

# Preface

Hypertension is the most commonly diagnosed and treated chronic condition in the outpatient setting. High blood pressure is a powerful risk for cardiovascular and renal disease and is disparate in US blacks in prevalence and complications. This text is designed to highlight important epidemiological data, target organ manifestations, and the evidence basis for potentially the most effective means to prevent and control this deadly condition in African Americans.

Nevertheless, the optimal approach to developing best practices must entail more than a recitation of recent guidelines. While graded, evidence-based guidelines are necessary to identify optimal treatment of patients, in most circumstances clinicians also remain appreciative of the viewpoints of experts in this field. These opinions add to and supplement guidelines, which are actually never assumed to be a replacement for clinical judgment. In the final analysis, patient care must be applied on a one-on-one approach, reflecting the unique circumstances presented by that patient. As a result, especially considering the often-insufficient inclusion of African Americans and other racial/ethnic minorities in many large randomized clinical trials, while clinicians must hopefully utilize outcome evidence to guide therapy, the expert opinions contained in this text also may assist in treating their high-risk African American patients. Hence, understanding the concepts in this compendium for effective treatment of hypertension in African Americans is a necessary step to decreasing and eventually eliminating disparities in cardiovascular diseases.

In the final analysis, this dual approach may best curtail the unfortunate and unnecessary premature morbidity and mortality due to hypertension prevalence in blacks and associated cardiorenal metabolic and atherosclerotic cardiovascular disease (CVD) events.

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