HIGH BLOOD PRESSURE (HYPERTENSION)

Overview:

High blood pressure, often referred to as *hypertension*, refers to an intermittent or sustained elevation in diastolic or systolic blood pressure that occurs even at rest. It affects between 10% and 20% of the adult population in the United States.

Blood pressure is measured in millimeters of mercury as the *heart contracts (systolic)* over millimeters of mercury as the *heart relaxes (diastolic)*. A typical adult blood pressure reading may be 123 (systolic) / 76 (diastolic). Blood pressure is considered acceptable if it is equal to or less than 140/90 in those under 50 and 150/95 in those 50 years old and older (Preferred or Super Preferred life underwriting criteria normally require lower readings than the above).

The cause for high blood pressure is unknown in over 90% of individuals with the condition. These cases are referred to as primary hypertension. Secondary hypertension is due to a known cause, such as kidney disease, adrenal gland disorders, or a coarctation of the aorta. Hypertension is often made worse by smoking, obesity, stress, alcohol consumption, and sometimes birth control pills.

Uncontrolled hypertension forces the heart to work harder and possibly enlarge, leading to cardiovascular disease. High blood pressure also places extra strain on the arteries, leading to blood vessel injury and atherosclerosis. The kidneys are also particularly sensitive to elevations in blood pressure. High blood pressure is often treated with weight reduction, dietary modification, smoking cessation programs and medications.

Impact on Life Underwriting:

Underwriting action will depend on the level of blood pressure during the exam and whatever readings are recorded in APS over the course of the last year or two. On occasion, a proposed insured, in response to learning of their blood pressure elevations will indicate they suffer from "*white coat syndrome*" ~ they indicate the stress of the examination itself has lead to the high blood pressure readings. As long as the blood pressure readings in the APS are more normal, it is often possible to obtain authorization for another reading which hopefully will be more normal.

Most individuals with high blood pressure are able to manage their condition with a loss of weight, and increase in exercise, a modified diet, or with medications in combination with the above. Once normal blood pressure readings can be documented over several moths, it should be possible to obtain preferred or standard rates.

As with all cardiovascular risk factors, good medical follow up, the cessation of any tobacco use, a regular exercise program, the use of preventative medications and establishment of good dietary habits, all help in reducing the risk for further cardiovascular complications and lead to more favorable underwriting. Please help us put your client's specific circumstances in the best possible light by providing us with information requested on our *Search for Underwriting Credits Questionnaire*. This kind of information can often help us negotiate reduced rates of several tables on your customer's behalf. For a history of less than ideal blood pressure, a recent negative (i.e. normal) stress test is particularly helpful. SB 05/07/2001

Systolic Pressure (heart contracting - upper number)					**Diastolic Pressure (heart at rest - lower number)**					**Table**
Age < 36	**36 - 45**	**46 - 55**	**56 - 65**	**65 <**	**Age < 36**	**36 - 45**	**46 - 55**	**56 - 65**	**65 <**	
155	158	161	164	167	96	98	100	102	104	**2**
161	164	167	170	173	100	102	102	104	108	**4**
167	170	173	176	179	104	106	108			**6**
171	174	177	180	183	106	108				**8**
174	177	180	183		108					**10**
177	180	183								**12 +**
184 +	*184 +*	*184 +*	*184 +*	*184 +*	*110 +*	*110 +*	*110 +*	*110 +*	*110 +*	**IC**