

Investigating outcomes in the management of hypertension by specialists in a University Hospital

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BACKGROUND

Hypertension is an established risk factor for cardiovascular diseases. The risk associated with hypertension amplified with existence of other risk factors and long-term co-morbidities. This makes risk assessment and outcome evaluation essential aspects of hypertension and cardiovascular disease management. This study used explicit criteria to systematically review outcomes in the management of hypertension at the medical outpatient clinic of the University of Port Harcourt Teaching Hospital, Nigeria.

METHOD

A cross-sectional survey involving the administration of interviewer-administered questionnaires and review of records of 182 randomly selected patients attending the medical out-patients' clinic who met the eligibility criteria was done. Outcome measured were patients' compliance with treatment, prevalence of risk factors and long-term co-morbidities, trends in patients' blood pressure and laboratory indices over three consecutive visits. Appropriate descriptive and inferential analysis were conducted using statistical package for social sciences (SPSS) version 20.0.

RESULTS

Persisting risk factors among hypertensive patients were smoking (2.2%), excessive alcohol consumption (13.7%), overweight (73.1%) and high low density lipoprotein cholesterol (81.0%) while the commonest co-morbidity was diabetes (26.9%). Progressive decline in the prevalence of uncontrolled BP were observed among the cohort over the last 3 visits (63.7 60.4 54.4%). The effect was however not statistically significant with adjusted odds of still having uncontrolled BP in index visit compared to the 2 previous visits being 0.78[0.51, 1.19] and 0.68[0.45, 1.03] respectively. Report also showed no statistically significant association between coexistence of risk factors and uncontrolled BP but a converse was reported with poor-compliance with antihypertensive medications ($p = 0.004$). Calcium channel blockers formed at least part of the prescription in 61% of patients and the most frequent physicians' recommendation following visits was a continuation on current line of management (64.3%).

CONCLUSION

Poor patient compliance with management plan is a significant hindrance to BP control. Findings also suggest benefits in regular follow-up of hypertensive patients. We recommend more emphasis on educating patients on drug compliance and provision of preventative services for the control of risk factors and improvement in health outcomes.

KEYWORDS

Clinical Audit; Outcome; Hypertension Management; Specialist Clinic; UPTH, Nigeria.

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