

Tulane University awarded \$6.28 million to study blood pressure control in low-income patients

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The National Institutes of Health has awarded Tulane University a five-year, \$6.28 million grant to test ways to best implement new guidelines to more aggressively manage high blood pressure in adults, especially among low-income patients at high risk for cardiovascular disease.

Last year, the NIH's landmark [Systolic Blood Pressure Intervention Trial](#) (SPRINT) called for doctors to more intensively manage hypertension for adults over 50, aiming for blood pressure targets well below previously established guidelines. The study found that adjusting medication to achieve systolic pressure of 120 mm Hg instead of the standard recommendation of 140 mm Hg significantly reduced rates of cardiovascular disease in adults 50 years and older with high blood pressure.

The lower blood pressure target reduced rates of cardiovascular events, such as heart attack, heart failure and stroke, by 25 percent and reduced risk of death by 27 percent.

Tulane researchers across the schools of medicine and public health will explore ways to put those findings into practice in real-world clinical settings and how best to reach traditionally underserved hypertension patients who are at high risk for cardiovascular disease. Researchers will work with 30 federally qualified community health centers (FQHC) serving low-income patients in southeast Louisiana to recruit 1,350 participants with high blood pressure.

National Heart, Lung and Blood institute awarded the grant to Dr. Jiang He and [Dr. Marie "Tonette" Krousel-Wood](#), professor and senior associate dean of Tulane University School of Medicine and Tulane associate provost for the health sciences. Other investigators included Katherine Mills, Dr. Jing Chen, Erin Peacock, Hua He and Dr. Paul Whelton.

“Our goal is to generate urgently needed data on effective, adoptable and sustainable intervention strategies aimed at eliminating health disparities and reducing the blood pressure-related disease burden that disproportionately affects minority and low-income patients in the United States,” He said.

The study will evaluate several intervention strategies targeting patients, provider-teams and administrators. Outreach to patients will include home blood pressure monitoring and coaching on medication adherence and lifestyle modifications.

“We are committed to translating science into solutions to improve health for all people,” Krousel-Wood said. “By working with our FQHC partners, we will engage patients, providers and clinic staff in adopting proven strategies to reduce blood pressure and in providing real-world solutions to address uncontrolled hypertension, a critical health challenge in Louisiana, the US, and beyond.”