

BLOOD PRESSURE LEVELS TARGETED BY THE OUTPATIENTS' PRACTICE PHYSICIANS

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Objective: In that study we evaluated the physicians' knowledge about the blood pressure target levels in patients with uncomplicated or complicated hypertension.

Design and methods: The study involved 1110 physicians (926 general practitioners /GPs/ and 184 outpatient specialists treating cardio-vascular patients). The GPs treated 204 152 hypertensive patients, 174 959 of them were on antihypertensive therapy. 56,76% of all patients being followed and treated by outpatient medical specialists were with hypertension – 35,5% with uncomplicated and 44.9% with complicated essential hypertension. All data were collected by a questionnaire filled in between March and June 2003.

Results: The specialists believed that 52,21% of their hypertensive patients maintained the blood pressure control below the target levels.

Physicians' knowledge about the targeted blood pressure levels were as follows:

1) The uncomplicated hypertension: 96,33% of GPs and 97,2% of specialists knew that the target levels were <140/90 mmHg and 3,67% of GPs and 2,8% of specialists thought they were >140/90 mmHg.

2) The complicated hypertension: 48,04% of GPs and 60,12% of specialists knew that the target levels were <130/85 mmHg and 51,96% of GPs and 39,88% of specialists thought that they were >130/85 mmHg.

3) The hypertension with diabetes: 66,86% of GPs and 78,58% of specialists knew that the target levels were <130/80 mmHg and 33,14% of GPs and 21,42% of specialists thought that they were >130/80 mmHg.

Conclusions: These study results showed that the physicians' knowledge about the blood pressure targets was not satisfactory. All outpatients' practice doctors were well educated about the target levels in uncomplicated hypertension however our results showed considerable lack of awareness for the blood pressure target levels among physicians considering the treatment of complicated hypertension or treatment of hypertension with diabetes. A striking difference appeared concerning the physician's awareness when analyzing the treatment of complicated hypertension in comparison to the treatment of hypertension with diabetes. The occurring of this difference was mainly due to the better diabetes "how-to-treat" education among all physicians. It seemed to appear an urgent need for improvement of their knowledge about all hypertension's complications.