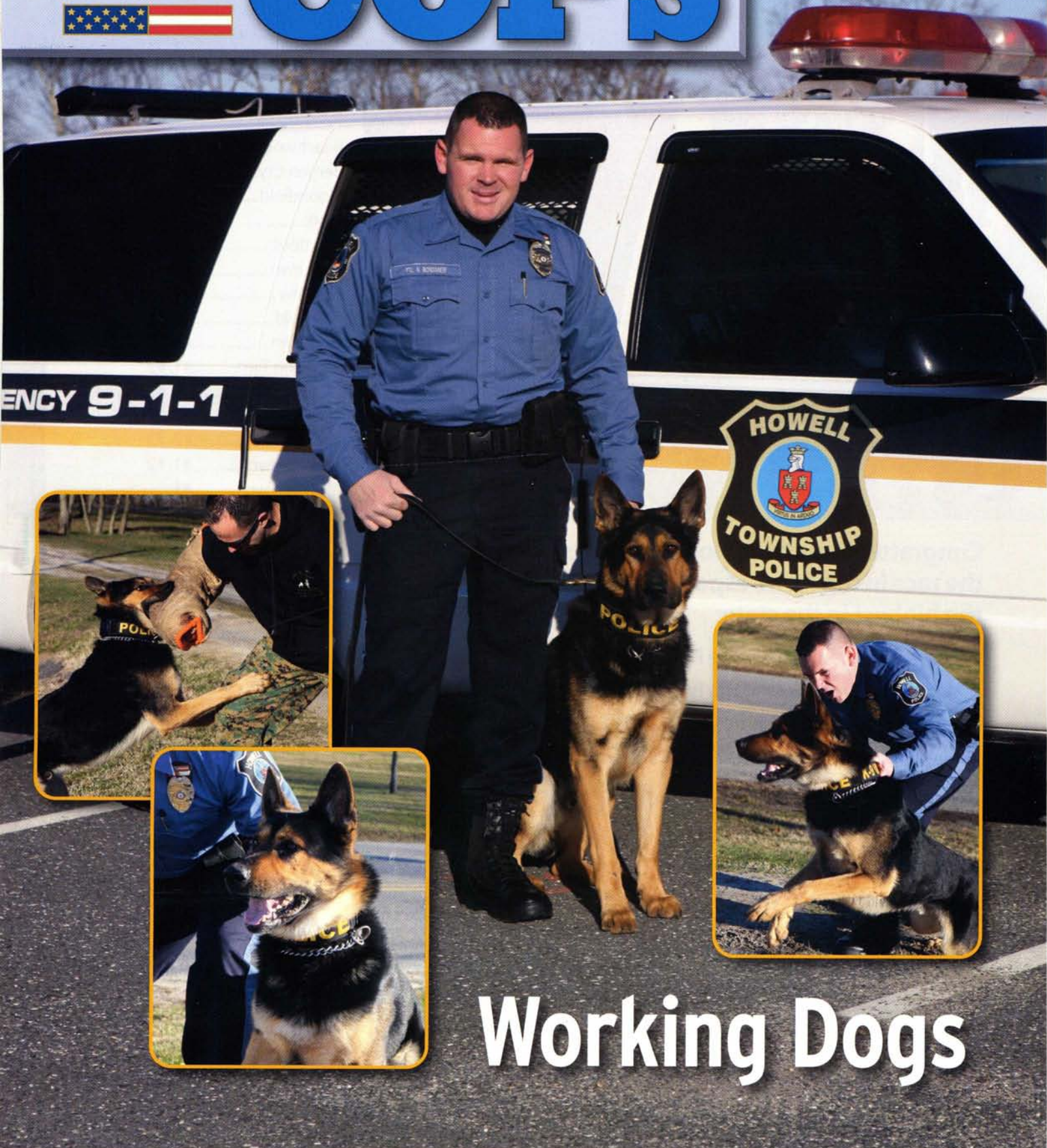


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Watch for hypertension



Matt Brzycki

■ BY MATT BRZYCKI

High blood pressure – aka “hypertension” – is much more prevalent than many people think. In fact, it’s estimated that about 50 million people in America – and about one billion people on the planet – have hypertension. Also of note is the fact that the prevalence of hypertension increases with age and is higher in men than in women and blacks than in whites.

