Hypertension in Iraq

Dear Editor

Hypertension (HTN) is one of the most important preventable causes of premature morbidity and mortality. It increases the risk for cardiovascular, renal, neurological diseases, and premature death. Early identification of this medical health problem may help to minimize its incidence and related complications.

The World Health Organization (WHO) estimates that 1.13 billion people worldwide have HTN; most of them (two-thirds) live in low- and middle-income countries, and Iraq is one of the countries that are facing this burden. One of the global targets for noncommunicable diseases by the WHO is to reduce the prevalence of HTN by 25% by 2025 (baseline 2010).[1] According to WHO, up to 40% of Iraqi people who are ≥25 years have HTN and they reported that there was a higher prevalence of HTN in women.[1]

Studies in different regions in Iraq have shown a prevalence of HTN across different cities of Erbil (2019) of 88.8%,[2] Nasiriya (2014) of 77.8%,[3] and Bagdad (2019) of 63.5%[3] among older patients (>60 years).

During the last 10 years, Iraq was one of the Eastern Mediterranean countries in a whirl of unrest, war, and other armed conflicts that have resulted in an extra burden of mental and health stresses having many psychological impacts. Many social and health problems occurred at the time of and after the conflicts and unstable conditions manifested by destruction of the health care system, lack of medical care, and health services. These factors may contribute in the progressively increasing prevalence of HTN in Iraq.

There is an association supporting the fact that increased body weight is a primary risk factor for HTN. The dietary patterns in Iraq may play a role for obesity in relation to HTN.

Recently, the region has witnessed an unprecedented increase in the consumption of fast foods that change the dietary pattern toward an unhealthy diet.

Several studies among Iraqi population have shown a significant association between HTN and increasing body mass index, with a prevalence of 64.8% among obese people compared to 51.3% and 37.1% among overweight and normal-weight persons, respectively.[2]

The Global Burden of Disease study in 2015 revealed that one of the leading causes of mortality and morbidity in the Eastern Mediterranean regions including Iraq is HTN, which has increased by 83.3% since 1990, and ischemic heart disease (IHD)—as a cardiovascular complication of HTN—which has increased by 17.2%.[4]

Worldwide, HTN is the reason behind 7.6 million premature deaths (about 13.5% of the global total deaths) and among them 54% of stroke and 47% of ischemic heart disease worldwide were attributable to HTN. A hospital-based study showed that stroke—as one of the consequences of HTN —is the third main cause of mortality in Iraq and accounts for 9.3% of all deaths.[5]

As final words, we assure that HTN has significant burdens. Awareness about its contribution should be raised through the community to reduce the modifiable risk factors and its incidence and consequences.

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