



## NEWS RELEASE

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### **HIGH CHOLESTEROL AND HIGH BLOOD PRESSURE PUT BOTH WHITES AND BLACKS AT INCREASED RISK FOR STROKE**

*July 16, 2005. San Juan, Puerto Rico.* Whether you are male, female, White, or Black, if you have high blood pressure **and** high cholesterol, you are at greater risk of heart disease and stroke than those without these combined conditions.

Data released today from ISHIB2005 and a study conducted by Daniel T. Lackland, DrPH from the Medical University of South Carolina indicate that a significant number of adults have elevated blood pressure and elevated cholesterol. These combined conditions were found to increase health risks for heart disease and stroke in all populations.

In this analysis of US-based epidemiologic cohort studies, Black men and women had the highest values of total cholesterol, with 13.9% of Black women and 8.5% of Black men having the highest combined rates of systolic blood pressure (SBP) and total cholesterol (TC), compared to 7.6% and 5.0% for White women and men, respectively. The greatest disease risk was identified with the highest categories of SBP and TC for all four race-sex groups. The greatest risks for the higher levels and the higher prevalence of elevated SBP and TC for Black men and women increase the disease burden. These results emphasize the need for all segments of the population, with particular focus on Black men and women, to treat and control SBP and TC in order to reduce the cardiovascular disease outcomes.

The study, known as the Black Pooling Project, emphasizes the need for control of high cholesterol and hypertension to significantly reduce the incidence of stroke and cardiovascular disease. In previous studies, high cholesterol has been established as a risk factor for coronary artery disease,<sup>1-3</sup> but it has not been consistently considered a risk factor for stroke. Recently, however, a study by Horenstein et al, found that cholesterol levels could predict stroke mortality among women.<sup>4</sup> Lackland's study shows that the combined risk factors of cholesterol levels as well as high blood pressure put both men and women from all populations in double jeopardy for heart disease.

“The occurrence of these combined conditions indicates an acute need for early diagnosis and aggressive treatment,” stated Dr. Lackland. “While other studies have shown similar findings, this study is the largest of its kind and covers a longer follow-up period to provide more accurate comparisons between males/females as well as among ethnic groups.”

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To conduct this study, Lackland and colleagues performed a person-level, analysis by examining large US epidemiologic studies with both Black and White cases. Black-White comparisons were performed on coronary heart disease (CHD) incidence and mortality, exposure-outcome relationship, patterns of co-morbidity, and population attributable risks. Studies included in the analysis were: the First National Health and Nutrition Examination Survey (NHANES I) Epidemiological Follow-up Study; the NHANES II Mortality Follow-up Study; the Charleston Heart Study; and the Evans County Heart Study.

Although death rates from CHD have declined for all major demographic groups of the US population over the past three decades, a recent slowing of the decline has been seen among Blacks and among women. Because many studies had small, if any, samples including Blacks, comparisons between Black-White differences could not be made with accuracy. The current study addressed this absence of data and represented all four major groups: Black men and women and White men and women. The Black Pooling Project provided a total sample of 26,913: 1,934 Black men; 2,725 Black women; 9,888 White men; and 12,366 White women.

The Black Pooling Project is a clinical trial funded by the National Heart, Lung, and Blood Institute of the National Institute of Health at the Department of Health and Human Services. Principal investigator is Daniel T. Lackland, DrPH and the sponsoring institution is the Medical University of South Carolina in Charleston, South Carolina.

*These research findings were presented at ISHIB2005. The abstract was a blue ribbon presentation during ISHIB2005 Plenary Session I at 1:00 PM, July 16, 2005. ISHIB2005, an annual gathering of healthcare professionals from around the world, is jointly sponsored by the nonprofit ISHIB and ASH (American Society on Hypertension) and is taking place at the Caribe Hilton Hotel in San Juan, Puerto Rico during July 15-18.*

*ISHIB (the International Society on Hypertension in Blacks) is a unique professional medical membership organization devoted to improving health and life expectancy of ethnic populations. ISHIB was founded in Atlanta, Georgia, in 1986 to respond to the problem of high blood pressure among ethnic populations. Each year, its international interdisciplinary conference presents advancements in the treatment and prevention of diseases concomitant to hypertension. In addition to US conference locations, other sites for the conference have included Toronto, London, the US Virgin Islands, Kenya, Cameroon and Brazil.*

## **References**

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