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Letter to the Editor

Generalizability of hypertension risk factors and achieving blood pressure control in educator populations in India



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To the Editor:

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We read with pleasure the article by Mini et al., "Control of hypertension among teachers in schools in Kerala (CHATS-K), India", and wholeheartedly agree that educators play an important role in increasing health literacy and blood pressure (BP) control among future generations. However, we would like to caution against over-interpretation of the study findings due to the following reasons:

- 1) As the authors have noted, the study population may not mirror the general population, limiting generalizability of the results. Participants were younger, more likely to be female, and of higher socioeconomic status, all of which are well established, non-modifiable, protective factors for hypertension. Premenopausal females tend to have lower physiological BP and prevalence of smoking & alcohol consumption, which may have skewed hypertension prevalence estimates.²
- 2) Furthermore, there is wide variability in hypertension prevalence among educator populations, which may suggest that type of teaching occupation (e.g. physical education vs. mathematics) and school-specific environments (e.g. rural vs. urban locality, government vs. private) may play as important a role as the profession itself. Occupational stress varies across professions and is an independent predictor of hypertension³; as teachers have unique occupational stresses, the study results may not be translatable to adults in other occupations.
- 3) Although teachers have unsurprisingly high health literacy, we see in this study that only around half of participants are treating their hypertension. While it may be difficult to effect change in the general population, if we can improve hypertension control among teachers and health professionals and show a visible reduction in end-outcomes for all hypertension subtypes, the general population may in turn begin viewing them more as health role models and, along with other traditional avenues such as lifestyle initiatives and improvements in

prescription and counseling quality,⁵ be more likely to achieve hypertension control.

Ethics approval and consent to participate

This study was exempt from Institutional Review Board approval.

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Declaration of competing interest

The authors declare that they have no competing interests/conflict of interests.

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