

Afghanistan

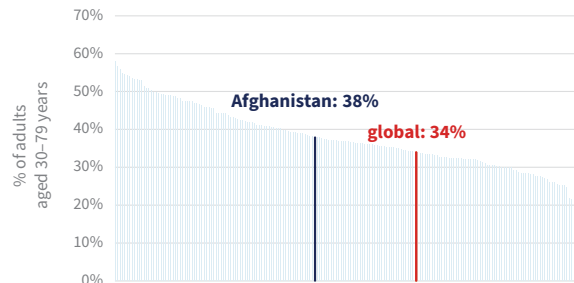
Hypertension profile

Total population (2024): 42 650 000

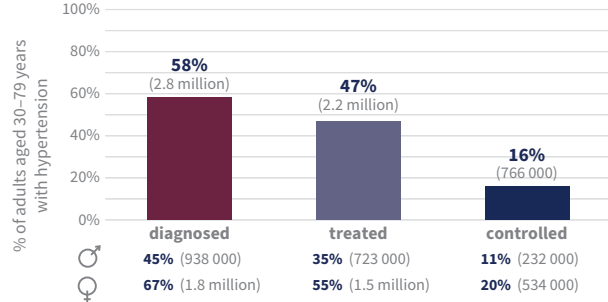
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 38% ♂ 32% ♀ 44%

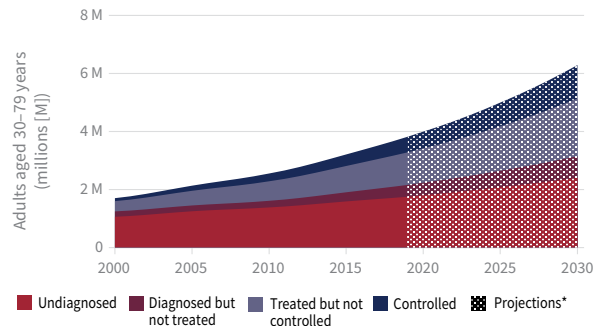
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 4.8 million adults aged 30–79 years with hypertension, approximately 4 million do not have the condition controlled^b

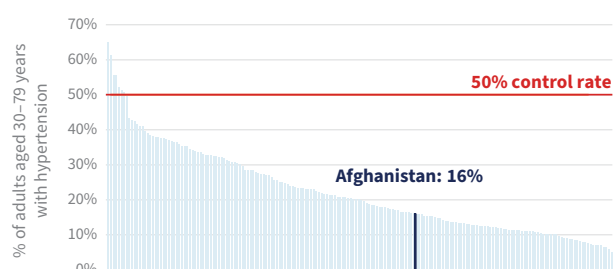


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	340 500	181 300	159 200	2021
Cardiovascular disease deaths	62 970	30 070	32 900	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	51	48	54	2021
Risk of premature death from NCDs (%) ^c	33	32	34	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%)	23	39	7	2022
Obesity, adults aged 18+ years (%)	18	13	22	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	33	20	46	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Don't know

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Albania

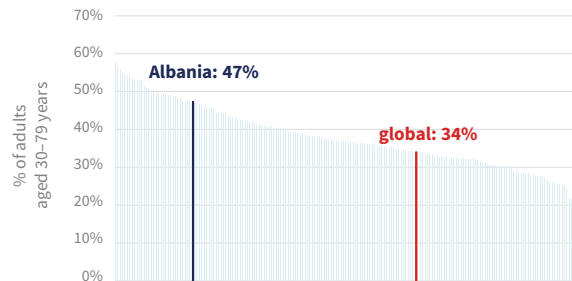
Hypertension profile

Total population (2024): 2 792 000

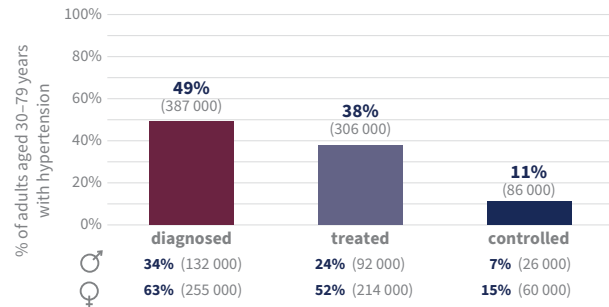
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 47% ♀ 46% 49%

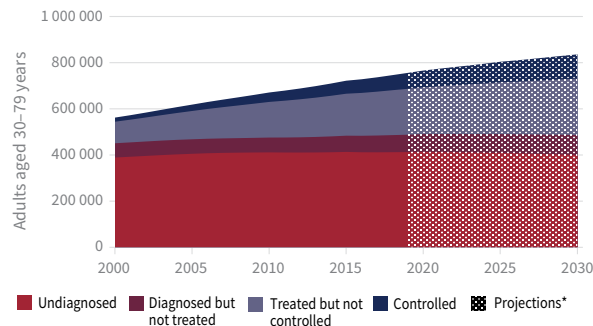
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 797 000 adults aged 30–79 years with hypertension, approximately 711 000 do not have the condition controlled^b

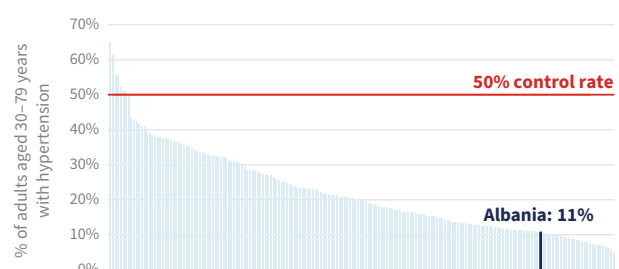


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	33 690	17 250	16 440	2021
Cardiovascular disease deaths	14 720	5960	8770	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	58	60	2021
Risk of premature death from NCDs (%) ^c	10	13	7	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	13	15	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	22	38	6	2022
Obesity, adults aged 18+ years (%)	27	23	30	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	24	21	27	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Algeria

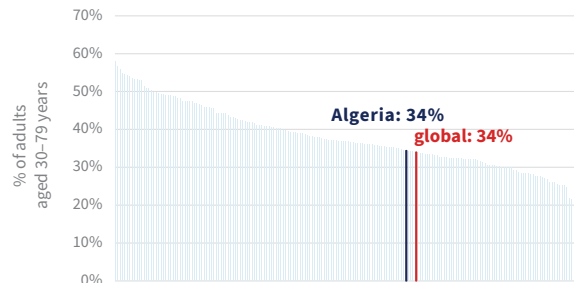
Hypertension profile

Total population (2024): 46 810 000

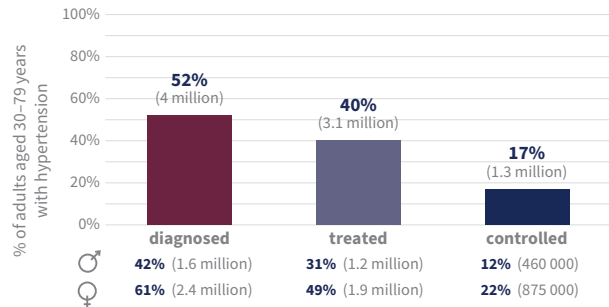
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 34% ♀ 35%

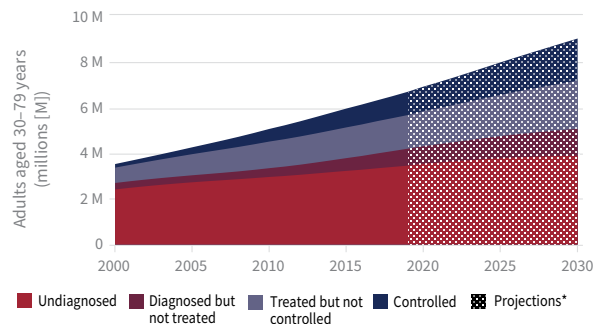
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 7.7 million adults aged 30–79 years with hypertension, approximately 6.4 million do not have the condition controlled^b

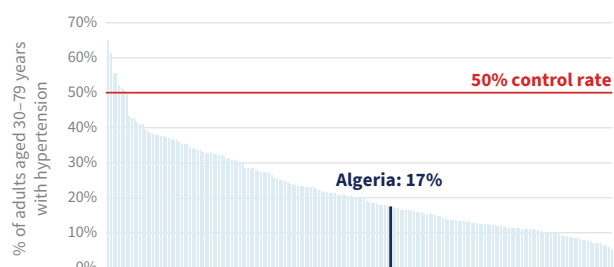


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	219 900	103 300	116 600	2021
Cardiovascular disease deaths	90 860	35 460	55 400	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	55	59	2021
Risk of premature death from NCDs (%) ^c	13	14	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%)	21	42	1	2022
Obesity, adults aged 18+ years (%)	24	16	33	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	29	20	38	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Andorra

Hypertension profile

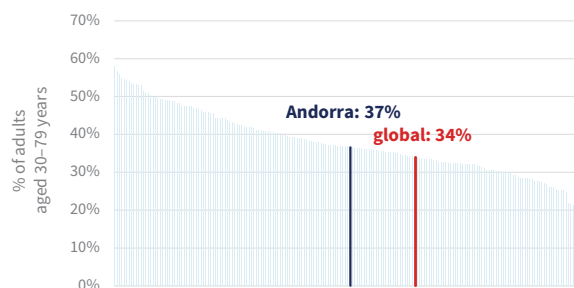
Total population (2024):

81 940

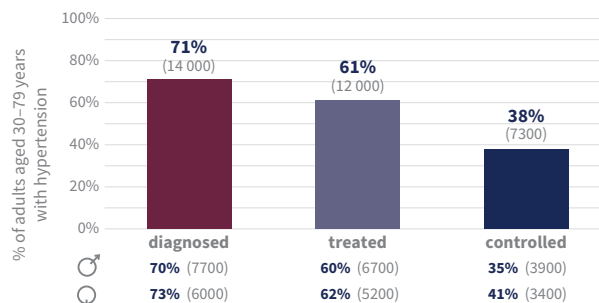
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 37% ♂ 41% ♀ 32%

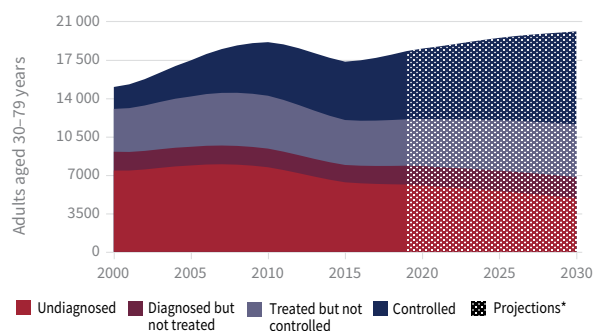
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 19 000 adults aged 30–79 years with hypertension, approximately 12 000 do not have the condition controlled^b

