Abstract

Over the years, many controlled clinical trials have demonstrated the efficacy of pharmacological treatment of hypertension. However, such treatment has its shortcomings. First, it usually requires a life-long commitment to therapy because, while this approach can control hypertension and reduce its consequences it does not cure the condition. Next, the cost of pharmacological interventions can be very high and, thus, prohibitive for poorer individuals and nations. In addition, many patients experience problems with compliance and adherence, which almost certainly contribute to the low level of hypertension control that is so widely observed. Finally, the pharmacological approach requires a strong commitment by public health officials to detection and treatment of hypertension if there is to be any hope of limiting this condition’s impact. All of these negative considerations are compounded by the fact that the prevalence of hypertension is increasing worldwide. For all these reasons, non-pharmacological interventions should be implemented to prevent or delay the occurrence of hypertension.

Keywords
Prevention, hypertension