / or on treatment for hypertension).
${ }^{b}$ Percentage on treatment with measured $B P<140 / 90$.

Observed systolic and diastolic blood pressure, and blood pressure level using $140 / 90 \mathrm{mmHg}$ definition, ${ }^{\text {a }}$ men, by country/region

Men aged 19 and over with valid blood pressure readings

| SBP, DBP and blood pressure level | Country/region |  |  |  |  |  |  | Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | England |  |  |  | Scotland | Wales | Northern |  |
|  | North | Central/ Midlands | South | All England |  |  |  |  |
| Men |  |  |  |  |  |  |  |  |
| Observed |  |  |  |  |  |  |  |  |
| SBP |  |  |  |  |  |  |  |  |
| Mean | 136 | 133 | 131 | 133 | 129 | 138 | 139 | 133 |
| Standard deviation | 19.8 | 14.6 | 21.1 | 19.3 | 19.1 | 18.1 | 19.3 | 19.2 |
| 5th Percentile | 106 | 111 | 103 | 106 | 105 | 107 | 110 | 106 |
| 10th Percentile | 113 | 115 | 109 | 113 | 108 | 116 | 115 | 112 |
| Median | 134 | 130 | 127 | 130 | 131 | 139 | 136 | 130 |
| 90th Percentile | 160 | 154 | 160 | 157 | 155 | 165 | 176 | 158 |
| 95th Percentile | 170 | 158 | 178 | 166 | 170 | - | - | 167 |
| DBP |  |  |  |  |  |  |  |  |
| Mean | 75 | 75 | 73 | 74 | 74 | 74 | 78 | 74 |
| Standard deviation | 11.8 | 10.1 | 12.0 | 11.5 | 10.9 | 13.2 | 11.7 | 11.5 |
| 5th Percentile | 56 | 56 | 53 | 55 | 53 | 51 | 61 | 55 |
| 10th Percentile | 59 | 60 | 58 | 59 | 58 | 54 | 63 | 59 |
| Median | 75 | 76 | 72 | 74 | 77 | 74 | 77 | 75 |
| 90th Percentile | 89 | 86 | 89 | 88 | 86 | 96 | 99 | 89 |
| 95th Percentile | 95 | 90 | 100 | 95 | 94 | - | - | 95 |
| BP level |  |  |  |  |  |  |  |  |
| Normotensive untreated ${ }^{\text {a }} 55$ |  | 50 | 67 | 59 | 61 | 40 | 53 | 58 |
| Hypertensive controlled | ed 10 | 16 | 6 | 10 | 14 | 8 | 3 | 10 |
| Hypertensive uncontrolled 9 |  | 12 | 5 | 8 | 8 | 18 | 11 | 9 |
| Hypertensive untreated | d 27 | 22 | 21 | 23 | 16 | 34 | 33 | 23 |
| Total with hypertension | n 45 | 50 | 33 | 41 | 39 | 60 | 47 | 42 |
|  |  |  |  |  |  |  |  |  |
| Base (unweighted) | 146 | 68 | 111 | 325 | 52 | 48 | 60 | 485 |

- No observations.
${ }^{\text {a }}$ Informants where considered hypertensive if their systolic blood pressure was 140 mmHg or over, or their diastolic blood pressure was 90 mmHg or over, or they were taking medicine to lower blood pressure.
Normotensive untreated: $S B P<140 \mathrm{mmHg}$ and $D B P<90 \mathrm{mmHg}$ and not taking medicine prescribed for high blood pressure. Hypertensive controlled: $\mathrm{SBP}<140 \mathrm{mmHg}$ and $\mathrm{DBP}<90 \mathrm{mmHg}$ and taking medicine prescribed for high blood pressure. Hypertensive uncontrolled: $\mathrm{SBP} \geq 140 \mathrm{mmHg}$ or $\mathrm{DBP} \geq 90 \mathrm{mmHg}$ and taking medicine prescribed for high blood pressure. Hypertensive untreated: $\mathrm{SBP} \geq 140 \mathrm{mmHg}$ or $D B P \geq 90 \mathrm{mmHg}$ and not taking medicine prescribed for high blood pressure.