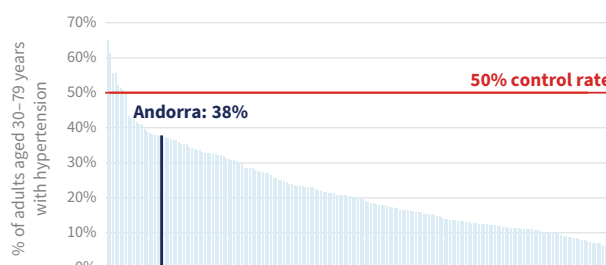


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	no data	no data	no data	2021
Cardiovascular disease deaths	no data	no data	no data	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	50	47	52	2021
Risk of premature death from NCDs (%) ^c	no data	no data	no data	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	9	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	36	35	38	2022
Obesity, adults aged 18+ years (%)	20	23	18	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	27	26	28	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Angola

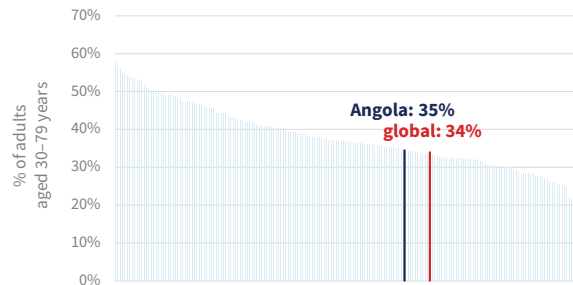
Hypertension profile

Total population (2024): 37 890 000

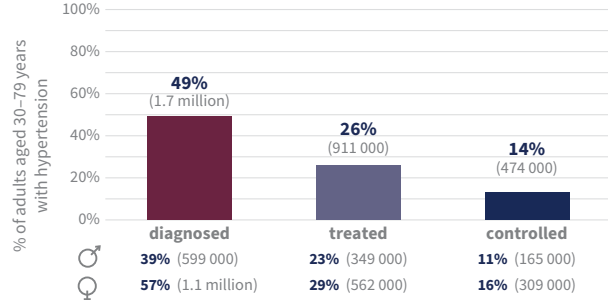
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 35% ♂ 31% ♀ 37%

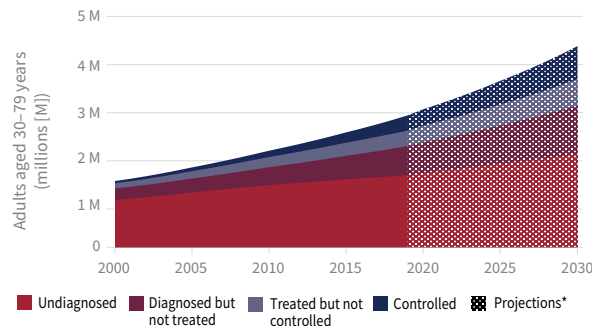
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 3.5 million adults aged 30–79 years with hypertension, approximately 3 million do not have the condition controlled^b

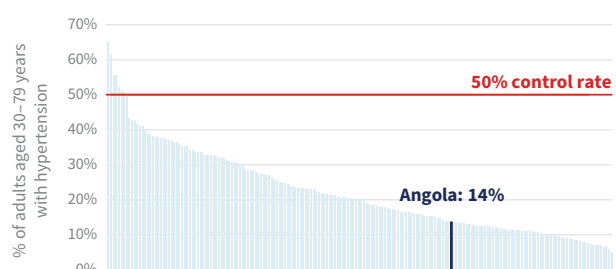


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	273 700	146 100	127 500	2021
Cardiovascular disease deaths	41 290	19 430	21 860	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	53	61	2021
Risk of premature death from NCDs (%) ^c	25	27	23	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	11	5	15	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	17	14	20	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Don't know

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Antigua and Barbuda

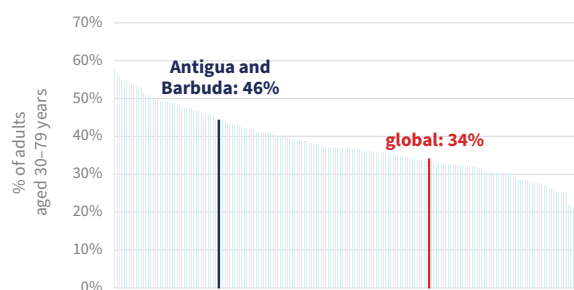
Hypertension profile

Total population (2024): 93 770

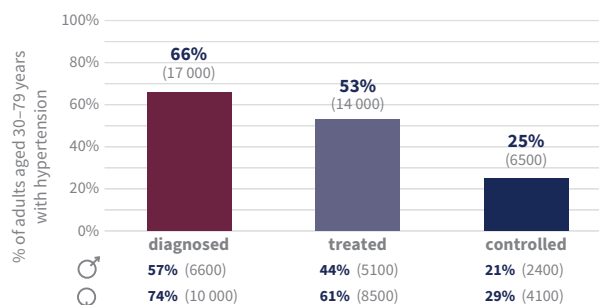
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 46% ♂ 44% ♀ 47%

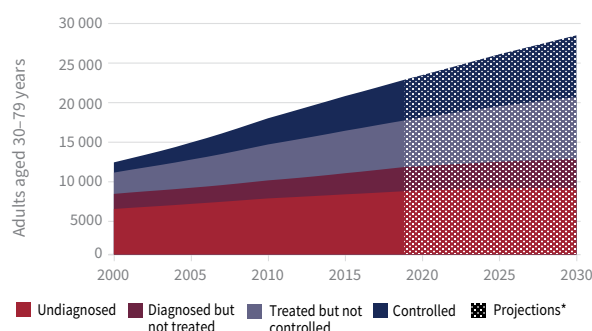
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 26 000 adults aged 30–79 years with hypertension, approximately 19 000 do not have the condition controlled^b

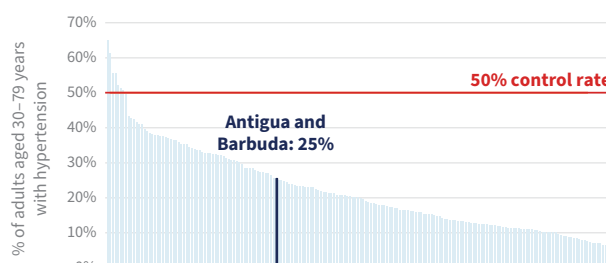


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	660	300	360	2021
Cardiovascular disease deaths	150	60	90	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	55	58	2021
Risk of premature death from NCDs (%) ^c	12	13	12	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	34	24	43	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	9	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	38	31	45	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Argentina

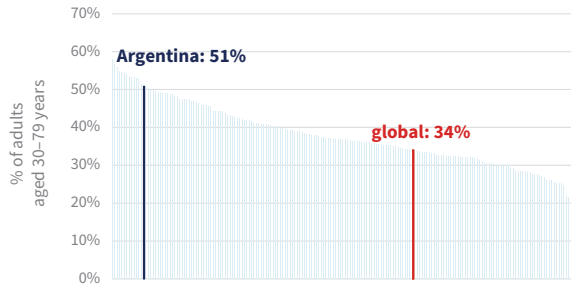
Hypertension profile

Total population (2024): 45 700 000

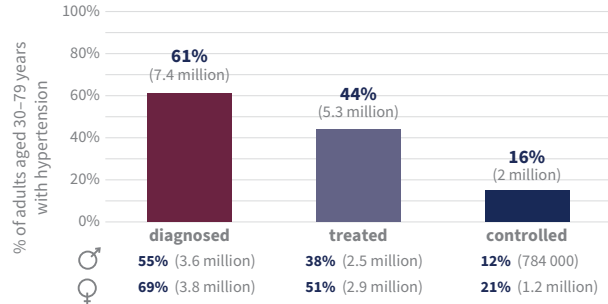
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 51% ♂ 57% ♀ 45%

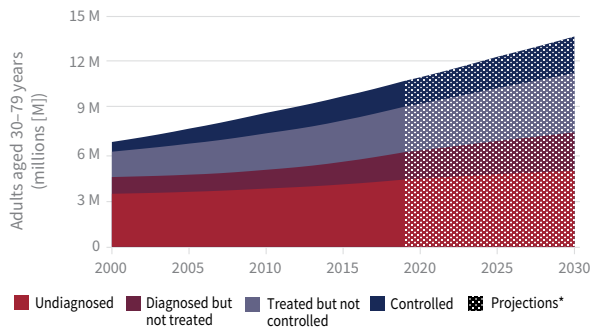
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 12.1 million adults aged 30–79 years with hypertension, approximately 10.1 million do not have the condition controlled^b

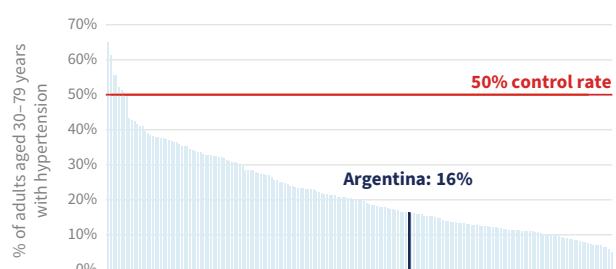


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	433 500	230 600	202 900	2021
Cardiovascular disease deaths	111 100	55 260	55 850	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	48	46	49	2021
Risk of premature death from NCDs (%) ^c	13	16	11	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	8	2021
Current tobacco use, adults aged 15+ years (%)	24	29	19	2022
Obesity, adults aged 18+ years (%)	36	35	37	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	9	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	39	37	40	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Armenia

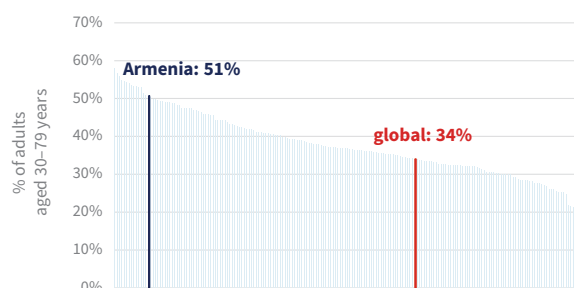
Hypertension profile

Total population (2024): 2 974 000

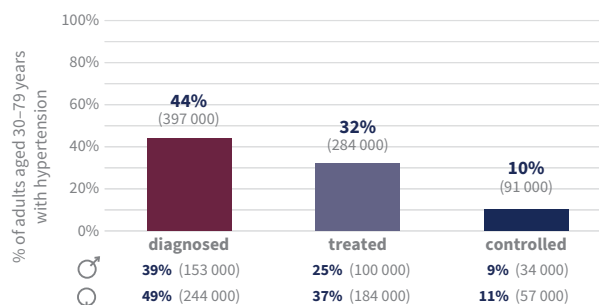
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 51% ♀ 51%

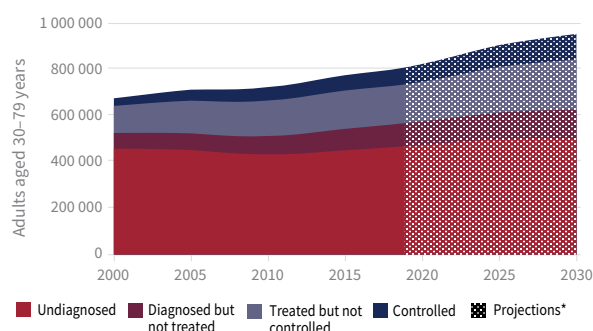
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 894 000 adults aged 30–79 years with hypertension, approximately 803 000 do not have the condition controlled^b

