NEW PAPERS

National Hypertension Taskforce of Australia: a roadmap to achieve 70% blood pressure control in Australia by 2030

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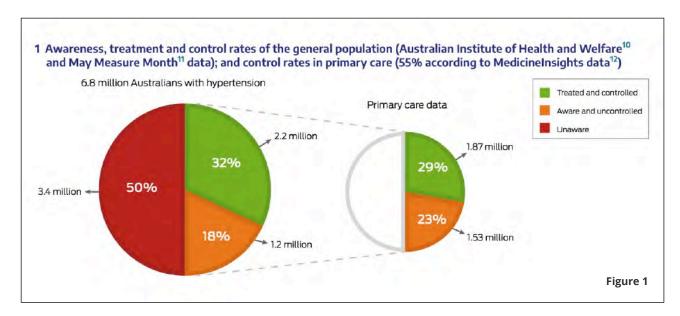
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In Australia, raised blood pressure is the leading risk factor for preventable deaths from stroke, heart disease, kidney disease, and dementia,^{1,2} contributing to over 25,000 deaths annually.²⁻⁴ What's most alarming is that only 32% of Australians with hypertension have their blood pressure controlled to below 140/90 mmHg (**Figure 1**). This puts us far behind other high-income countries like Canada, where control rates have reached 68%.⁵⁻⁷

To address this urgent issue, we published a Call to Action in the Medical Journal of Australia⁸ in 2022, leading to the establishment of the National Hypertension Taskforce (www. hypertensiontaskforce.au), launched by the Hon Mark Butler MP, Minister for Health and Aged Care of Australia. The Taskforce was founded by the Australian Cardiovascular Alliance (ACvA) and Hypertension Australia, with significant support from the National Heart Foundation and the Stroke Foundation as co-founding organisations. To ensure wide-ranging impact and nationwide uptake it was essential for the Taskforce to include all relevant stakeholders. We therefore have representation from key organisations such as the Royal Australian College of General Practitioners (RACGP), Australian Primary Health Care Nurses









Association (APNA), the Pharmacy Guild of Australia, Pharmaceutical Society of Australia (PSA), Kidney Health Australia, Endocrine Society of Australia (ESA), Cardiac Society of Australia and New Zealand (CSANZ), Australian and New Zealand Stroke Organisation (ANZSO) and consumers.

The first major activity of the Taskforce was to bring together key stakeholders to identify priority areas to improve blood pressure control and to inform development of a national Roadmap. From the outset, our vision has been to unite the sector in addressing all of the contributing factors. The Roadmap,⁹ published in 2024, is the result of numerous consultative workshops held with National Hypertension Taskforce members and other key stakeholders such as the NSW Office for Health and Medical Research, Australian Government Department of Health and Aged Care and NPS MedicineWise.

This Roadmap marks a significant milestone - a testament to collective efforts and a path forward towards our ambitious goal to increase the control rate from 32% to at least 70% by 2030. Achieving this target will make Australia a global leader in blood pressure management.

The Roadmap, published in the Medical Journal of Australia, is built on three pillars to (A) prevent; (B) detect; and (C) effectively treat raised blood pressure (Figure 2). For prevention, we're focusing on population-wide strategies to promote target blood pressure levels below 130/80 mmHg. This includes supporting initiatives from the National Preventive Health Strategy and developing economic tools to make healthy choices more affordable.

Detection is crucial, as about half of Australians with hypertension are unaware of their condition. We're advocating for systematic screening in general practices, with at least annual testing for all patients. We also want to expand community screening programs and raise public awareness about the importance of knowing and understanding your blood pressure numbers.

For effective treatment, we're adopting and tailoring the well-established World Health Organization's HEARTS technical package. This includes healthy lifestyle counselling, promoting evidence-based treatment protocols, improving access to essential medicines and blood pressure devices, risk-based cardiovascular disease management, and advocating for implementation of team-based care approaches and systems for monitoring hypertension control nationally.

Embedded within the three pillars of prevention, detection and effectively treating raised blood pressure, we have identified ten key priority areas. One of these is developing simplified, onepage blood pressure treatment protocols for healthcare providers to help overcome clinical inertia and improve blood pressure control. We're also advocating for policy changes to allow singlepill combinations as first-line treatment, which can improve medication adherence and blood pressure control.

Annual and accurate blood pressure measurement is essential and will be the most likely route to successfully detect 90% of people with hypertension, so we're recommending the government incentivises systematic annual blood pressure checks in Primary Care settings. We're also developing protocols for standardised measurement and interpretation of blood pressure, including automated office blood pressure (AOBP) and home blood pressure measurement.

