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Title: Magnitude and determinants of uncontrolled blood pressure in treated hypertensive patients attending tertiary hospital in north Ethiopia: hospital based cross-sectional survey

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**Background:** Hypertension is an important public health problem worldwide. Uncontrolled blood pressure occurred when hypertension is poorly controlled. Uncontrolled blood pressure predisposes patients for cardiovascular, cerebrovascular and renal accidents. There was lack of plethora of data on uncontrolled blood pressure in developing countries. The current study sought to determine the magnitude and predicting factors of uncontrolled blood pressure in hypertensive patients attending Gondar university hospital, Ethiopia.

**Methods:** A hospital based cross-sectional survey has been conducted in GUH from July 2015 to March 2016. All hypertensive patients on medication and appointed for follow-up during the study period were prospectively followed and the Blood pressure was measured during follow-up. All the data entered into and analyzed with SPSS software version 20 for windows. Descriptive statistics and Binary logistic regression was computed to determine the predictors of uncontrolled blood pressure. A p-value of <0.05 was set at priori with 95% confidence interval to test the level of significance.

Results: Of the total 578 hypertension patients, 543 (93.9%) full filled the study criteria and included in the final analysis. The mean age of the participants was 55.96±14.6 years. Nearly two-third (58.2%) of the participants in the study were females. Almost one-tenth (11.4%) of the respondents had an Uncontrolled blood pressure. High salt intake carried six times more risk of uncontrolled blood pressure than normal consumption (AOR=6.271 [2.047-19.214], CI=95%). Individuals between age group of 31 and 40 years (AOR=0.136 [0.029-0.650], 51-60 (AOR=0.261 [0.079-0.861] and >70 (AOR=0.249 [0.069-0.896], CI=95%) were having lower risk as compared to young age group,<30years. However, the number of regimen, sex, residence and comorbidities were not related with uncontrolled blood pressure.

**Conclusion:** blood pressure control was relatively higher in the set-up. High salt intake was strongly linked with uncontrolled blood pressure. Individuals with high salt intake should be curiously instructed and strictly followed for their medication experience and disease knowledge.

## **Biography**

Tadesse Melaku Abegaz is clinical pharmacy instructor and mentor at University of Gondar School of pharmacy department of clinical pharmacy. He has completed his bachelor of pharmacy at university of Gondar. Currently, I am a candidate of master of clinical pharmacy at university of Gondar. I have published 5 papers that are pubmed indexed.

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