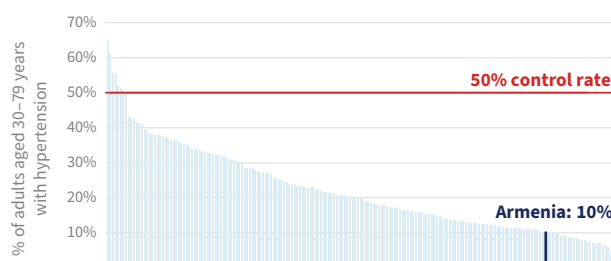


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	35 800	19 820	15 980	2021
Cardiovascular disease deaths	16 780	9000	7780	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	55	57	2021
Risk of premature death from NCDs (%) ^c	21	30	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	7	2021
Current tobacco use, adults aged 15+ years (%)	25	48	2	2022
Obesity, adults aged 18+ years (%)	28	20	34	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	27	28	25	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Australia

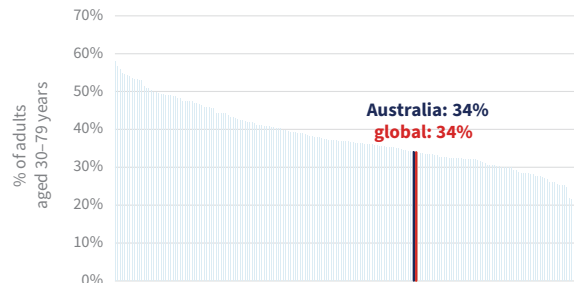
Hypertension profile

Total population (2024): 26 710 000

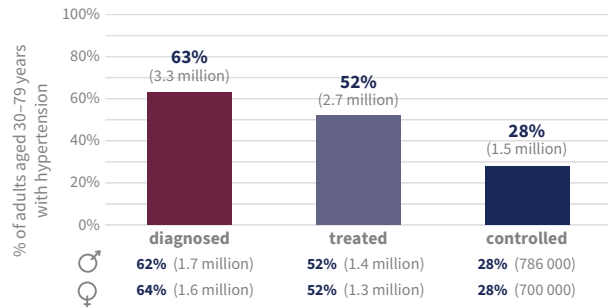
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 34% ♀ 32%

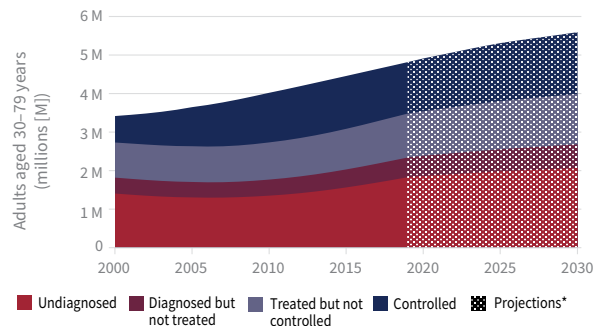
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 5.2 million adults aged 30–79 years with hypertension, approximately 3.8 million do not have the condition controlled^b

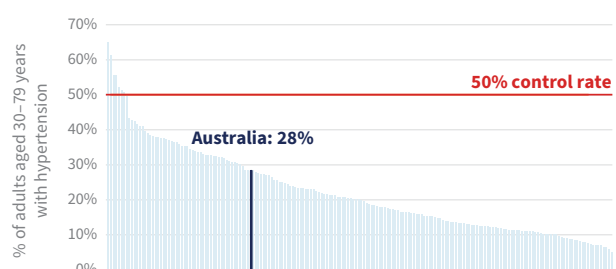


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	173 600	90 360	83 280	2021
Cardiovascular disease deaths	43 760	22 220	21 530	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	41	40	43	2021
Risk of premature death from NCDs (%) ^c	8	10	7	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	9	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	13	15	11	2022
Obesity, adults aged 18+ years (%)	32	33	31	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	25	24	27	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Austria

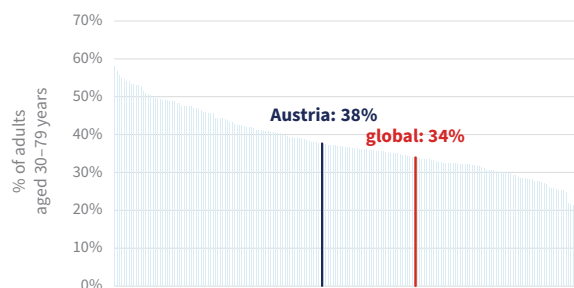
Hypertension profile

Total population (2024): 9 121 000

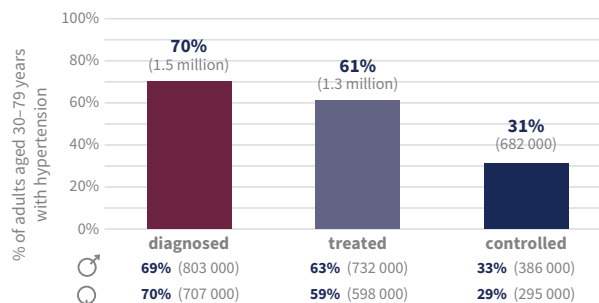
Prevalence of hypertension among adults aged 30–79 years (2024)^a

38% 41% 35%

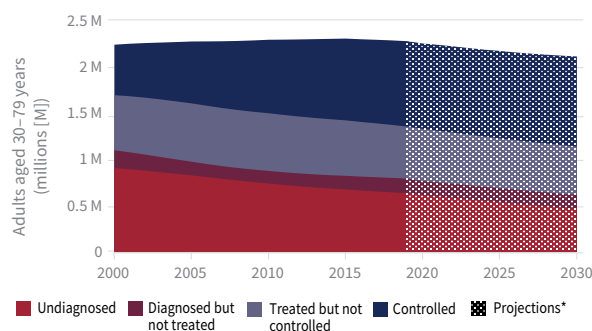
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.2 million adults aged 30–79 years with hypertension, approximately 1.5 million do not have the condition controlled^b

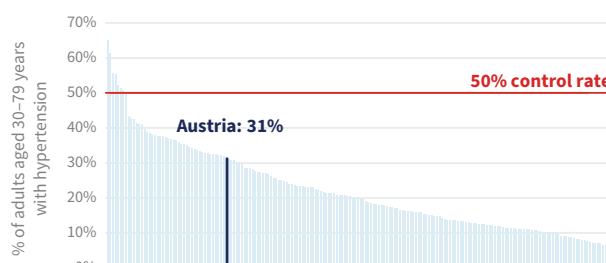


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	93 910	46 750	47 160	2021
Cardiovascular disease deaths	32 770	14 770	18 000	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	50	49	50	2021
Risk of premature death from NCDs (%) ^c	10	13	7	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	9	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	25	26	24	2022
Obesity, adults aged 18+ years (%)	17	20	14	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	12	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	20	20	20	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Azerbaijan

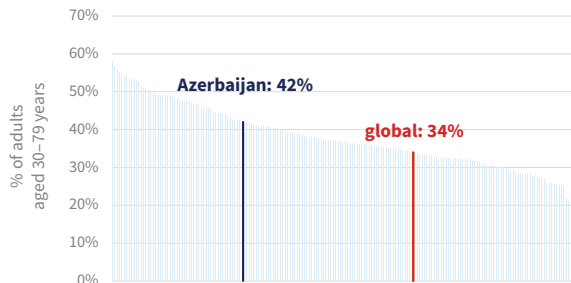
Hypertension profile

Total population (2024): 10 340 000

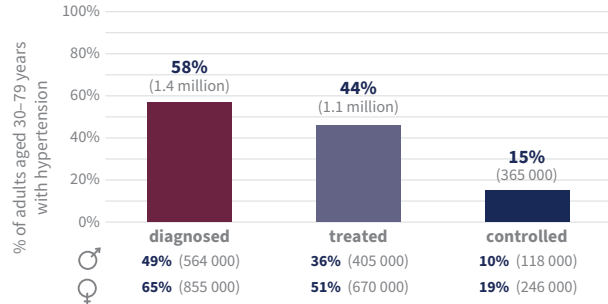
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 42% ♂ 41% ♀ 43%

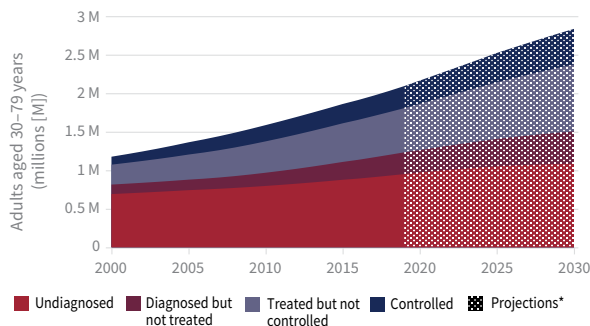
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.5 million adults aged 30–79 years with hypertension, approximately 2.1 million do not have the condition controlled^b

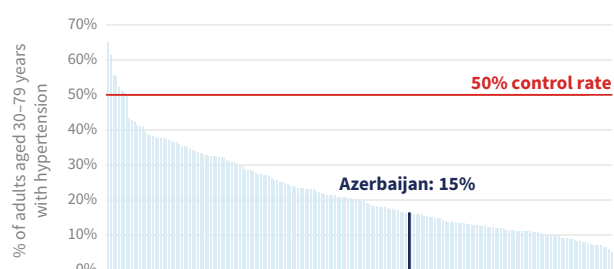


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	72 330	36 780	35 550	2021
Cardiovascular disease deaths	23 910	9410	14 510	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	55	60	2021
Risk of premature death from NCDs (%) ^c	17	20	15	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	7	2021
Current tobacco use, adults aged 15+ years (%)	20	39	0	2022
Obesity, adults aged 18+ years (%)	28	19	35	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	24	25	23	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature death from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Bahamas

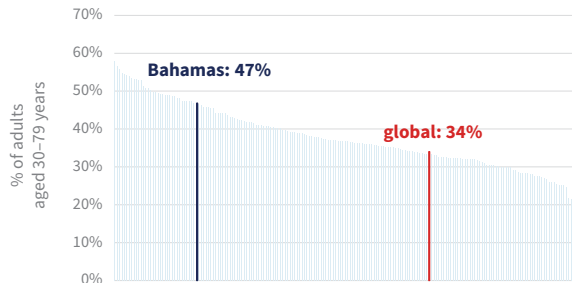
Hypertension profile

Total population (2024): 401 300

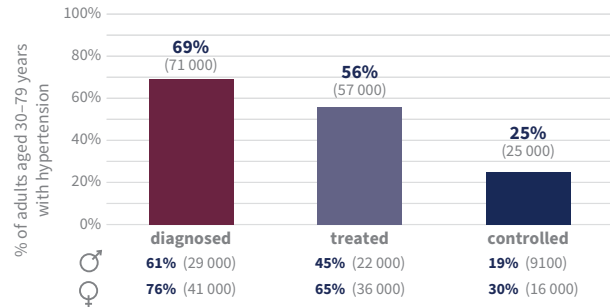
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 47% ♀ 47%

