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A Review of the Prevalence of Hypertension and Its Influencing Factors among Residents in Yunnan Province

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Abstract. Background: Hypertension is a highly prevalent chronic disease among Chinese residents, posing a serious threat to residents' cardiovascular and cerebrovascular health. Yunnan Province is characterized by multi-ethnic settlement, and there are significant differences in residents' dietary habits and lifestyles, leading to unique challenges in hypertension prevention and control. Objective: This paper aimed to systematically review relevant literatures, analyze the incidence of hypertension in Yunnan residents, and explore its influencing factors alongside the awareness, treatment, and control rates of the disease. Methods: By reviewing literatures and extracting relevant information, this paper summarized the hypertension prevalence in residents of Yunnan region as well as its influencing factors. Results: The hypertension prevalence in Yunnan residents in Yunnan Province stood at medium degree nationwide, showing significant gender and age differences; higher prevalence of hypertension was observed in urban residents compared with rural residents. The influencing factors of hypertension included smoking, alcohol consumption, obesity, dietary intake, physical activity, educational level, socioeconomic status, and genetics. The rates of hypertension awareness, treatment, and control among residents in Yunnan Province were generally low. Conclusion: Relatively high hypertension incidence was observed among residents of Yunnan region. Populations with smoking, alcohol consumption, obesity, and low educational level were the key groups for hypertension prevention and control. Strengthening health guidance for residents and enhancing their health literacy are recommended, promote salt reduction and control, tobacco control and alcohol restriction, rational diet, and increase physical activity.

Keywords: Hypertension, Prevalence, Influencing Factors, Awareness Rate, Treatment Rate, Control Rate, Yunnan Province, Review

1. Introduction

Regarded as a common chronic non-communicable disease, hypertension is recognized as an important risk contributor to cardiovascular and cerebrovascular diseases. If hypertension cannot be controlled and treated in a timely manner, long-term high blood pressure may lead to myocardial infarction, which seriously threatens people's life and health and imposes a heavy burden on individuals, families, and society [1]. With the fast-paced development of social economy in recent years, the lifestyles of the public have changed accordingly, and various chronic disease problems

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closely related to unhealthy lifestyles have become increasingly serious. The 2002 national sampling survey of hypertension showed that the prevalence of hypertension among people aged ≥15 years old in China was 18.8% [2], while the prevalence of hypertension among Chinese adults in 2018 was 27.5% [3]. The prevalence of hypertension among Chinese residents showed a continuous upward trend. From a national perspective, the prevalence of hypertension varied among different regions, showing a pattern of "higher in the north and lower in the south" [3]. There were also differences in the prevalence between rural and urban areas; since 2015, the hypertension prevalence among residents in rural areas had surpassed that in urban areas [4].

Existing data indicated that in 2007, the weighted prevalence of hypertension stood at 23.6% for individuals aged 18-69 in Yunnan Province [5], and by 2021, the incidence of hypertension among adult residents in Yunnan Province was 31.8% (standardized rate: 33.1%) [6]. As an important province in southwest China, Yunnan Province is characterized by mountainous terrain and multi-ethnic settlement. At the same time, different ethnic groups have different lifestyles and dietary habits (preference for sour, spicy, and pickled foods) [7], which may have special impacts on the epidemic trend of hypertension. Therefore, conducting a review study on the epidemic status, change trend, and factors affecting hypertension among residents in Yunnan Province can systematically sort out the status of hypertension among residents in Yunnan Province and provide a scientific basis for formulating targeted hypertension prevention and control strategies.

2. Methods

This paper reviewed the literatures on the epidemic trend of hypertension in Yunnan Province, with the specific steps as follows:

Taking CNKI (China National Knowledge Infrastructure) as the main literature source, the search keywords included "Yunnan Province", "hypertension", "prevalence", "epidemic trend", and "risk factors". The method of combining these keywords was adopted to expand the search scope, with no restriction on the search time. Finally, 25 relevant literatures were initially obtained.

Literatures with outdated publication time (before 2000) due to lack of timeliness, and literatures with potential bias in hypertension prevalence data caused by self-reporting of research subjects (the actual prevalence may be higher) were exclued. Literatures that focus on the epidemic characteristics, trend analysis of hypertension in Yunnan Province and the factors affecting residents' blood pressure, with reliable data sources (obtained through research by researchers and large sample size) were retained. Finally, 17 valid literatures are included.

