

President's Message

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PREVENTION OF HYPERTENSION

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Hypertension (HTN) without an underlying etiology whether renal or endocrinial is usually secondary to genetic predisposition pressor drugs intake and unhealthy lifestyle. Since little can be done for genetic predisposition, the focus of prevention will be directed to lifestyle change and avoiding pressor stimuli. Treatment of obesity will help in prevention and control of HTN. Weight reduction can lower BP systolic by 10-15 mmHg and diastolic 5-10 mmHg. It is the ideal treatment for overweight persons who are mildly hypertensives. salt restriction is another approach for prevention of HTN. Individuals vary in their response to salt intake. The elderly are specially sensitive to salt. Canned foods, pickles, salt added during cooking or at table should be limited or avoided if possible.

Diet rich in fruits, vegetables, nuts and proteins (DASH) diet was effective in reducing BP. This diet is recommended together with salt restriction for individuals with family history of HTN or show borderline elevation in BP.

Increasing regular aerobic exercise e.g. daily brisk walking for 30 minutes or sports such as swimming or jogging can decrease BP. It also reduces long term risk of coronary heart disease and increases high density lipoprotein cholesterol, decrease insulin resistance and assists in weight reduction.

Meditation, relaxation and stress reduction techniques are recommended and may be helpful as adjunct in secondary prevention of coronary heart disease. For patients with mild HTN, non-pharmacologic intervention through favorable lifestyle changes may be all that is needed together with addressing other cardiovascular risk factors- smoking, dyslipidemia and diabetes.