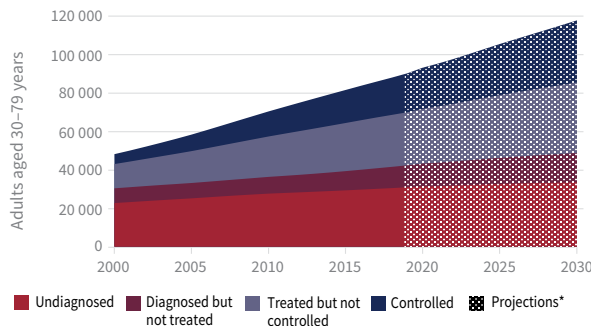
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 103 000 adults aged 30–79 years with hypertension, approximately 78 000 do not have the condition controlled^b

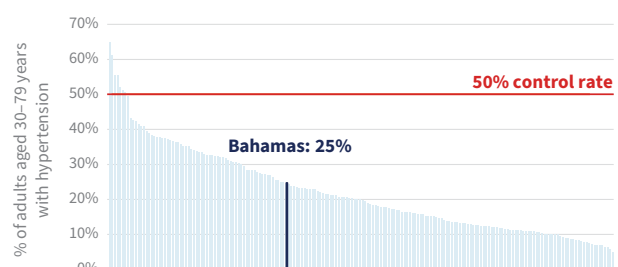


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	4550	2410	2140	2021
Cardiovascular disease deaths	1110	570	550	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	58	59	2021
Risk of premature death from NCDs (%) ^c	20	23	18	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	11	21	2	2022
Obesity, adults aged 18+ years (%)	48	39	55	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	7	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	37	27	47	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Bahrain

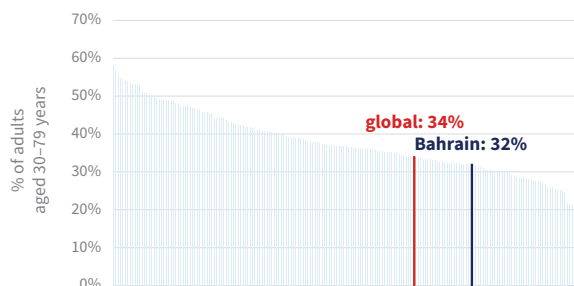
Hypertension profile

Total population (2024): 1 607 000

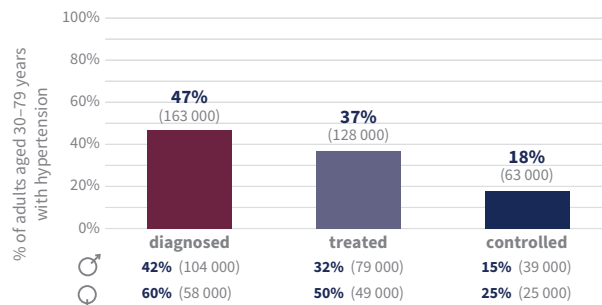
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 32% ♀ 29%

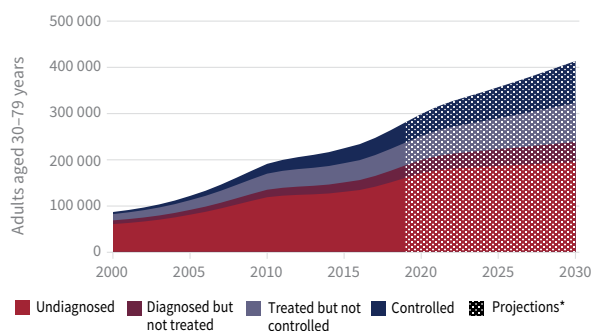
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 347 000 adults aged 30–79 years with hypertension, approximately 283 000 do not have the condition controlled^b

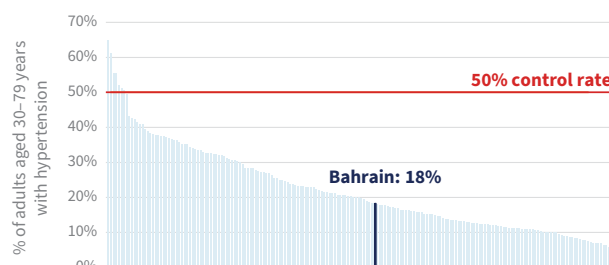


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	6120	3560	2560	2021
Cardiovascular disease deaths	1760	1020	740	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	53	51	56	2021
Risk of premature death from NCDs (%) ^c	15	14	16	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%) ^d	15	25	5	2022
Obesity, adults aged 18+ years (%)	37	34	44	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	39	36	43	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Bangladesh

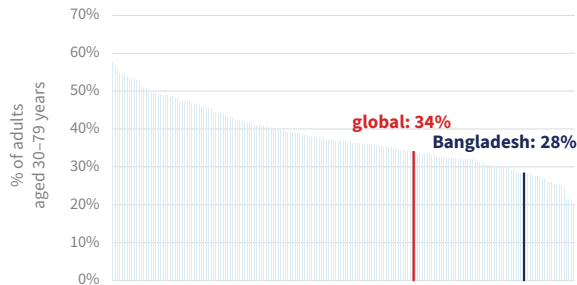
Hypertension profile

Total population (2024): 173 600 000

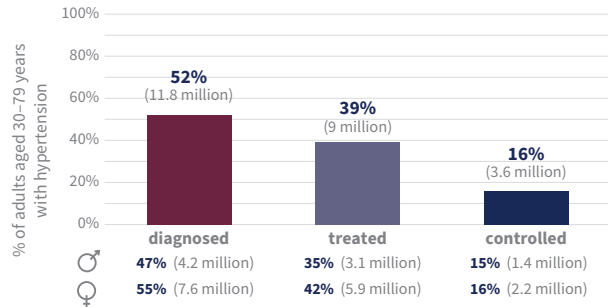
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 28% ♀ 34%

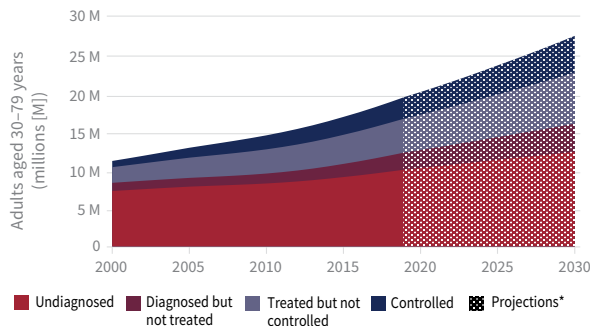
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 22.8 million adults aged 30–79 years with hypertension, approximately 19.2 million do not have the condition controlled^b

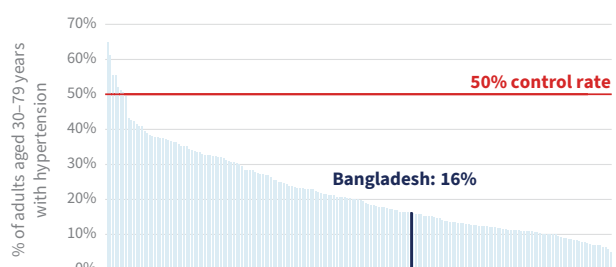


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	917 300	488 800	428 500	2021
Cardiovascular disease deaths	283 800	135 700	148 100	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	52	48	56	2021
Risk of premature death from NCDs (%) ^c	18	20	16	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	9	8	2021
Current tobacco use, adults aged 15+ years (%)	33	51	15	2022
Obesity, adults aged 18+ years (%)	5	3	8	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	0	20	21	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Barbados

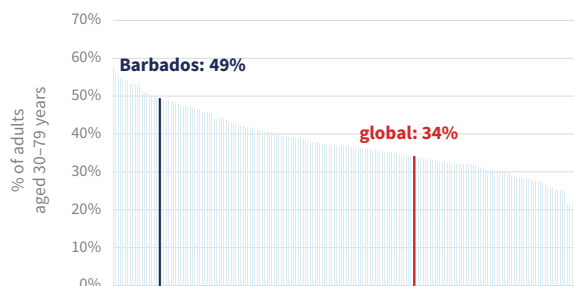
Hypertension profile

Total population (2024): 282 500

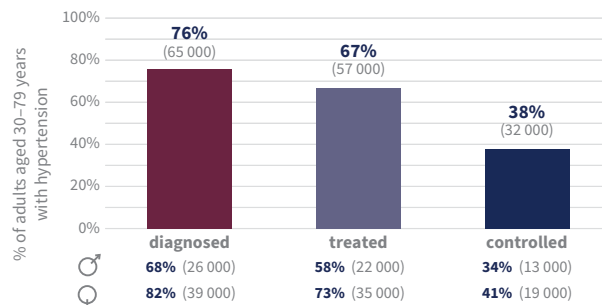
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 49% ♂ 46% ♀ 52%

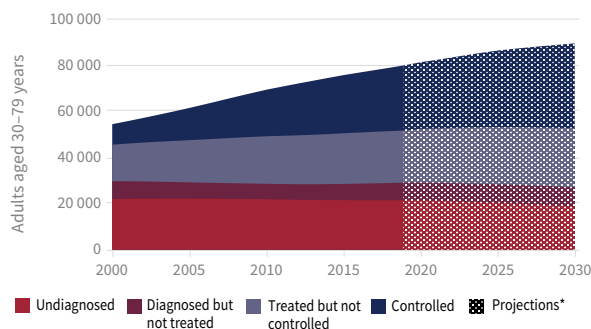
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 86 000 adults aged 30–79 years with hypertension, approximately 53 000 do not have the condition controlled^b

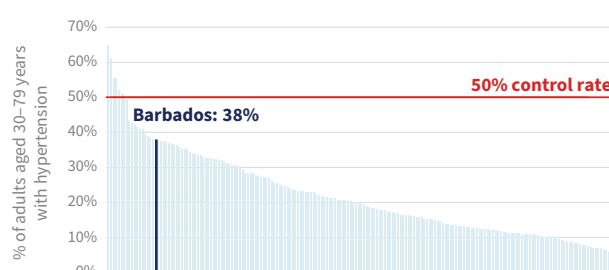


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	2610	1250	1370	2021
Cardiovascular disease deaths	690	310	380	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	54	54	2021
Risk of premature death from NCDs (%) ^c	14	16	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	6	2021
Current tobacco use, adults aged 15+ years (%)	7	12	2	2022
Obesity, adults aged 18+ years (%)	38	27	48	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	9	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	44	36	51	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Belarus

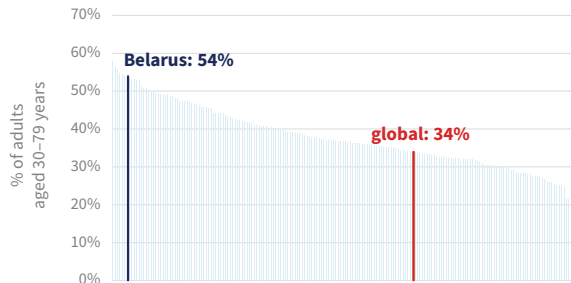
Hypertension profile

Total population (2024): 9 057 000

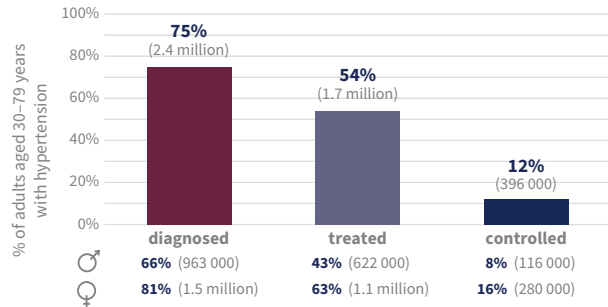
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 54% ♀ 53% ♀ 55%

