3 tips for doctors to boost Black women’s hypertension movement

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Hypertension is, quite literally, out of control in the U.S. This isn’t so much because heart disease is the leading cause of death—that’s been true for decades—but because about half of U.S. adults now have high blood pressure, a major risk factor for heart disease.

Of course, some groups of patients have it much worse than others because of the structural U.S. health inequities that have been laid bare by the COVID-19 pandemic. For example, the prevalence of hypertension is nearly 40% higher in Black women than in white women. It’s also more than one-fifth higher in Black men than in white men. And then there’s this: About 80% of Black adults with high BP do not have it controlled to goal.

Black women often make critical health care decisions and food choices for their families. That is one reason why the AMA—in collaboration with the AMA Foundation, the Association of Black Cardiologists, the American Heart Association, the Minority Health Institute and the National Medical Association—launched the campaign: to empower Black women to put their heart health first and provide personalized resources to help them measure and track their BP numbers.

The campaign’s inaugural “Homecoming from the Heart” event, streamed live from the campus of Morehouse School of Medicine helped demonstrate what Black women and their “squads”—groups of likeminded women committed to putting their heart health first—can do to improve their heart health right away.

It had important lessons for physicians too.
The physician’s voice is crucial

The campaign encourages Black women to take the pledge to manage their blood pressure, as well as set a goal, monitor their BP at home, activate a personalized wellness plan and join a “squad” of women committed to putting their heart health first.

But they need help from their physicians, and the “Homecoming from the Heart” event highlighted three key efforts physicians should undertake.

**Boost awareness.** “Unless you know that there’s a problem, you can’t necessarily seek the resources to help fix it,” said Melvin Echols, MD, director of the Cardiovascular Disease Fellowship Program at Morehouse School of Medicine. He added that women shouldn’t assume hypertension is exclusively an older person’s disease.

“Kids in their 20s can have high blood pressure, but also kids in their teens can have high blood pressure,” Dr. Echols noted.

The AMA has created a toolkit to help health professionals raise awareness of the Release the Pressure campaign and ensure every American has access to the conditions, resources and opportunities to achieve optimal BP.

**Encourage acceptance.** “We have so many people in our community who have hypertension, and it needs to be treated, but we don’t accept that that’s an issue for us,” Dr. Echols said. “So just as much as awareness is a huge issue, you must accept the fact that you have hypertension.”

For physicians, this can mean correcting faulty assumptions patients may have about what it takes to get hypertension under control.

Many patients will say, “Oh my God, I need medicines.” But, Dr. Echols noted, that’s not always the case. There are simple dietary and other lifestyle changes that suffice in the early stages.

**Inspire action.** Taking action means having a plan, and a plan necessarily involves one’s physician, but there are many Black women and men presenting with heart failure who haven’t seen a doctor in years.

“That’s a stressful feeling to take on” as a doctor, Dr. Echols said. “But it’s encouraging to know whenever we reach those people and they’re able to start doing what they’re supposed to do … you see improvements. So there’s nothing greater.”
Stephanie Johnson, the AMA’s vice president of communications and product strategies discussed heart health as a priority for Black women during this recent episode of the “AMA Moving Medicine” show.

Learn about seven ways to help your Black patients control high blood pressure.

Other tips for addressing hypertension are available through AMA MAP BP™, a leading evidence-based quality improvement program that provides a clear path to significant, sustained improvements in BP control. With AMA MAP BP, health care organizations can increase BP-control rates quickly. The program has demonstrated a 10% increase in BP control in six months with sustained results at one year.