Literature collation and analysis. An Excel spreadsheet was established for the 17 included literatures, and the following information was extracted from each literature: basic research information, including research questions, research objects, and research methods; research results, including the prevalence rate and standardized rate of hypertension in different periods, differences in awareness rate, control rate, and treatment rate among different populations, and main influencing factors.

Based on the results of literature collation, the temporal changes, population differences, and influencing factors of the epidemic trend of hypertension in Yunnan Province were comprehensively analyzed, and prevention and control suggestions were made.

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3. Results

3.1. Included literatures

This study included a total of 17 pieces of literature. Among them, 5 were provincial-level studies in Yunnan, and 12 were prefecture-level and below studies; 2 were studies on the general population, 1 was on children and adolescents, and 2 were on the elderly. The literatures included in this study are displayed in Table 1.

Table 1. Included literatures

No.	Title of project	Author	Issue date
1	Prevalence and Associated Risk Factors of Hypertension in Dai Ethnic Minority in Rural Xishuangbanna.	WANG Hua-wei, et al.	2020
2	Analysis of Trend in Prevalence of Hypertension and Its Relationship with Different Obesity Indices among Rural Adults in Fumin County of Yunnan Province.	HE Lian-ju, et al.	2021
3	Hypertension status and its biochemical indexes analysis in Zhuang-Dong ethnic groups.	YI Can,YU Hui-xin,LI Yong-lan.	2022
4	Survey on the Prevalence of Hypertension Among Yi People in Yunnan, China.	Yang Zhi-li, Guo., Gao Lu, Wang Yong, Dong Yongli, Tang Wen-ru, Li Kai-su, Yan Wei, Xiao Chun-jie	2004
5	Analysis of the Prevalence and Self-management of Hypertension and Its Influencing Factors on the Basis of Structural Equation Modelling in Rural Dayao County of Yunnan Province.	YU Zizi, et al.	2025
6	Survey of cognition of hypertension in persons of Bai nationality in Yunnan province.	LIU Rong, et al.	2007
7	Current Status of Hypertension and Analysis of Its Influencing Factors Among Han Residents in Plateau Cold Area of Yunnan Province.	Zhang Xiaoqiao, et al	2022
8	Analysis of the prevalence trend of hypertension among residents aged 18-69 in Yunnan Province from 2004 to 2018.	Shao Ying, et al.	2023
9	Distribution characteristics of blood pressure level and epidemiological status of hypertension among adult residents in Yunnan.	FANG Jia - yu, et al.	2023
10	Analysis of prevalence, awareness, treatment and control of hypertension in adults in Yunnan province, 2018.	Shi Qingping, et al.	2021
11	Prevalence, control and self-management of hypertension among elderly residents in rural areas of Yunnan province.	LI Lin, et al.	2017
12	Survey on the Prevalence of Hypertension and Its Related Risk Factors in Remote Mountainous Areas of Yunnan Province.	Zhang Teng, et al.	2017
13	Prevalence of hypertension and its impact on quality of life among rural Dai residnts in Yunnan province.	ZHOU Yong-li, et al.	2016
14	Analysis of the Prevalence of Hypertension and Its Risk Factors Among Community Residents in Kunming City.	Li Yuntao, et al.	2015

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Table 1. (continued)

15	Hypertension prevalence among residents living in townships with different urbanization level in Bai ethnic regions of Dali municipality: a crosssectional study.	LI Xue-mei, et al.	2015
16	Survey and Analysis of the Prevalence of Hypertension Among Children in Yunnan Province.	Ma Baohua	2010
17	The investigation of hypertension in the aged population in Yunnan province.	GUO Zihong, et al.	2006

3.2. Prevalence status of hypertension

The prevalence of hypertention showed a significant upward trend. In 2004, the prevalence of hypertension among residents in Yunnan Province was 17.2% [5], and in 2018, it was 23.8% [8].