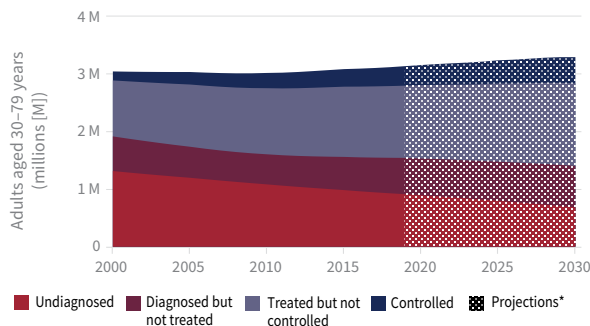
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 3.2 million adults aged 30–79 years with hypertension, approximately 2.8 million do not have the condition controlled^b

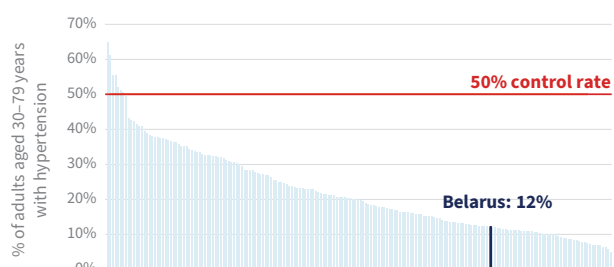


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	134 100	69 010	65 070	2021
Cardiovascular disease deaths	66 520	31 440	35 080	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	58	59	2021
Risk of premature death from NCDs (%) ^c	24	36	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	30	46	14	2022
Obesity, adults aged 18+ years (%)	27	22	30	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	14	15	14	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Belgium

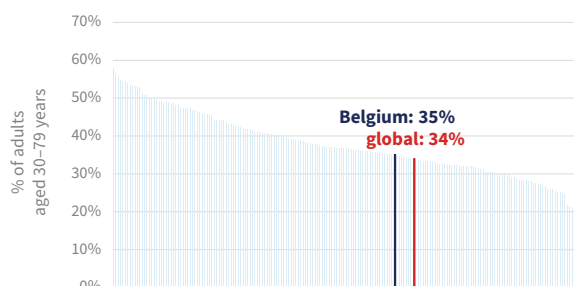
Hypertension profile

Total population (2024): 11 740 000

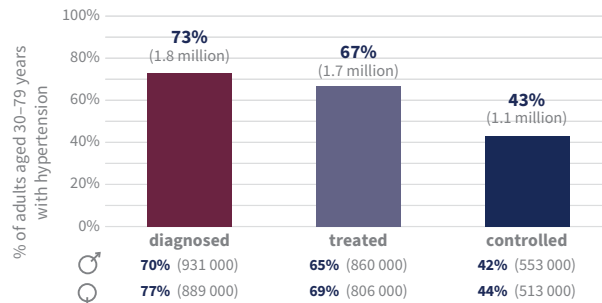
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 35% ♂ 38% ♀ 33%

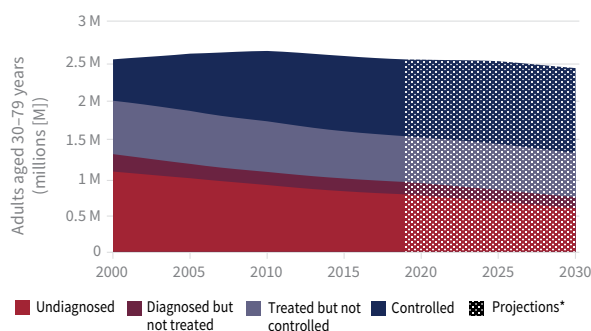
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.5 million adults aged 30–79 years with hypertension, approximately 1.4 million do not have the condition controlled^b

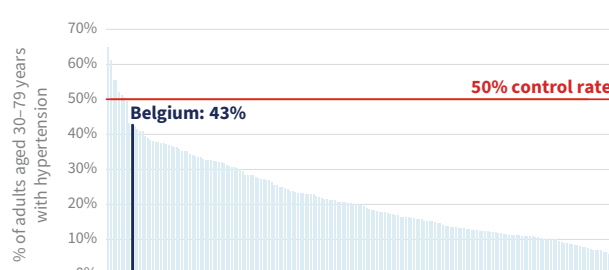


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	112 000	56 480	55 560	2021
Cardiovascular disease deaths	25 450	12 140	13 310	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	45	45	45	2021
Risk of premature death from NCDs (%) ^c	9	11	7	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	9	7	2021
Current tobacco use, adults aged 15+ years (%)	27	29	25	2022
Obesity, adults aged 18+ years (%)	22	21	23	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	9	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	25	22	28	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Don't know
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Belize

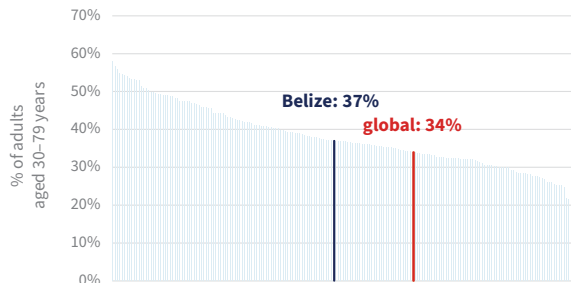
Hypertension profile

Total population (2024): 417 100

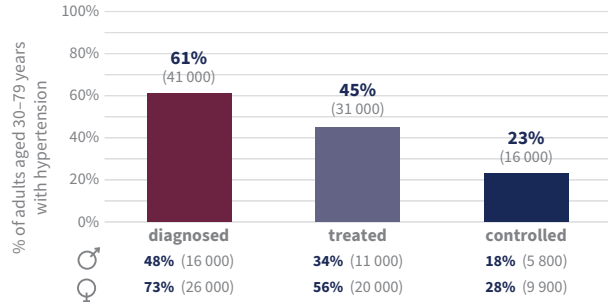
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 37% ♀ 37%

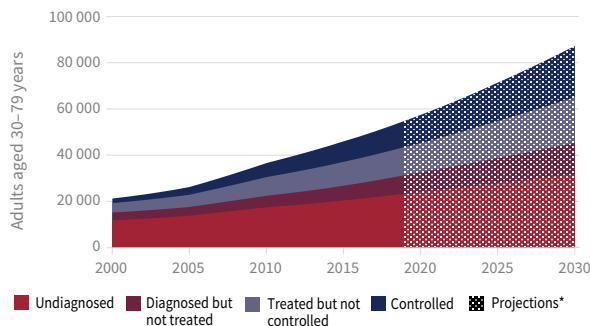
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 68 000 adults aged 30–79 years with hypertension, approximately 53 000 do not have the condition controlled^b

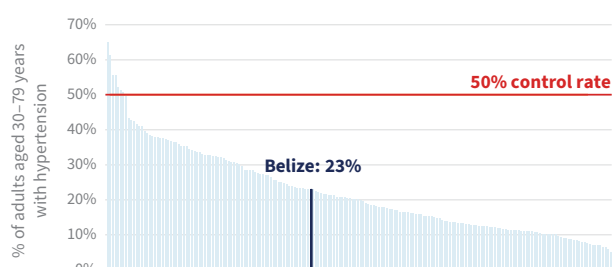


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	1930	1100	830	2021
Cardiovascular disease deaths	350	160	190	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	53	53	52	2021
Risk of premature death from NCDs (%) ^c	15	14	17	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%) ^d	9	16	2	2022
Obesity, adults aged 18+ years (%)	42	32	52	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	42	35	48	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Benin

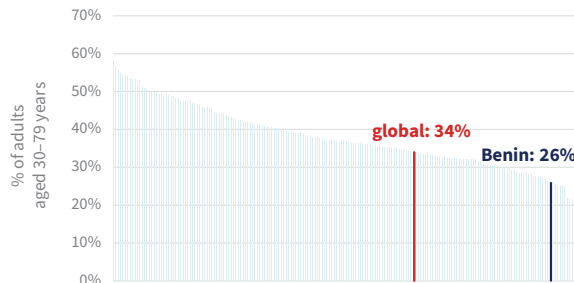
Hypertension profile

Total population (2024): 14 460 000

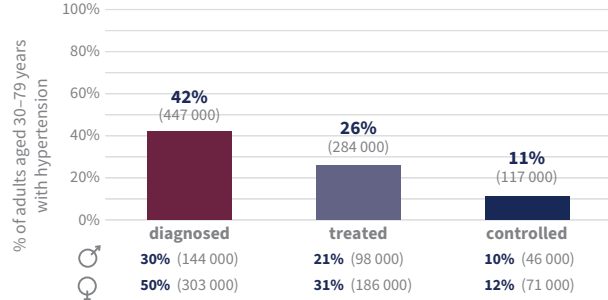
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 26% ♂ 23% ♀ 28%

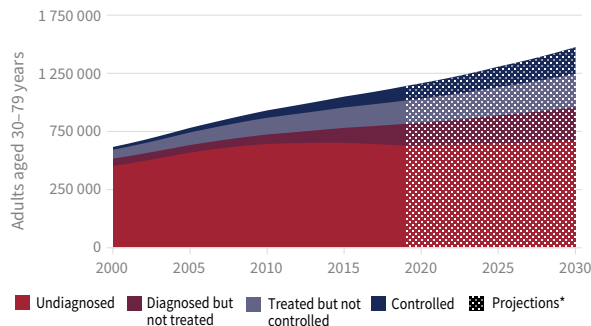
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.1 million adults aged 30–79 years with hypertension, approximately 957 000 do not have the condition controlled^b

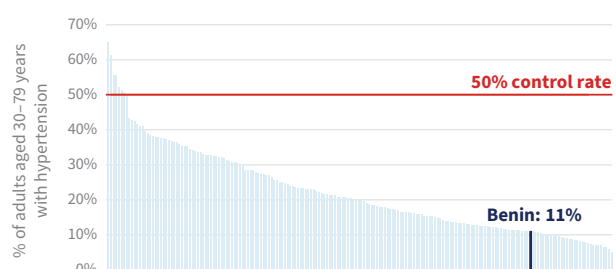


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	99 640	54 150	45 490	2021
Cardiovascular disease deaths	14 330	7040	7300	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	53	60	2021
Risk of premature death from NCDs (%) ^c	21	23	19	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	6	11	2	2022
Obesity, adults aged 18+ years (%)	10	6	13	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	7	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	18	16	20	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Bhutan