Age-standardized systolic and diastolic blood pressure, and blood pressure level using $140 / 90 \mathrm{mmHg}$ definition, ${ }^{\text {a }}$ men, by country/region

Men aged 19 and over with valid blood pressure readings

| SBP, DBP and blood pressure level | Country/region |  |  |  |  |  |  | Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | England |  |  |  | Scotland | Wales | Northern |  |
|  | North | Central/ Midlands | South | $\begin{array}{r} \text { All } \\ \text { gland } \end{array}$ |  |  |  |  |
| Men |  |  |  |  |  |  |  |  |
| Age-standardised |  |  |  |  |  |  |  |  |
| SBP |  |  |  |  |  |  |  |  |
| Mean | 136 | 133 | 131 | 133 | 130 | 135 | 142 | 133 |
| Standard deviation | 19.6 | 14.5 | 21.4 | 19.3 | 19.2 | 19.8 | 20.4 | 19.4 |
| 5th Percentile | 106 | 111 | 102 | 106 | 107 | 96 | 111 | 106 |
| 10 th Percentile | 113 | 115 | 108 | 112 | 108 | 112 | 116 | 111 |
| Median | 134 | 130 | 127 | 130 | 130 | 138 | 145 | 131 |
| 90th Percentile | 160 | 154 | 160 | 157 | 153 | 162 | 177 | 158 |
| 95th Percentile | 169 | 157 | 179 | 166 | 170 | - | - | 167 |
| DBP |  |  |  |  |  |  |  |  |
| Mean | 74 | 75 | 73 | 74 | 73 | 74 | 78 | 74 |
| Standard deviation | 11.7 | 10.3 | 12.6 | 12 | 10.8 | 14.6 | 12.1 | 11.8 |
| 5th Percentile | 55 | 58 | 53 | 55 | 53 | 48 | 60 | 55 |
| 10 th Percentile | 59 | 60 | 55 | 59 | 58 | 52 | 62 | 59 |
| Median | 75 | 76 | 72 | 75 | 76 | 74 | 81 | 75 |
| 90th Percentile | 89 | 88 | 89 | 89 | 85 | 98 | 99 | 89 |
| 95th Percentile | 94 | 92 | 100 | 97 | 90 | - | - | 96 |
| BP level |  |  |  |  |  |  |  |  |
| Normotensive untreated ${ }^{\text {a }} 52$ |  | 49 | 65 | 57 | 53 | 42 | 45 | 56 |
| Hypertensive controlled | d 11 | 15 | 6 | 10 | 17 | 6 | 3 | 11 |
| Hypertensive uncontrolled 10 |  | 8 | 7 | 8 | 9 | 16 | 13 | 9 |
| Hypertensive untreated | d 27 | 27 | 22 | 25 | 22 | 36 | 39 | 25 |
| Total with hypertension | n 48 | 51 | 35 | 43 | 47 | 58 | 55 | 44 |
| Base (unweighted) | 146 | 68 | 111 | 325 | 52 | 48 | 60 | 485 |

- No observations.
${ }^{\text {a }}$ Informants where considered hypertensive if their systolic blood pressure was 140 mmHg or over, or their diastolic blood pressure was 90 mmHg or over, or they were taking medicine to lower blood pressure.
Normotensive untreated: $\mathrm{SBP}<140 \mathrm{mmHg}$ and $\mathrm{DBP}<90 \mathrm{mmHg}$ and not taking medicine prescribed for high blood pressure. Hypertensive controlled: $\mathrm{SBP}<140 \mathrm{mmHg}$ and $\mathrm{DBP}<90 \mathrm{mmHg}$ and taking medicine prescribed for high blood pressure. Hypertensive uncontrolled: SBP $\geq 140 \mathrm{mmHg}$ or DBP $\geq 90 \mathrm{mmHg}$ and taking medicine prescribed for high blood pressure. Hypertensive untreated: $S B P \geq 140 \mathrm{mmHg}$ or $D B P \geq 90 \mathrm{mmHg}$ and not taking medicine prescribed for high blood pressure.

Observed systolic and diastolic blood pressure, and blood pressure level using $140 / 90 \mathrm{mmHg}$ definition, ${ }^{\text {a }}$ women, by country/region