3.2.1. Gender characteristics

Among residents in Yunnan Province, hypertension prevalence showed significant gender differences, with a higher prevalence in males than in females. In the population aged 18-69 years in Yunnan Province in 2010 and 2018, the prevalence in males (2010: 24.7%; 2018: 21.2%) was significantly higher than that in females (2010: 21.2%; 2018: 17.6%) [5]. Among 11,396 community residents in Kunming City in 2015, the prevalence in males was 22.12% (standardized rate: 17.87%), and in females was 21.73% (standardized rate: 17.17%), with a slightly higher value in males [9]. Among 8,367 residents aged ≥18 years in Baoshan City in 2017, the prevalence in males was 25.7% (standardized rate: 24.2%), and in females was 24.5% (standardized rate: 23.0%), with males still having a higher prevalence [10]. However, in some regions, among female residents, the prevalence of hypertension exceeded that among males residents. In a study on rural elderly people in Yunnan Province conducted by Li Lin et al., the prevalence in females (52.7%) was higher than that in males (47.9%) [11].

3.2.2. Age characteristics

The prevalence rate of hypertension among residents in Yunnan Province showed a significant upward trend with the increase of age. In 2018, hypertension prevalence among residents aged 18-44 years in Yunnan Province was 8.9%, while the prevalence among residents aged 45-59 years and 60-69 years was 34.4% and 49.7% respectively [5]. The incidence of hypertension among residents of Kunming City communities also showed an upward trend along with the growth of age: the prevalence in the 15-20 years old group was 0.6%, while that in the 70-80 years old group was 37.7% [9]. Among the ethnic groups of the Zhuang-Dong ethnic groups, the prevalence of hypertension in males aged 20-44 years was 30.0%, and in females was 11.8%; while in the 60-80 years old group, the prevalence in males was 62.6%, and in females was 56.0% [12].

3.2.3. Urban-rural characteristics

The hypertension prevalence among Yunnan residents was greater in urban areas compared to rural areas. In 2018, the hypertension prevalence among adult residents in Yunnan Province was 27.2% in urban areas and 21.7% in rural areas [8]. In a survey on hypertension among the elderly in Yunnan Province, the prevalence in urban residents (46.6%) was higher than that in rural residents (42.7%)

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[13]. In 2015, in the Dali Bai Autonomous Prefecture, the prevalence in Dali City with a higher urbanization rate (standardized rate: 23.9%) was higher than that in Eryuan County with a lower urbanization rate (21.7%) [14].

3.2.4. Regional and ethnic differences

Among residents in Yunnan Province, the prevalence of hypertension displayed marked regional variations. In 2019, hypertension standardized prevalence among rural residents in Fumin County, Yunnan Province was 44.1% [15]. The standardized rate of hypertension among community residents in Kunming City was 17.50%, which was lower than that in Fumin County [9].

In the survey on hypertension among the elderly in Yunnan Province, the prevalence showed a trend of "lower in the south and higher in the north" [13]. In Yongsheng County, Lijiang City, a plateau cold area, the detection rate of hypertension among Han residents was 29.92% (standardized rate: 26.00%) [16]. In the remote mountainous areas with high altitude and poor transportation in Baoshan City, the incidence of hypertension among residents was 25.1%, while the prevalence in semi-mountainous areas was higher than that in plain areas [10].

Among adult residents in Yunnan Province in 2018, hypertension prevalence in the Dai nationality was higher than that among the Han nationality. The Dai residents in Mangshi (prevalence: 55.2%) [17] were a high-risk group for hypertension, with a prevalence far higher than that of the Han nationality in China and Yunnan Province. Hypertension prevalence among the Yi people showed significant differences across Nanjian (19.17%), Yangming (3.82%), and Jianshui (21.08%) counties [18]. The prevalence of hypertension among the ethnic groups of the Zhuang-Dong ethnic groups was also as high as 43.7% [12].

3.3. Influencing factors of hypertension

3.3.1. Smoking and alcohol consumption

Among rural Dai residents in Xishuangbanna, Yunnan [19] and residents in remote mountainous areas of Baoshan City [10], smoking and alcohol consumption are the major risk factors for hypertension, and the prevalence of hypertension in smokers is greater than that in non-smokers. Among residents in Baoshan City in 2017, the prevalence of hypertension in people with hazardous drinking and harmful drinking was significantly increased [10].