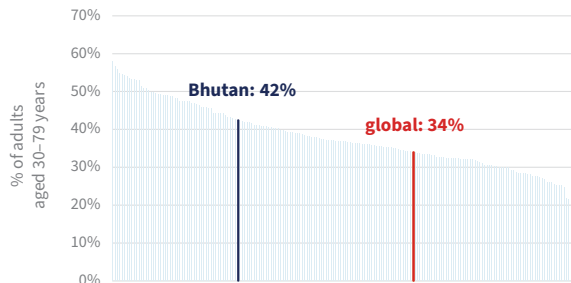
Hypertension profile

Total population (2024): 791 500

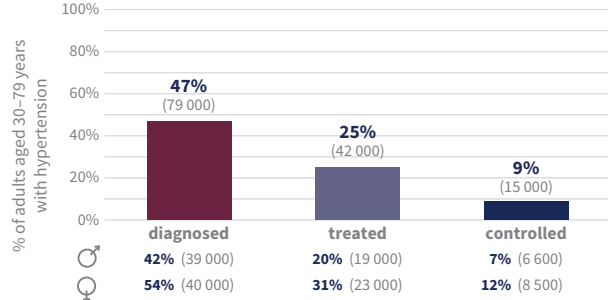
Prevalence of hypertension among adults aged 30–79 years (2024)^a

42% 44% 41%

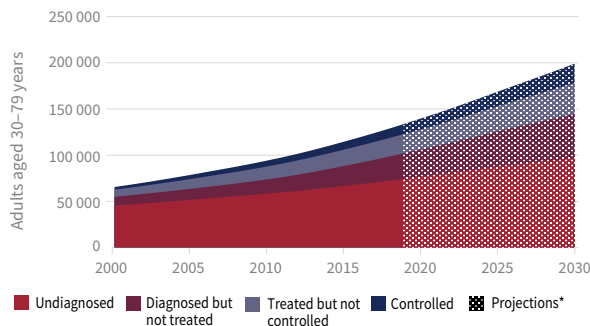
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 166 000 adults aged 30–79 years with hypertension, approximately 151 000 do not have the condition controlled^b

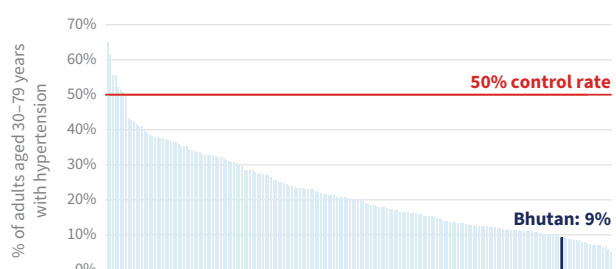


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	3780	2060	1730	2021
Cardiovascular disease deaths	1050	590	470	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	48	47	49	2021
Risk of premature death from NCDs (%) ^c	16	17	15	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	9	8	2021
Current tobacco use, adults aged 15+ years (%)	19	26	11	2022
Obesity, adults aged 18+ years (%)	12	9	15	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	10	9	11	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Bolivia (Plurinational State of)

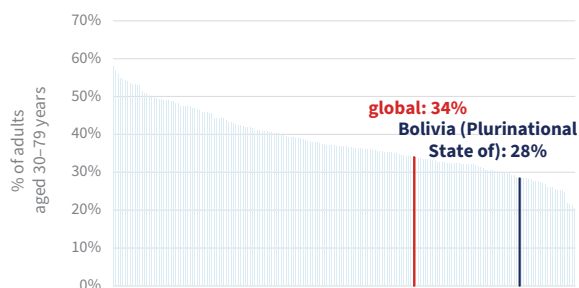
Hypertension profile

Total population (2024): 12 410 000

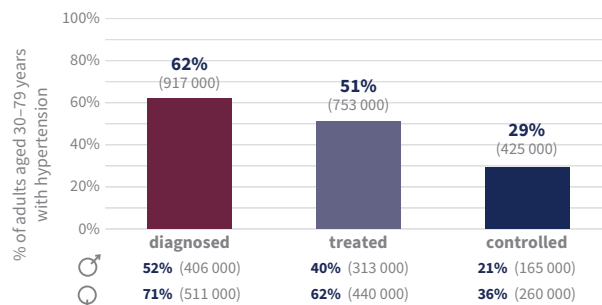
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 28% ♂ 30% ♀ 27%

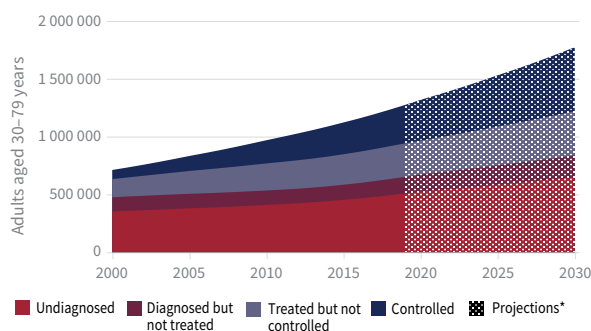
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.5 million adults aged 30–79 years with hypertension, approximately 1.1 million do not have the condition controlled^b

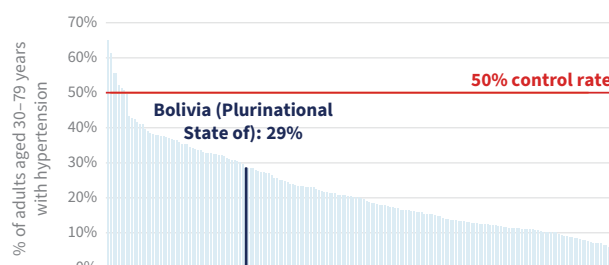


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	115 400	66 770	48 660	2021
Cardiovascular disease deaths	14 130	7950	6180	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	45	43	46	2021
Risk of premature death from NCDs (%) ^c	20	21	19	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	8	2021
Current tobacco use, adults aged 15+ years (%)	12	21	4	2022
Obesity, adults aged 18+ years (%)	28	22	33	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	23	18	27	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Bosnia and Herzegovina

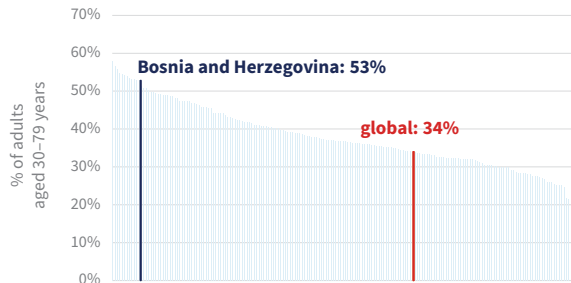
Hypertension profile

Total population (2024): 3 164 000

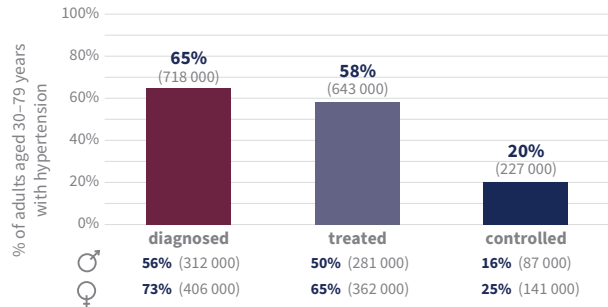
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 53% ♀ 54% 51%

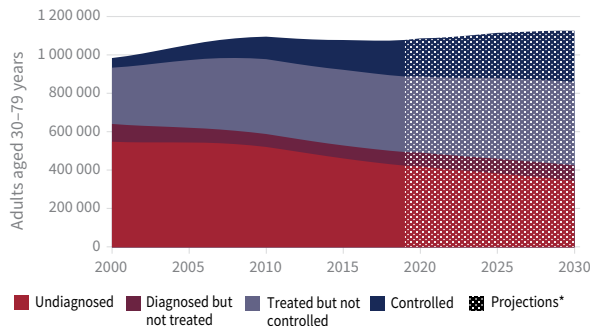
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.1 million adults aged 30–79 years with hypertension, approximately 883 000 do not have the condition controlled^b

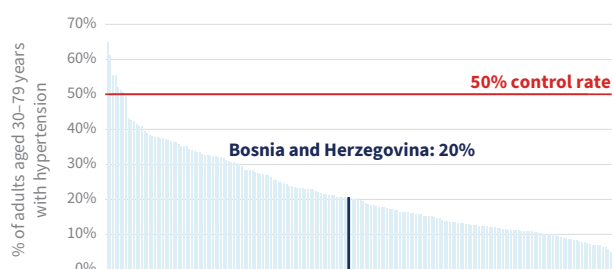


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	56 490	23 660	32 830	2021
Cardiovascular disease deaths	23 900	7870	16 030	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	55	58	2021
Risk of premature death from NCDs (%) ^c	17	22	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	12	15	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	36	42	31	2022
Obesity, adults aged 18+ years (%)	25	25	26	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	21	18	24	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Botswana

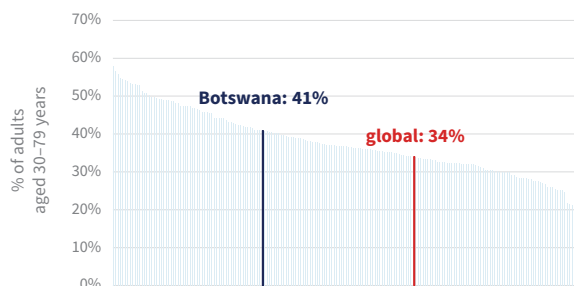
Hypertension profile

Total population (2024): 2 521 000

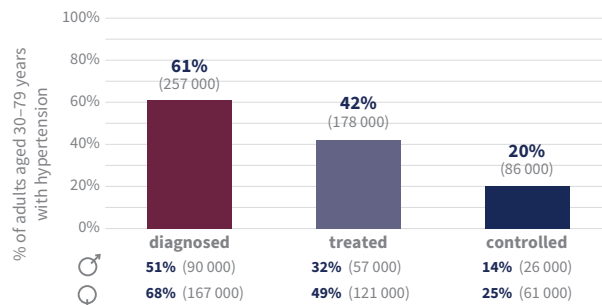
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 41% ♂ 37% ♀ 44%

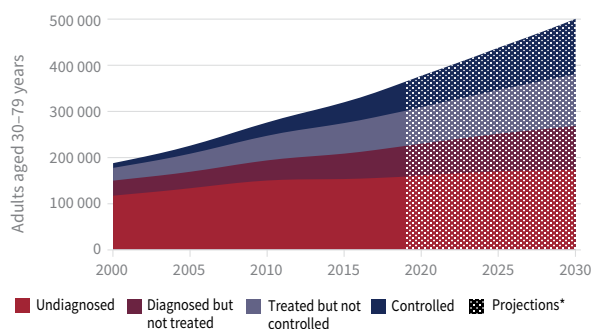
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 425 000 adults aged 30–79 years with hypertension, approximately 338 000 do not have the condition controlled^b

