

FACTSHEET

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Hypertension and Risk of Dementia

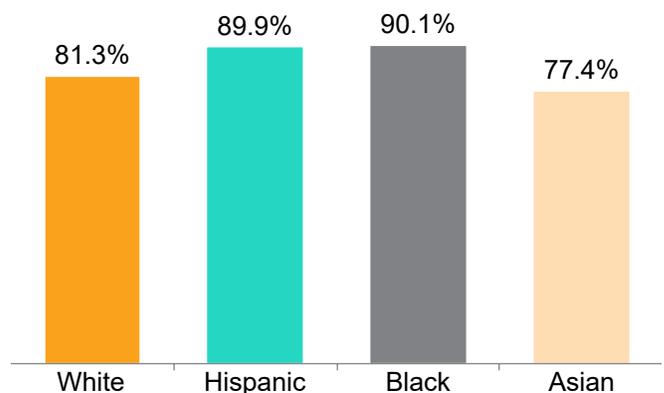
Hypertension affects many Americans, and it disproportionately affects people of color and traditionally underserved communities.

- According to the American Heart Association, an estimated 121.5 million adults in the United States have hypertension.
- Black Americans and American Indian/Alaska Natives are about 30% more likely to have hypertension than Whites.
- Black and Hispanic Americans with hypertension are less likely to have their blood pressure controlled than their White peers.

Addressing high blood pressure — by preventing, delaying, or managing hypertension — may reduce the risk of cognitive decline.

- Hypertension is a risk factor not only for stroke and heart disease, but also for cognitive impairment, including vascular dementia.
- A recent study demonstrated that the risk of developing mild cognitive impairment (MCI) among older adults can be significantly reduced through intensive blood pressure control.
- Additionally, many risk factors for developing hypertension are also risk factors for cognitive decline. These include smoking, diabetes, and obesity.

Percent of Adults with Hypertension Whose Hypertension is Uncontrolled* By Race/Ethnicity



*Consistent with a recent clinical trial, uncontrolled hypertension is defined as those with hypertension who have systolic blood pressure \geq 120 mmHg.

What Can Public Health Do?

- Build public knowledge about cognitive health across the life course.
- Especially in under-resourced communities, expand access to and use of (effective) interventions that support healthy lifestyles and management of chronic conditions.
- Educate health care professionals about managing co-morbidities as a way to reduce risk for cognitive decline.
- Use data from surveillance strategies and other sources to identify at-risk populations and inform the public health response to cognitive health and impairment.

For more information, visit: alz.org/publichealth.