小児期の逆境は血圧コントロール不良と関連する(Presentation: 307-Session: EP.AOS.760)

小児期の貧困、虐待や家庭不和は血圧コントロール不良と関連する History of childhood poverty, mistreatment or family dysfunction linked to poor blood pressure regulation

つらい小児期を過ごすことは血圧コントロール不良と関連する可能性がある、と2016年 American Heart Association年次集会で発表された。成人における血圧変動は、高齢者の 脳機能低下や脳卒中リスク上昇などの多くの問題と関連してきた。今回のスタディにおいて研究者らは、373人の対象(7~38歳)に対し、23年間にわたって24時間血圧モニタリングを行った。小児期に貧困、虐待または家庭不和であったと報告した者は、日中に高血圧を有する割合が17%高かった。彼らはまた夜間の高血圧および24時間の血圧変動を有する割合も高かった。

Full Text

A difficult childhood may be associated with a risk of poor blood pressure regulation, according to research presented at the American Heart Association's Scientific Sessions 2016.

Blood pressure variability has been associated in some studies to elevated risk of cardiovascular disease and complications from hypertension. Researchers at the Augusta University Medical College of Georgia investigated the impact of "adverse childhood experiences" – childhood abuse or neglect, dysfunctional homes, or low socioeconomic status – during the transition from childhood to adulthood. Earlier research has linked adverse childhood experiences to faster increase of blood pressure in adulthood.

Researchers conducted periodic around-the-clock blood pressure monitoring to capture day and nighttime pressure readings in 373 participants between the ages of 7 and 38 during a 23-year period. Those who reported childhood adversity were 17 percent more likely to have blood pressure higher than the clinical definition of hypertension during the daytime.

"Adverse environments in early life have been consistently associated with the increased risk of hypertension in later life," said Shaoyong Su, Ph.D., lead author and an associate professor of pediatrics at Augusta University Medical College of Georgia. "We found that children who experienced childhood abuse or neglect, dysfunctional homes and low socioeconomic status, were far more likely to have higher blood pressure at night as well as blood pressure variability over 24 hours, in addition to more rapid onset of hypertension at an earlier age."

Twenty-four-hour ambulatory blood pressure is considered a better predictor of organ damage and cardiovascular events, as it can assess not only nighttime blood pressure levels, but also the blood pressure variability in real life. Blood pressure was monitored up to 15 times during the study.

Researchers said there was no difference in blood pressure regulation at various ages suggesting the patterns of adverse events in childhood are similar through young adulthood.

Most physicians focus on average blood pressure readings, but the new findings suggest that they should also ask younger patients about childhood adversity and watch for high blood pressure variability, he noted.

"This is not something most clinicians currently address, but it is a simple step that could identify many individuals at risk of adult hypertension and help them achieve control at an earlier age. This could avoid problems as they age," he said.

Blood pressure variability has been linked to a number of problems in adults, including decreased brain function in older adults, as well as increased risk of stroke and poorer post-stroke recovery. Likewise, early-onset hypertension and prehypertension have been linked to adverse preclinical cardiovascular disease, including left ventricular hypertrophy and evidence of increased arterial stiffness.

Co-authors are Guang Hao, Ph.D.; Frank Treiber, Ph.D.; Gregory Harshfield, Ph.D.; and Xiaoling Wang, M.D., Ph.D. This study is funded by National Institutes of Health/National Heart Lung and Blood Institute.

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