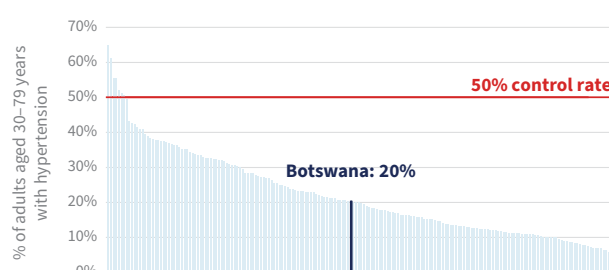


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	22 700	12 000	10 700	2021
Cardiovascular disease deaths	2540	1000	1540	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	61	60	62	2021
Risk of premature death from NCDs (%) ^c	19	18	20	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	19	30	7	2022
Obesity, adults aged 18+ years (%)	17	8	26	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	22	17	27	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Brazil

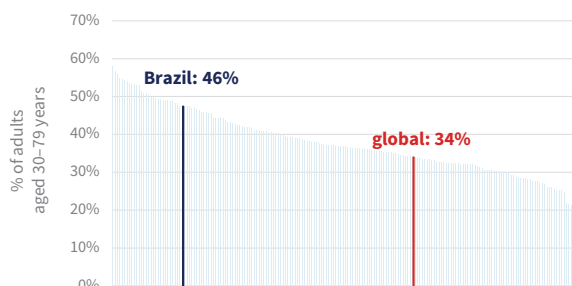
Hypertension profile

Total population (2024): 212 000 000

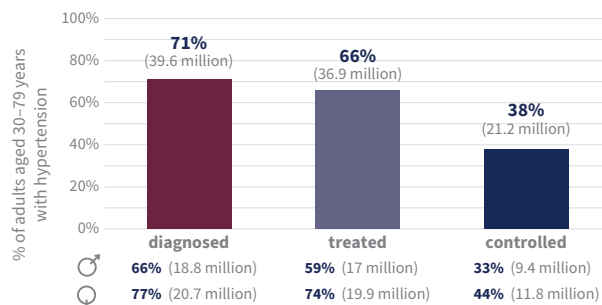
Prevalence of hypertension among adults aged 30–79 years (2024)^a

46% 49% 43%

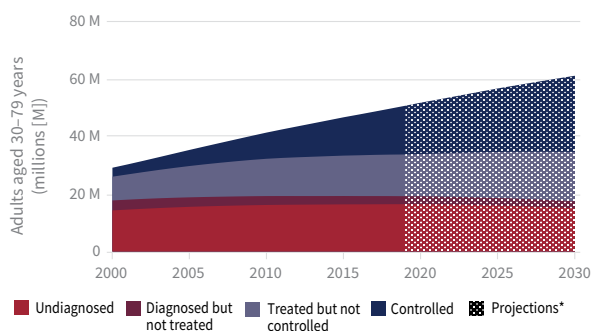
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 55.7 million adults aged 30–79 years with hypertension, approximately 34.5 million do not have the condition controlled^b

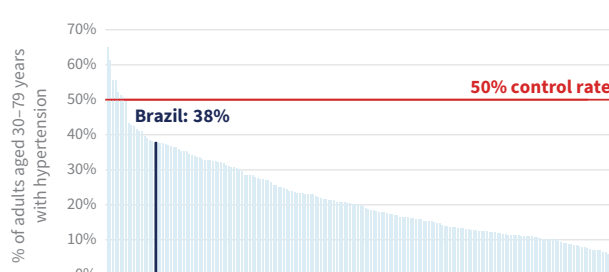


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	1 907 000	1 076 000	830 800	2021
Cardiovascular disease deaths	411 600	219 400	192 200	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	50	50	50	2021
Risk of premature death from NCDs (%) ^c	15	17	12	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	8	2021
Current tobacco use, adults aged 15+ years (%)	12	15	9	2022
Obesity, adults aged 18+ years (%)	29	25	33	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	9	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	40	36	45	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Brunei Darussalam

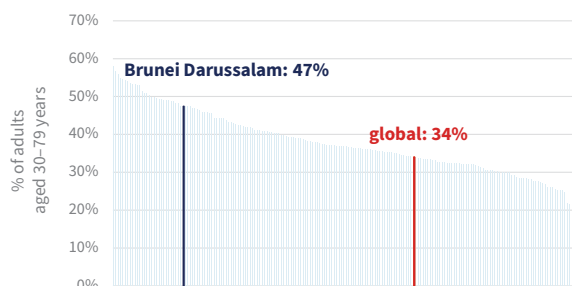
Hypertension profile

Total population (2024): 462 700

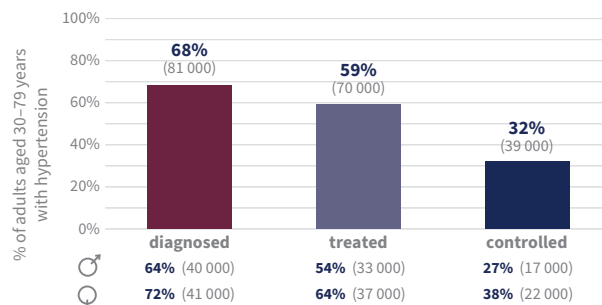
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 47% ♀ 48% 47%

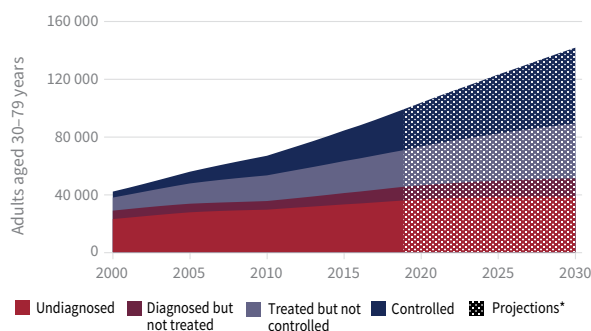
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 119 000 aged 30–79 years with hypertension, approximately 81 000 do not have the condition controlled^b

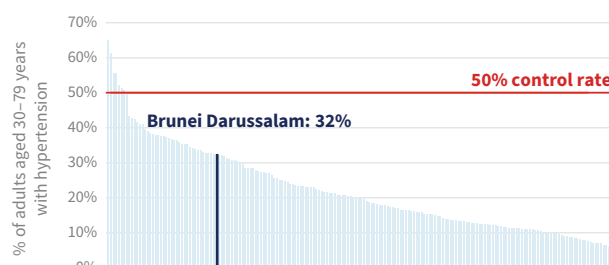


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	1970	1100	860	2021
Cardiovascular disease deaths	570	350	220	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	48	49	47	2021
Risk of premature death from NCDs (%) ^c	15	17	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	11	12	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	16	31	2	2022
Obesity, adults aged 18+ years (%)	32	31	34	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	33	28	37	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Bulgaria

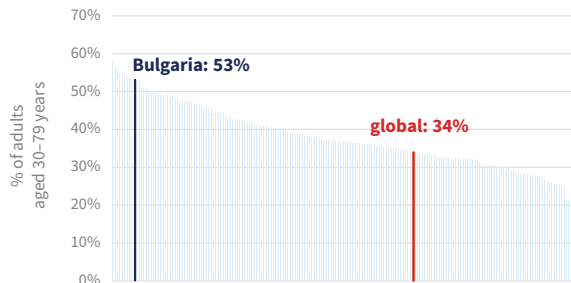
Hypertension profile

Total population (2024): 6 758 000

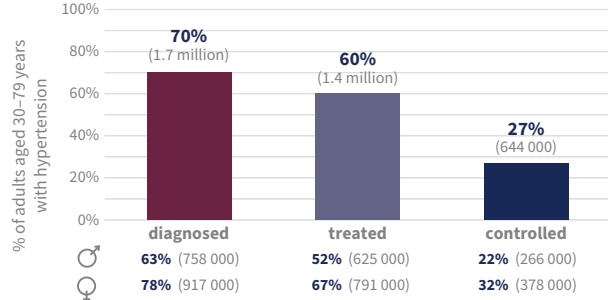
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 53% ♀ 55% 51%

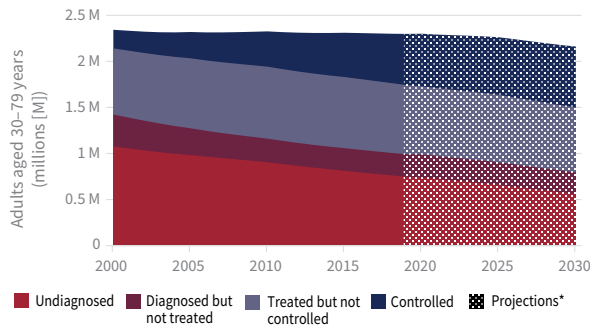
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.4 million adults aged 30–79 years with hypertension, approximately 1.7 million do not have the condition controlled^b

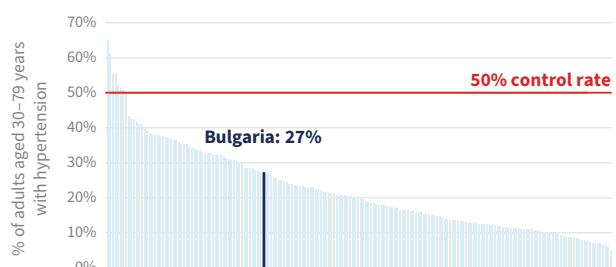


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	148 900	77 240	71 650	2021
Cardiovascular disease deaths	81 710	39 290	42 420	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	65	64	66	2021
Risk of premature death from NCDs (%) ^c	26	34	17	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	13	15	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	40	40	39	2022
Obesity, adults aged 18+ years (%)	24	26	22	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	12	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	32	32	32	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Burkina Faso

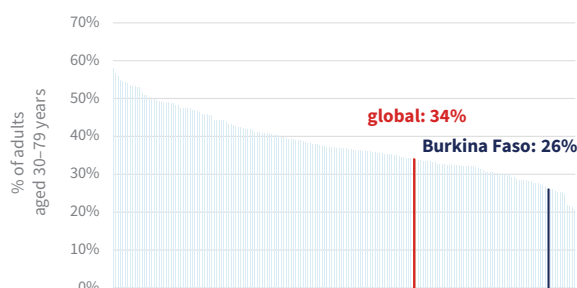
Hypertension profile

Total population (2024): 23 550 000

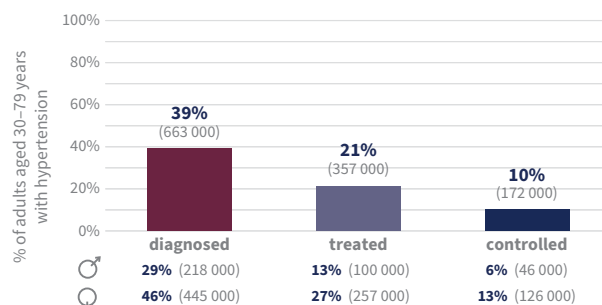
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 26% ♂ 23% ♀ 28%

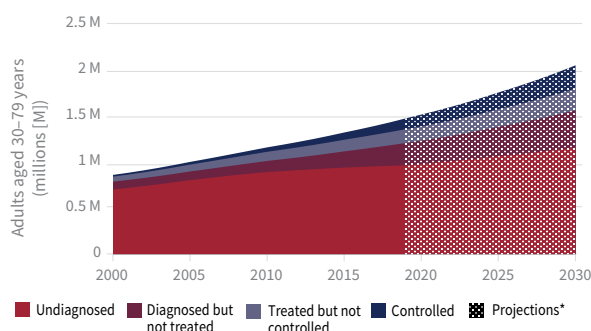
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.7 million adults aged 30–79 years with hypertension, approximately 1.5 million do not have the condition controlled^b