Team-based care is a cornerstone of our approach. We're recommending evaluation and implementation of effective models that coordinate care among general practitioners, pharmacists, nurses, and other health professionals. This increased capacity can lead to improved patient follow-up, medication management, and adherence support.

A major challenge we face is the lack of a comprehensive national blood pressure monitoring system. We need better data capture and availability of primary care data to track our progress and identify areas for improvement. We're advocating for a coordinated national effort, with government leadership, to address this gap.

Implementing this Roadmap will not be easy. We face substantial barriers at the community, patient, provider, and system levels. However, the potential benefits are enormous. If we can reduce







ROADMAP

of the

National Hypertension Taskforce of Australia





<u>Goal</u>: To reach at least 70% blood pressure control by 2030 defined as BP <140/90 mmHg

Why is this important?



Raised blood pressure is the number #1 cause of preventable deaths in Australia, mainly from heart attacks & strokes - leading to >25,000 deaths per year.

6.8 million Australians have hypertension Half of them are unaware of it, and only 32% have their blood pressure controlled with treatment.



By working together to implement evidence-based strategies, we can (A) prevent, (B) detect and (C) treat hypertension very effectively, whilst saving millions of lives, and AU\$91.6 billion in GDP

Prevent

Population-based preventive strategies will benefit people at ALL blood pressure levels across all ages, to prevent and delay hypertension, and reduce risk in people with existing disease. Support the implementation of the National Preventive Health Strategy 2021.



NATIONAL



Lower sodium (increase potassium) intake, healthy food supply for healthy body weight, increase physical activity and avoid alcohol.



Key Priority Areas: Through a consultative process the Taskforce identified the Key Priority Areas to target first.

Detect

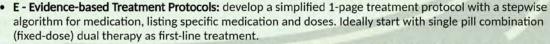
More than 50% of people in Australia with hypertension, are not aware of it. If this >3,4 million people remains undetected, they cannot be treated or controlled. With 87% of people in Australia seeing a GP once a year, systematic screening in general practice is most likely to achieve success. Strategies to improve detection may include:

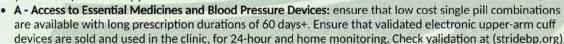
- Systematic screening: perform accurate blood pressure checking in GP practice for all adults.
- Implement screening and referral by practice nurses, pharmacists, other health professionals.
- Ramp up opportunistic screening campaigns.
- Install health stations or kiosks in shopping malls and workplaces with accurate blood pressure devices.
- Media campaigns, slogans and improving health literacy in the community on risks of high blood pressure.

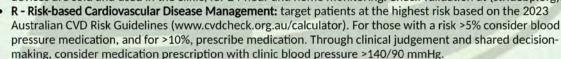
Treat effectively

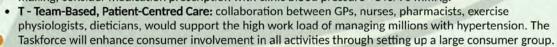
The Taskforce adopts the World Health Organization's HEARTS Technical Package which applies to primary care:

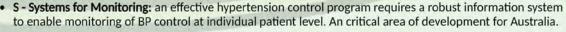
 H - Healthy Lifestyle Counselling: lifestyle modification is first-line treatment for hypertension. Deliver short education modules at diagnosis.

































hypertension prevalence by 25% and effectively treat everyone with hypertension, we could save \$91.6 billion in gross domestic product over the working lifetime of the population.¹⁰

As we move forward, we're strongly committed to ongoing clinical and pre-clinical research and wideranging collaboration to design and implement actions that are feasible, acceptable, cost-effective, and scalable for the Australian setting.

In addition to empowering the community to take charge of their health, we will also establish a large consumer group of people with lived experience to co-design our prevention, detection, and treatment initiatives.

The ten priorities in listed in the Roadmap equip us with the tools necessary for improved blood pressure management in Australia. This isn't just about improving a statistic – it's about preventing thousands of deaths, reducing the burden of chronic conditions and disabilities, and improving the quality of life for millions of Australians.

As we implement this Roadmap, we'll be continually evaluating our progress and adapting our approach based on what we learn. We're calling on all stakeholders - healthcare providers, policymakers, researchers, and the public – to join us in this crucial effort.

We welcome any interest and collaboration, and acknowledge the contributions of Kayla Viney, the Executive Officer of the National Hypertension Taskforce of Australia and our national and international advisors (admin@ hypertensiontaskforce.au).

Kayla Viney - admin@ hypertensiontaskforce.au

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