3.3.2. Obesity

Among residents in Baoshan City, the prevalence of hypertension in people with central obesity and obesity (based on Body Mass Index, BMI) was 38.3% and 49.7% respectively [10]. Among rural residents in Fumin County, Yunnan Province, Waist Circumference (WC), Waist-Hip Ratio (WHR), BMI, Body Roundness Index (BRI), and Body Adiposity Index (BAI) were positively correlated with hypertension [15]. Among Han residents in Yongsheng County, Lijiang City, the prevalence of hypertension in people with hyperlipidemia, central obesity, obesity, and overweight was higher than that in normal people [16].

3.3.3. Dietary factors

In Qujing City, the hypertension prevalence stood at 10.9% among 6-17-year-old children and adolescents who were fond of fried foods, while that in children who did not like fried foods was

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4.9%, indicating a high correlation between fried foods and hypertension [20]. Among community residents in Kunming City in 2015, the risk of hypertension in people who consumed sweets ≥3 times a week was 1.684 times that of people who consumed sweets less than 3 times a week; the risk of hypertension in people who consumed more than 600 g of grains per day was 1.644 times that of people who consumed less than 600 g of grains per day [9].

3.3.4. Physical activity

Among rural elderly residents in Dayao County who lacked physical activity, the prevalence of hypertension was 64.1%, while that in residents who did not lack physical activity was 48% [21]. Among residents in Baoshan City, the highest prevalence of hypertension (35.1%) was observed in people with low physical activity level, and the lowest (21.1%) in people with high physical activity level; with the increase of physical activity level, the prevalence of hypertension gradually decreased [10].

3.3.5. Other factors

Educational Level and Socioeconomic Status: Among Yunnan Province's adult residents in 2018, hypertension prevalence showed a rising pattern as their educational attainment declined [8]. Among community residents in Kunming City, the prevalence of hypertension varied among people with different educational levels: with the increase of educational level, the prevalence decreased, with the highest prevalence in people with primary school education or below (22.2%) and the lowest in people with college education or above (9.2%) [9]. In Fumin County, Yunnan Province, low educational level and low socioeconomic status may increase the risk of hypertension [15]. The prevalence of hypertension in Dai residents with high socioeconomic status was low [17]. Rural elderly residents in Dayao County had low socioeconomic status and lacked physical activity, leading to a high risk of hypertension [21].

Disease and Genetic Factors: Among Han residents in Yongsheng County, Lijiang City, hypertension prevalence was higher in diabetic patients (53.44%) than in individuals with normal glucose levels (26.96%);similarly, it was higher in those with a family history of hypertension (39.02%) compared to those without such a history (27.03%) [16]. Among children in Shizong County, Qujing City, the influence of paternal history of hypertension on systolic blood pressure was statistically significant [20].

3.4. Awareness rate, treatment rate, and control rate of hypertension

3.4.1. Awareness rate

The overall rate of hypertension awareness among Yunnan residents was found to be low. In 2018, the rate of hypertension awareness among adult residents in Yunnan Province was 33.9%, which was far lower than that in developed regions such as Shanghai and Jiangsu and the national average [8]. The awareness rate of hypertension among rural senior residents in Yunnan Province was 31.7%, which was lower than that among the elderly in Yantai (76.86%) and Zhejiang (93.9%) [11].

There were certain gender, age, and urban-rural differences in the awareness rate of hypertension among residents in Yunnan Province. In 2018, among Yunnan Province's adult residents, the awareness rate was higher in females compared to males, the awareness rate in rural regions was greater than that in urban regions, and the awareness rate increased with the increase of age [8]. Among rural elderly residents in Yunnan Province, the awareness rate of hypertension in people with

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low annual per capita income was higher than that in people with high annual per capita income [11]. In the Dali Bai Autonomous Prefecture, the awareness rate of hypertension in residents of Eryuan County with low urbanization rate was higher than that in residents of Dali City with high urbanization rate [14].

3.4.2. Treatment rate

In 2018, among adult residents in Yunnan Province, the treatment rate of hypertension in females (34.2%) was higher than that in males (23.3%); the treatment rate in rural regions (30.2%) was greater than that in urban regions (25.6%); the treatment rate increased with the increase of age and BMI; the treatment rate was higher in people with junior high school education; the treatment rate in the Yi nationality and other ethnic groups was lower than that in the Han nationality [8]. The treatment rate of hypertension among rural senior residents in Yunnan Province was 76.0%, which was higher than that in Wuxi (71.67%) and Xinjiang (45.8%); the treatment rate in people with high income (81.1%) was higher than that in people with low income (72.2%) [11].

