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POONRUT LEYATIKUL : FACTORS RELATED TO PRIMARY HYPERTENSION IN THE ELDERLY. THESIS ADVISOR : PRASERT ASSANTACHAL, M.D. (Hons), F.R.C.P. (London), WATTANA B. WATANAPA, M.D. (Hons), Ph.D. (Physiology), WICHAI TECHASATHIT, M.D., M.P.H. (Epidemiol), Dip Thai Brd Int Med. 91 p. ISBN 974-664-800-4

A case-control study was conducted in order to determine possible risk factors of primary hypertension in the elderly aged 60 years or older, who were selected from hypertension clinic and outpatient department in the Police General Hospital in Bangkok from August to December 1999. The total number of subjects were 354. There were 177 cases of confirmed diagnosis of hypertension and 177 controls did not have hypertension. Data were analyzed by descriptive statistics, chi-square contingency, univariate analysis and multivariate analysis by multiple logistic regression with 95 percent confidence interval, all of which were done through the SPSS/PC+ application.

There were 103 men (58.2%) and 74 women (41.8%) with a mean age of 68.1 years. Conditional Logistic Regression Analysis was applied to calculate adjusted odd ratios. The significant risk factors were family history of hypertension ($OR_{adj} = 4.49$, 95% CI = 2.13-9.47, P-Value < 0.001), fatty food consumption ($OR_{adj} = 6.04$, 95% CI = 2.21-16.49, P-Value < 0.001), very salty food intake ($OR_{adj} = 4.92$, 95% CI = 1.98-12.24, P-Value < 0.001), smoking ($OR_{adj} = 2.66$, 95% CI = 1.25-5.65, P-Value = 0.011), alcohol consumption ($OR_{adj} = 2.49$, 95% CI = 1.40-6.20, P-Value = 0.004), lack of physical exercise ($OR_{adj} = 4.85$, 95% CI = 2.23-10.03, P-Value < 0.001), diabetes mellitus ($OR_{adj} = 4.62$, 95% CI = 1.97-10.82, P-Value < 0.001), cardiovascular disease ($OR_{adj} = 2.22$, 95% CI = 1.07-4.59, P-Value = 0.032), mental stress ($OR_{adj} = 7.29$, 95% CI = 2.06-25.82, P-Value = 0.002) and the protective factor was undernutrition ($OR_{adj} = 0.19$, 95% CI = 0.06-0.59, P-Value = 0.004). These findings show some significant risk factors of hypertension in the population and provide knowledge as a baseline in order to prevent and control hypertension in the elderly.