

A Majority of African Americans Are Stricken With Hypertension by Age 55

Counseling young people to choose healthier lifestyles may help reduce their risk of developing high blood pressure.

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Hypertension is more common in Black folks than their white counterparts. Now, new findings published in the Journal of the American Heart Association show that most African Americans are very likely to develop hypertension by their mid-50s, reports [MedPage Today](#).

For the study, researchers reviewed data on 3,980 participants between ages 18 and 30 with normal blood pressure who were enrolled in the Coronary Artery Risk Development in Young Adults study.

Scientists used high blood pressure guidelines of 130 mm Hg or higher diastolic over 80 mm Hg or higher systolic defined by the American Heart Association and American College of Cardiology. Results showed that 77.5 percent of Black men and 77.7 percent of Black women were more likely to develop hypertension by age 55 when compared with their white counterparts (54.5 percent of white men and 40 percent of white women).

In addition, when matched against whites in the group, Black folks were younger, less physically fit, less likely to adhere to a DASH-style diet (one rich in fruits, vegetables, and whole grains and low in red meat and salt) and not drink excessively. (DASH stands for Dietary Approaches to Stop Hypertension.) They were also more likely to smoke cigarettes and have parents with a history of hypertension.

Scientists identified a link between parental history of hypertension, higher body mass index, serum uric acid and elevated systolic and diastolic blood pressure readings and a higher risk for hypertension among both racial groups.

Researchers suggested that these findings promote the need for earlier interventions to reduce hypertension later on in life as the racial differences in high blood pressure started to appear before age 30.

“It is urgent that health care providers counsel young patients, particularly Blacks, about eating a healthy diet, being physically active and controlling body weight,” said the study’s lead

researcher, S. Justin Thomas, PhD, of the University of Alabama at Birmingham.

Still, such interventions may not be enough to completely eliminate the racial gap in hypertension incidence, scientists concluded. But they are a step in the right direction.

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