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**Unhealthy behaviors and risk of uncontrolled hypertension among treated individuals-
The CONSTANCES population-based study**

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ABSTRACT

ABSTRACT - From an epidemiological standpoint, quantifying the individual and the combined effect of lifestyle factors on uncontrolled blood pressure (BP) deserves further evaluation. We aimed to examine the individual and combined associations between unhealthy behaviors and uncontrolled hypertension among treated hypertensive adults. Cross-sectional analysis was conducted using data from CONSTANCES, an ongoing French population-based cohort study. Uncontrolled BP was defined as mean systolic BP ≥ 140 mmHg and/or mean diastolic BP ≥ 90 mmHg. Unhealthy behaviors were considered as heavy alcohol consumption, low or medium adherence to dietary recommendations, sedentary physical activity level, and overweight. A total of 10,710 hypertensive treated volunteer participants were included and 56.1% had uncontrolled hypertension; of them, 2.0%, 24.5%, 54.0% and 19.5% exhibited 0, 1, 2 or ≥ 3 unhealthy behaviors respectively. In men, there was an increased odds of uncontrolled hypertension with heavy alcohol drinking compared to light-or-never (adjusted odds ratio 1.34, 95% CI 1.10–1.63), with low as well as with medium adherence to dietary recommendations compared to high ($p < 0.05$ for both), and with overweight or obesity compared to a normal body mass index ($p \leq 0.001$ for both). In addition, men reporting a combination of ≥ 3 unhealthy behaviors compared to none, had an increased odds of hypertension of 1.67 (95% CI 1.09–2.53). Unhealthy behaviors described as, heavy alcohol consumption, non-adherence to dietary recommendations and overweight are associated with uncontrolled hypertension, at the individual and combined level, and particularly in men. Improvement of modifiable lifestyle factors could offer considerable benefits in the management of hypertension.

KEYWORDS: -

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