

## **SAND abstract No. 79 from the BEACH program 2004–05**

### **Subject: Hypertension and dyslipidaemia—comorbidity and management in general practice patients**

**Organisation supporting this study:** Pfizer Australia Pty Ltd

**Issues:** The prevalence of diagnosed hypertension and/or dyslipidaemia in patients attending general practice; comorbidities experienced by patients with diagnosed hypertension and/or dyslipidaemia; current medications used to treat diagnosed hypertension and/or dyslipidaemia; other treatments used for diagnosed hypertension and/or dyslipidaemia.

**Sample:** 2,874 respondents from 97 GPs; data collection period: 18/1/2005–21/2/2005.

**Method:** Detailed in the paper entitled 'SAND Method 2004–05' on this website:  
<[http://www.fmrc.org.au/publications/SAND\\_abstracts.htm](http://www.fmrc.org.au/publications/SAND_abstracts.htm)>.

### **Summary of results**

The age-sex distribution of respondents was similar to the distribution of the total BEACH sample, with the majority of patients (56.9%) being female. Respondents aged between 45 and 64 years accounted for 29.3% of the sample, and 27.2% of the respondents were aged 65 years or more.

Diagnosed hypertension was present in 1,050 patients (28.1%, 95% CI: 25.1–31.0), while 24.0% of patients had diagnosed dyslipidaemia (95% CI: 20.9–27.0). Both conditions were present in 423 of these patients (15.2% of the 2,789 encounters where the status of both conditions was known). Just over one-third of patients (36.7%) had either hypertension and/or dyslipidaemia.

The presence of listed comorbidities was questioned for patients with diagnosed hypertension and/or dyslipidaemia. Of the 832 respondents diagnosed with hypertension and/or dyslipidaemia who completed the question on comorbidities, half (49.9%) did not have any of the listed conditions (49.9%). The most common condition listed as a comorbidity was diabetes (27.0%), followed by ischaemic heart disease (21.9%). Heart failure (8.1%), peripheral vascular disease (6.5%), stroke (6.3%) and renal disease (5.5%) were less common.

Details regarding the use of 14 specified medications were also asked of patients with diagnosed hypertension and/or dyslipidaemia. Four of the medications listed were lipid-lowering medications, and ten were anti-hypertensives. The majority of patients with hypertension and/or dyslipidaemia who responded to the question on medications (n = 1,032) were taking only one medication (39.9%), while 31.3% of patients were taking two of the medications listed. There were 12.2% of patients not taking any of the listed medications.

Of the listed lipid-lowering medications, the most frequently used was atorvastatin (23.7%). Other statins were used by 24.0% of patients. The most commonly used anti-hypertensives were ACE inhibitors (31.3%), followed by beta-blockers (17.3%) and angiotensin-2 receptor antagonists (13.2%).

For the 126 patients not taking medications for the treatment of hypertension and/or dyslipidaemia, the most common reasons for non-medication (multiple response allowed) were treatment of the condition with diet (82.5%), followed by treatment with exercise (53.2%).

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