3.4.3. Control rate

Hypertension control rate among residents of Yunnan Province was generally low. In 2018, the overall control rate of hypertension in Yunnan Province's adult residents was low: among hypertensive patients, the control rate of hypertension was 8.3% [8]. The overall control rate of hypertension among rural senior residents in Yunnan Province was relatively low (38.6%), which was lower than that among the elderly in Yantai (44.97%) and Zhejiang (61.29%) [11].

4. Discussion

In 2018, a hypertension prevalence of 23.8% was recorded among adult residents of Yunnan Province [8], which was higher than that among adult residents in Qinghai Province (20.8%) and residents aged 18 years and above in Guangdong Province (15.6%). At the same time, hypertension prevalence in Yunnan Province was below the national average in 2018 (27.5%) [3]. This indicated that the prevalence of hypertension in Yunnan Province was at a medium degree. Meanwhile, the results from 2021 indicated that the prevalence of hypertension among adult residents in Yunnan Province reached as high as 31.8% [6], demonstrating that hypertension poses a significant health concern that cannot be overlooked in the region.

The incidence of hypertension among residents in Yunnan Province was affected by factors such as gender, age, smoking, alcohol consumption, obesity, and educational level. Males, the elderly, people with smoking and drinking habits, and people with low educational level are the key groups for hypertension prevention and control in Yunnan Province. At the same time, obese people and residents who lack physical activity are also key groups.

The overall awareness rate of hypertension among residents in Yunnan Province was low. Hypertension awareness rate among adult residents in Yunnan Province in 2018 was 33.9% [8], which was far lower than the national average and that in some developed regions. Only 22% of people in some ethnic minorities know the normal level of blood pressure [7], indicating that the publicity and education on hypertension in Yunnan Province were not in place. At the same time, hypertension treatment rate among residents in Yunnan Province was 28.2% [8], which was also lower than that in other developed regions. This suggested that Yunnan Province should strengthen health promotion work, equip sufficient medical staff and blood pressure monitors in remote areas

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such as rural areas, so that residents can detect blood pressure problems in a timely manner and receive treatment. Finally, the control rate of hypertension among residents in Yunnan Province was also low: the control rate of hypertension in 2018 was only 8.3% [8], which was lower than the national average.

In view of the epidemic characteristics of hypertension among residents in Yunnan Province, the following suggestions are put forward: First, strengthen health education to enable residents in Yunnan Province to master knowledge about rational diet and salt control. In view of the fact that people of multiple ethnic groups in Yunnan have a preference for salty foods (such as pickled vegetables and bacon), multi-language (Chinese, Dai, Yi, etc.) promotional materials should be produced to popularize the hazards of high-salt diet leading to increased blood pressure and teach residents to use salt-limiting spoons. Second, make full use of the free blood pressure measurement services offered by community health centers and township hospitals. For remote areas in Yunnan Province, organize mobile medical vehicles to go to rural areas for screening, establish health records for the screened high-risk groups (such as those with a familial history of hypertension, high normal blood pressure, obesity, as well as long-term high-salt diet), and conduct regular follow-up visits. Third, conduct regular follow-up visits for patients diagnosed with hypertension, and at the same time emphasize the importance of low-salt diet, long-term medication, and no unauthorized drug withdrawal, so as to eliminate the misunderstanding that medication is not needed if there are no symptoms. For patients with poor blood pressure control and complications, they should be referred to higher-level hospitals in a timely manner to optimize the treatment plan.

5. Conclusion

A relatively high prevalence of hypertension was observed among residents of Yunnan Province. Age, gender, region, dietary status, physical activity, smoking and alcohol consumption, educational level, income level, and family history were the influencing factors of hypertension among residents. The awareness rate, treatment rate, and control rate of hypertension among residents were also low, with obvious urban-rural gaps. In the future, Yunnan Province needs to combine its regional and ethnic characteristics, and take measures from the aspects of health education, optimization of medical resources, and provision of targeted support to prevent and control hypertension among residents.

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