Women aged 19 and over with valid blood pressure readings

| SBP, DBP and blood pressure level | Country/region |  |  |  |  |  |  | Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | England |  |  |  | Scotland | Wales | Northern |  |
|  | North | Central/ Midlands | South | $\begin{array}{r} \text { All } \\ \text { gland } \end{array}$ |  |  |  |  |
| Women |  |  |  |  |  |  |  |  |
| Observed |  |  |  |  |  |  |  |  |
| SBP |  |  |  |  |  |  |  |  |
| Mean | 130 | 127 | 122 | 126 | 131 | 125 | 123 | 126 |
| Standard deviation | 21.9 | 20.1 | 18.9 | 20.5 | 21.1 | 20.9 | 15.9 | 20.5 |
| 5th Percentile | 100 | 101 | 97 | 99 | 103 | 99 | 101 | 99 |
| 10 th Percentile | 105 | 104 | 102 | 104 | 109 | 102 | 105 | 104 |
| Median | 126 | 124 | 120 | 123 | 127 | 120 | 123 | 123 |
| 90th Percentile | 162 | 153 | 149 | 154 | 170 | 154 | 147 | 154 |
| 95th Percentile | 172 | 165 | 158 | 165 | 177 | 174 | 162 | 165 |
| DBP |  |  |  |  |  |  |  |  |
| Mean | 74 | 73 | 72 | 73 | 76 | 71 | 74 | 73 |
| Standard deviation | 10.7 | 10.3 | 12.0 | 11.3 | 13.0 | 12.5 | 11.0 | 11.5 |
| 5th Percentile | 58 | 56 | 54 | 56 | 52 | 53 | 58 | 56 |
| 10th Percentile | 61 | 60 | 58 | 60 | 58 | 56 | 60 | 59 |
| Median | 75 | 73 | 72 | 73 | 77 | 69 | 73 | 73 |
| 90th Percentile | 86 | 87 | 87 | 87 | 94 | 90 | 93 | 88 |
| 95th Percentile | 93 | 90 | 94 | 93 | 96 | 97 | 98 | 94 |
| BP level |  |  |  |  |  |  |  |  |
| Normotensive untreated ${ }^{\text {a }} 60$ |  | 68 | 72 | 67 | 44 | 68 | 64 | 65 |
| Hypertensive controlled | ed II | 7 | 8 | 9 | 18 | 9 | 17 | 10 |
| Hypertensive uncontrolled 12 |  | 13 | 8 | 10 | 17 | 11 | 8 | 11 |
| Hypertensive untreated | d 17 | 12 | 12 | 14 | 21 | 11 | 10 | 14 |
| Total with hypertension | n 40 | 32 | 28 | 33 | 56 | 32 | 36 | 35 |
| Base (unweighted) | 282 | 122 | 271 | 675 | 98 | 107 | 120 | 1000 |

a Informants where considered hypertensive if their systolic blood pressure was 140 mmHg or over, or their diastolic blood pressure was 90 mmHg or over, or they were taking medicine to lower blood pressure.
Normotensive untreated: $S B P<140 \mathrm{mmHg}$ and $D B P<90 \mathrm{mmHg}$ and not taking medicine prescribed for high blood pressure.
Hypertensive controlled: $\mathrm{SBP}<140 \mathrm{mmHg}$ and $\mathrm{DBP}<90 \mathrm{mmHg}$ and taking medicine prescribed for high blood pressure.
Hypertensive uncontrolled: $\mathrm{SBP} \geq 140 \mathrm{mmHg}$ or $\mathrm{DBP} \geq 90 \mathrm{mmHg}$ and taking medicine prescribed for high blood pressure.
Hypertensive untreated: $\mathrm{SBP} \geq 140 \mathrm{mmHg}$ or $\mathrm{DBP} \geq 90 \mathrm{mmHg}$ and not taking medicine prescribed for high blood pressure.

Age-standardized systolic and diastolic blood pressure, and blood pressure level using $140 / 90 \mathrm{mmHg}$ definition, ${ }^{\text {a }}$ women, by country/region


- No observations.
${ }^{\text {a }}$ Informants where considered hypertensive if their systolic blood pressure was 140 mmHg or over, or their diastolic blood pressure was 90 mmHg or over, or they were taking medicine to lower blood pressure.
Normotensive untreated: $S B P<140 \mathrm{mmHg}$ and $D B P<90 \mathrm{mmHg}$ and not taking medicine prescribed for high blood pressure. Hypertensive controlled: $\mathrm{SBP}<140 \mathrm{mmHg}$ and $\mathrm{DBP}<90 \mathrm{mmHg}$ and taking medicine prescribed for high blood pressure.

Hypertensive uncontrolled: $\mathrm{SBP} \geq 140 \mathrm{mmHg}$ or $\mathrm{DBP} \geq 90 \mathrm{mmHg}$ and taking medicine prescribed for high blood pressure. Hypertensive untreated: $S B P \geq 140 \mathrm{mmHg}$ or $D B P \geq 90 \mathrm{mmHg}$ and not taking medicine prescribed for high blood pressure.

Table I3.7
Blood pressure levels in national surveys, adults, by sex and country

| Adults with valid blood pressure readings |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Blood pressure level Surn | Survey and country |  |  |  |
|  | LIDNS England ${ }^{\text {a }}$ | HSE ${ }^{\text {b }}$ | LIDNS Scotland ${ }^{\text {a }}$ | SHS ${ }^{\text {b }}$ |
|  | 19+ | 16+ | 19+ | 16+ |
| Men |  |  |  |  |
| Mean SBP ( mmHg ) | 133 | 131 | 130 | 132 |
| Mean DBP (mmHg) | 74 | 74 | 73 | 75 |
| Prevalence of hypertension (\%) ${ }^{\text {c }}$ | $)^{\text {c }} \quad 43$ | 32 | 47 | 33 |
| Women |  |  |  |  |
| Mean SBP (mmHg) | 126 | 126 | 130 | 127 |
| Mean DBP (mmHg) | 73 | 73 | 76 | 74 |
| Prevalence of hypertension (\%) ${ }^{\text {c }}$ | $)^{\text {c }} 34$ | 30 | 56 | 32 |
| Base (unweighted) |  |  |  |  |
| Men | 325 | 4108 | 52 | 1933 |
| Women | 675 | 5075 | 98 | 2538 |

${ }^{\text {a }}$ Age-standardised to the LIDNS age distribution.
${ }^{\text {b }}$ HSE: Health Survey for England 2003; SHS: Scottish Health Survey 2003.
c Hypertension defined as $B P \geq 140 / 90$ and/or on medication to lower blood pressure.

