HYPERTENSION AMONG BLACKS

I-3 Body Weight
I-4 Endocrine Factors
I-6 Environmental Influences
I-7 Epidemiology
I-28 Genetics
I-29 Heart Disease
I-32 Juvenile Hypertension
I-35 Pregnancy
I-36 Renal Hypertension
I-41 Salt
I-42 Stress
I-44 Cerebrovascular Disease
I-47 Sympathetic Nervous System
I-48 Treatment
I-51 Miscellaneous

Body Weight


Chest photofluorograms of 24,390 residents of Georgia. For all race-sex-age groups, combined mortality was about 12% greater for the fattest person. Mortality from diabetes was most strikingly associated with fatness, followed in order by coronary heart disease, accidents, strokes, and hypertension. Excessive mortality among fat persons was generally more marked for whites than for blacks.


The relevance of body build to cardiovascular disease has been amply documented for both hypertension and coronary heart disease. Multiple regression equations have been developed, using the basic Princeton measurements and some others that afford satisfactory predictions of somatotype for young white and Negro men, young Chinese men and women, and middle-aged white men.

Hames CG: Natural history of essential hypertension in Evans County, Georgia. Postgrad Med 56:119, 1974

The association of weight with blood pressure was a highly significant feature in the white males, white females, and black females, but the relationship in black males was more obscure. Maintaining an ideal weight from early youth may be an important preventive means in the control of hypertension.

Harburg E, Schork MA, Erfurt JC, Schull WJ, Chape C: Heredity, stress and blood pressure, a family set method. II. Results of blood pressure measurement. J Chronic Dis 30:649, 1977

Statistically significant relations were obtained between elevated pressure, both systolic and diastolic, and sex, race, age, and percent overweight. Age and percent overweight appear as the most consistent predictors of blood pressure variance across sex-race groups among all continuous variables studied.