

**EDITORIAL****Hypertension: High and Rising Burden but Getting Less Attention****Abraham Haileamlak, MD, Professor of Pediatrics and Child Health**

Hypertension or raised blood pressure is a leading cause of cardiovascular diseases worldwide (1). The proportion of hypertension in the global burden of diseases has increased from about 4.5% (0.9 billion adults) in 2000, to 7% in 2010 and was projected to rise to 1.6 billion adults in 2025 (2,3). Being a disease itself, hypertension is the leading global risk factor for cardiovascular, renal, neurological and ophthalmologic diseases. This makes hypertension the single most important cause of morbidity and mortality globally requiring the urgent need of action to address the problem (4).

Until recently, there has been wrong belief that hypertension is associated with more affluent regions of the world. However, studies showed that more hypertensive adults are living in low and middle-income (LMICs) countries, it is estimated that 3 out of 4 hypertensive persons will be living in LMICs by 2025 (2). Either because of this wrong assumption or factually, high blood pressure appeared non-existent in Africa in the early twentieth century. However, estimates now show that in some settings more than 40% of adults have hypertension (5). This trend has been strongly linked with changes in individual and societal lifestyle.

In Ethiopia, the prevalence of hypertension was reported to be 4.6% in 2006. However, the recent Ethiopia's NCDI commission report showed an average prevalence of 16% (6). Hypertension was also among the leading risk factors for stroke and heart diseases in Ethiopia (6).

Though prevention is critically important, effective and up-to-date management is extremely important for the large and rapidly growing number of individuals who already have hypertension. Prevention and management of hypertension involves lifestyle changes and drug treatment. However, the low awareness, treatment and control of hypertension in Ethiopia are major public health concerns. As a result, most of the cases with hypertension were never diagnosed as having hypertension or do not have access to quality health care services (7). Therefore, it is advisable to focus on lifestyle measures that are useful both in the control of high blood pressure and in risk factor management. These measures include weight reduction, increase in physical activity, reduction in salt intake, moderation of alcohol intake and cessation of smoking. As regards drug treatment, several classes of drugs are recommended for the treatment of hypertension, and this is dependent on co-

existing disease conditions and on the presence or absence of complications. Often, more than one drug is necessary to achieve control.

The current issue of the journal, the fourth regular issue for the year 2019, contains an editorial, twelve original articles and two case reports focusing on various topics. Three of the original articles in this issue deal with hypertension or possible complication.

I invite readers to read through these articles and appreciate or utilize the contents. I also urge readers to forward comments and suggestions to the editor or the corresponding authors.

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