Table I3.8
Percentage with hypertension who were being treated or controlled in national surveys, adults aged 65 and over, by sex and country

Adults aged 65 and over with hypertension

| Treatment and control rates | Survey |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | LIDNS | HSE ${ }^{\text {a }}$ | HSE ${ }^{\text {a }}$ | HSE ${ }^{\text {a }}$ | SHS ${ }^{\text {a }}$ |
|  | 65+ | 65+ | 65-74 | 75+ | 65+ |
|  | \% | \% | \% | \% | \% |
| Men |  |  |  |  |  |
| Drug treatment rate ${ }^{\text {b }}$ | 56 | 50 | 51 | 49 | 51 |
| Adequate control of BP' | 49 | d | 48 | 33 | 44 |
| Women |  |  |  |  |  |
| Drug treatment rate ${ }^{\text {b }}$ | 63 | 55 | 55 | 55 | 60 |
| Adequate control of BP' | 38 | d | 45 | 30 | 45 |
| Base (unweighted) |  |  |  |  |  |
| Men with hypertension | 109 | 604 | 370 | 234 | 182 |
| Men on treatment for hypertension | 61 | 304 | 189 | 115 | 93 |
| Women with hypertension | 205 | 804 | 397 | 407 | 239 |
| Women on treatment for hypertension | on 130 | 442 | 218 | 224 | 143 |

${ }^{\text {a }}$ HSE: Health Survey for England 2003, SHS: Scottish Health Survey 2003.
${ }^{\text {b }}$ Percentage on drug treatment for hypertension as a proportion of those found in the survey to have hypertension (defined as a raised BP (SBP $\geq 140 \mathrm{mmHG}$ or DBP $\geq 90 \mathrm{mmHg}$ ) and / or on treatment for hypertension).
c Percentage on treatment with measured $\mathrm{BP}<140 / 90$.
${ }^{\text {d }}$ Results not available for this age group.

Table I3.9
Blood pressure levels in national surveys, children, by sex, age and country

| Blood pressure level | LIDNS England |  | HSE 2001/02 ${ }^{\text {a }}$ |  | LIDNS (all) ${ }^{\text {b }}$ |  | SHS 2003 ${ }^{\text {b }}$ |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | $\begin{array}{r} 4-10 \\ \mathrm{mmHg} \end{array}$ | $\begin{array}{r} \mathrm{II}-18 \\ \mathrm{mmHg} \end{array}$ | $\begin{array}{r} 5-9 \\ \mathrm{mmHg} \end{array}$ | $\begin{array}{r} 10-15 \\ \mathrm{mmHg} \end{array}$ | $\begin{array}{r} 4-10 \\ \mathrm{mmHg} \end{array}$ | $\begin{array}{r} \mathrm{II}-18 \\ \mathrm{mmHg} \end{array}$ | $\begin{array}{r} 5-9 \\ \mathrm{mmHg} \end{array}$ | $\begin{array}{r} 10-15 \\ \mathrm{mmHg} \end{array}$ |
| Boys |  |  |  |  |  |  |  |  |
| Mean SBP | 103 | 115 | 104 | 113 | 102 | 114 | 104 | 112 |
| Mean DBP | 62 | 64 | 61 | 62 | 62 | 64 | 63 | 61 |
| Girls |  |  |  |  |  |  |  |  |
| Mean SBP | 104 | 108 | 103 | 110 | 104 | 109 | 104 | 108 |
| Mean DBP | 64 | 64 | 63 | 64 | 64 | 63 | 66 | 64 |
| Base (unweighted) |  |  |  |  |  |  |  |  |
| Boys | 46 | 62 | 1238 | 1580 | 63 | 99 | 229 | 307 |
| Girls | 69 | 65 | 1243 | 1576 | 90 | 117 | 239 | 336 |

${ }^{\text {a }}$ HSE: Health Survey for England 200I/02 (the most recent BP measurement in children in England before LIDNS); SHS: Scottish Health Survey 2003. HSE 200 I/02 Dinamap measurements of BP were converted to Omronequivalent readings.
${ }^{\text {b }}$ Bases were too small to permit analysis of results from LIDNS children in Scotland alone.

