

Prevalence and Awareness of Hypertension Among Residents of Karu Local Government Area, Nasarawa State, Nigeria

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ABSTRACT

Hypertension remains one of the most prevalent non-communicable diseases globally and a major contributor to cardiovascular morbidity and mortality. Despite its preventable nature, awareness, treatment, and control rates remain low in low- and middle-income countries, including Nigeria. Nasarawa State, situated in the North-Central region, continues to experience a high burden of hypertension, yet community-level data on prevalence and awareness is still limited. This study assessed the prevalence and awareness of hypertension among adult residents of Karu Local Government Area (LGA), Nasarawa State, Nigeria. A descriptive cross-sectional study was conducted among 352 adult residents of Karu LGA selected through multistage random sampling. Data were collected using a structured, pretested questionnaire adapted from the WHO STEPwise approach and analysed using IBM SPSS version 25 and R software. Blood pressure was measured according to standard procedures. Descriptive statistics were used to summarize the data, while chi-square tests and multivariate regression identified associations between sociodemographic factors, awareness, and prevalence. Among the 352 respondents, 26.7% had been previously diagnosed with hypertension, and 19.9% were on medication. Overall, 55.1% demonstrated good knowledge of hypertension, while 44.9% had poor knowledge. Although 77.8% had checked their blood pressure before, regular monitoring and adherence to medication were low. The study revealed a positive association between educational level and awareness of hypertension ($p < 0.05$). High salt intake, physical inactivity, and stress were common modifiable risk factors identified. Hypertension remains a significant public health issue in Karu LGA, with moderate awareness but low control and preventive practices. Strengthening community-based health education, promoting regular blood pressure screening, and improving access to hypertension care at primary health facilities are essential for effective prevention and control.