BLOOD PRESSURE: WHAT IT IS

When your heart forces blood through your arteries, the fluid is under pressure.

Your blood pressure is a measure of the force that’s exerted by your blood against the arterial walls. Blood pressure has two readings: systolic and diastolic. Your systolic pressure is the maximum pressure in your arteries when your ventricles contract, sending blood throughout your body; your diastolic pressure is the maximum pressure in your arteries when your ventricles recover, refilling with blood.

Blood pressure is measured in milliliters of mercury. An example of a blood-pressure reading would be 124/82 in which the upper number (124) is the systolic pressure and the lower number (82) is the diastolic pressure.

The Seventh Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure defined several categories of resting blood pressure for adults: Normal is a systolic pressure of less than 120 and a diastolic pressure of less than 80; prehypertension is a systolic pressure of 120 to 139 or a diastolic pressure of 80 to 89; and hypertension is a systolic pressure of at least 140 or a diastolic pressure of at least 90.

If your systolic and diastolic pressures are in different categories, your classification is based on the higher category. For instance, if your systolic pressure is 119 (normal) and your diastolic pressure is 90 (hypertension), it would be classi-

fied as hypertension.

It’s important to understand that your blood pressure varies throughout the course of the day. To get a clear picture of your blood pressure, then, multiple readings should be taken on multiple days. To increase the accuracy of the reading, you should be seated quietly for at least five minutes. In addition, the cuff size should be appropriate for your arm size. (A cuff that’s too small will yield an elevated reading.) Finally, those who smoke cigarettes and/or consume caffeine should refrain from doing so for at least 30 minutes prior to the reading.

Along these lines, you should also be aware of a phenomenon called “White Coat Syndrome” or “White Coat Hypertension.” This refers to an elevation in blood pressure (and heart rate) that some people experience in a medical setting – where doctors and nurses wear white coats – due to anxiety. The phenomenon could be a factor in borderline readings but not in high readings such as a diastolic pressure of 100 or more.

Individuals who have chronic hypertension should consult with a physician. By the way, the same holds true for those who have chronic hypotension (low blood pressure).

CONCERNS WITH HYPERTENSION

As blood pressure rises, so does the number of cardiovascular problems. For example, hypertension increases the risk of heart disease and stroke which are two of the three leading causes of death in the United States. Here’s a statistic that should hit close to home: Research shows that cardiovascular disease events account for about 20 percent of on-duty deaths among police officers.

Hypertension can also result in damage to the eyes including blindness. Moreover, hypertension can result in kidney disease and kidney failure.

Often, hypertension has no noticeable warning signs or symptoms until other serious problems arise. For this reason, hypertension is sometimes called the “silent killer.” Therefore, it’s critical that you have your blood pressure checked on a regular basis.



TREATMENT

Because of the health concerns, the treatment of hypertension is highly important. There are two ways that hypertension can be treated. One way is through lifestyle modifications. Here are some modifications that you can make:

- Maintain a healthy weight. Being overweight/obese is associated with hypertension.
- Do physical activities. In particular, aerobic training is helpful in reducing blood pressure.
- Eat a healthy diet. It’s important to consume plenty of fruits, vegetables and low-fat foods.
- Get less sodium and more potassium. Improving your sodium:potassium ratio can reduce your blood pressure.
- Limit the use of alcohol. A good goal is to have no more than two drinks per day.

The second way to treat hypertension is with medications. Several types are prescribed, often in combination such as beta blockers and diuretics.

THE BOTTOM LINE

Hypertension is easy to detect and can be treated with lifestyle modifications and, if needed, medications. ♥

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