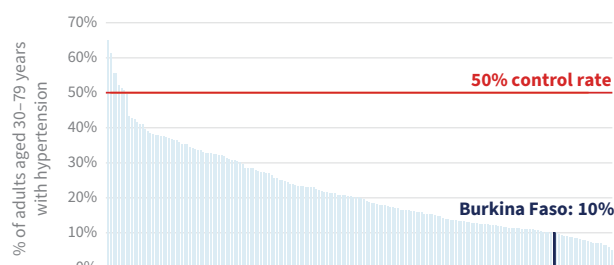


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	162 600	86 860	75 710	2021
Cardiovascular disease deaths	21 980	11 270	10 710	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	53	49	57	2021
Risk of premature death from NCDs (%) ^c	23	26	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	14	23	6	2022
Obesity, adults aged 18+ years (%)	6	4	9	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	7	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	17	14	19	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Burundi

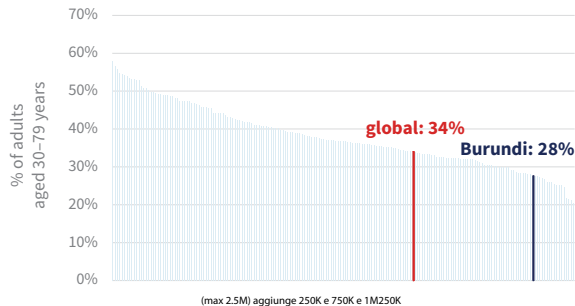
Hypertension profile

Total population (2024): 14 050 000

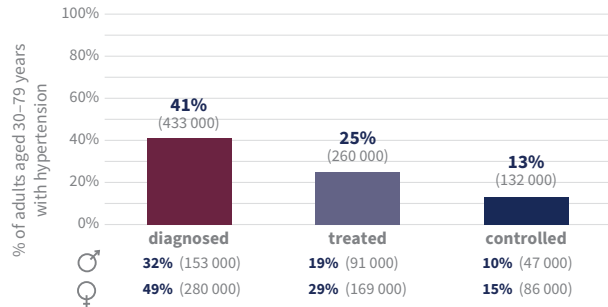
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 28% ♀ 29%

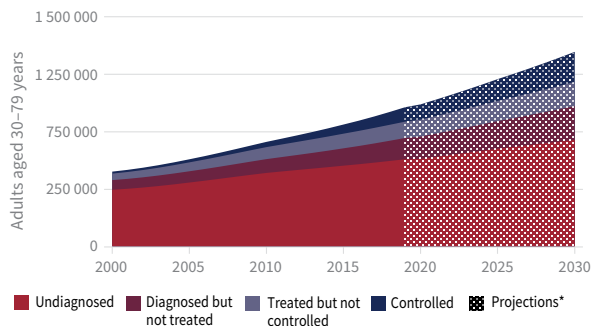
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.1 million adults aged 30–79 years with hypertension, approximately 923 000 do not have the condition controlled^b

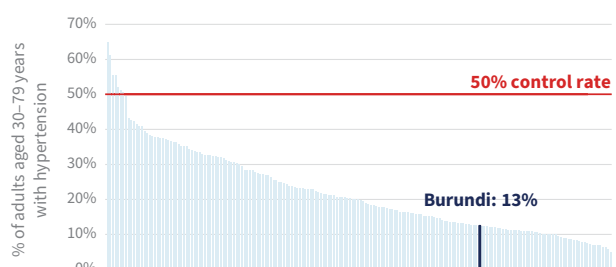


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	83 300	44 240	39 060	2021
Cardiovascular disease deaths	11 790	5560	6240	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	50	62	2021
Risk of premature death from NCDs (%) ^c	25	26	24	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	11	17	5	2022
Obesity, adults aged 18+ years (%)	5	5	4	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	14	14	15	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Cabo Verde

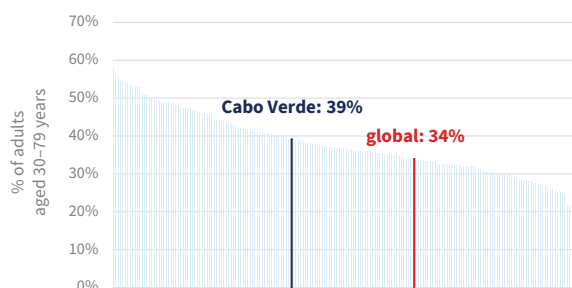
Hypertension profile

Total population (2024): 524 900

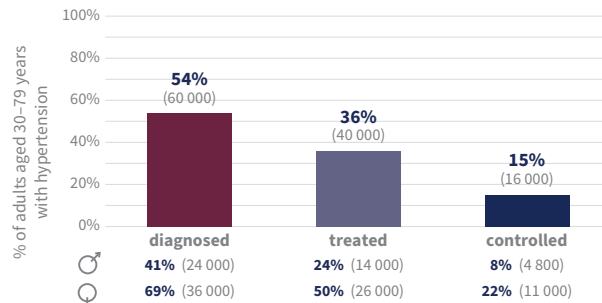
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 39% ♂ 41% ♀ 38%

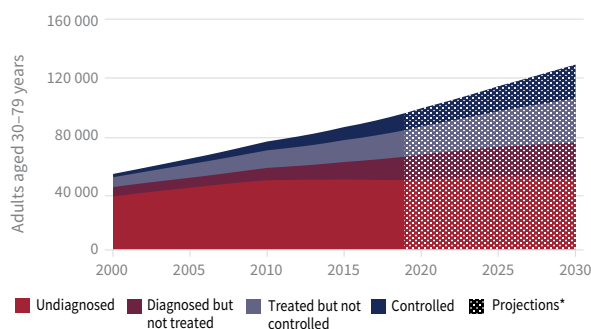
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 110 000 adults aged 30–79 years with hypertension, approximately 94 000 do not have the condition controlled^b

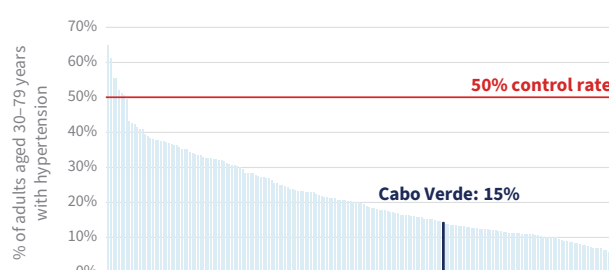


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	3230	1850	1380	2021
Cardiovascular disease deaths	1020	530	500	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	60	58	61	2021
Risk of premature death from NCDs (%) ^c	17	23	12	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	11	17	5	2022
Obesity, adults aged 18+ years (%)	15	8	22	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	31	22	39	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Cambodia

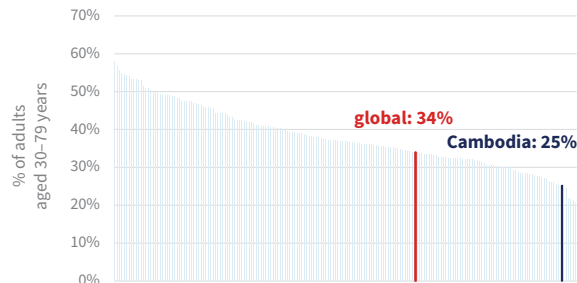
Hypertension profile

Total population (2024): 17 640 000

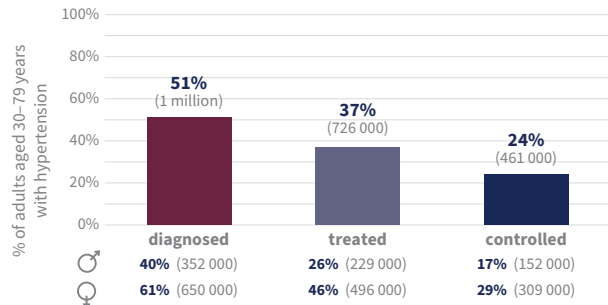
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 25% ♀ 24% 26%

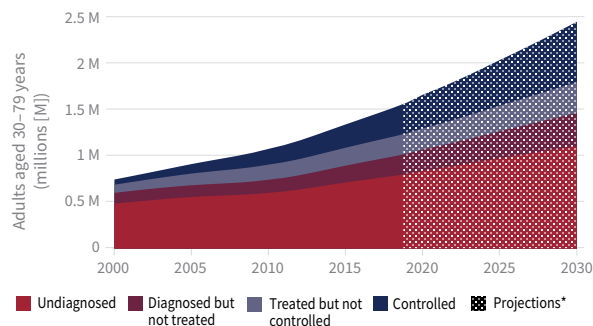
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.9 million adults aged 30–79 years with hypertension, approximately 1.5 million do not have the condition controlled^b

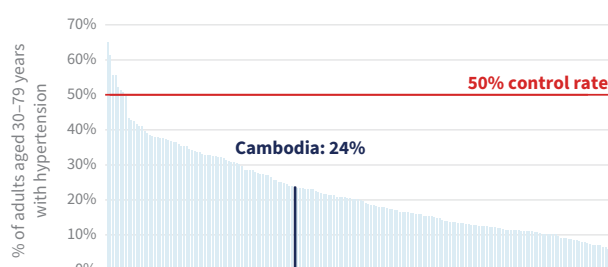


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	123 300	63 850	59 490	2021
Cardiovascular disease deaths	33 800	15 480	18 320	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	50	48	51	2021
Risk of premature death from NCDs (%) ^c	23	26	20	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	10	2021
Current tobacco use, adults aged 15+ years (%)	17	29	6	2022
Obesity, adults aged 18+ years (%)	4	3	6	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	13	13	14	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Cameroon

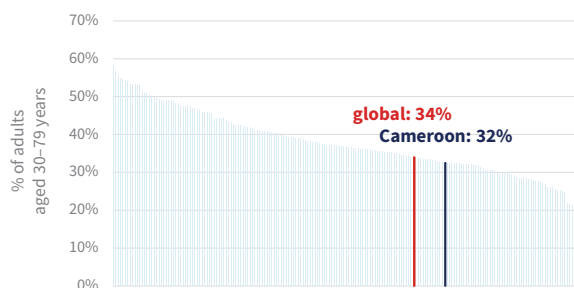
Hypertension profile

Total population (2024): 29 120 000

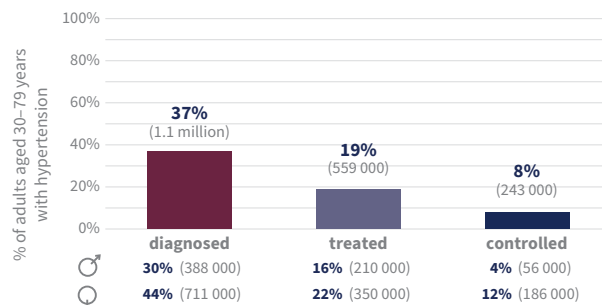
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 32% ♂ 29% ♀ 35%

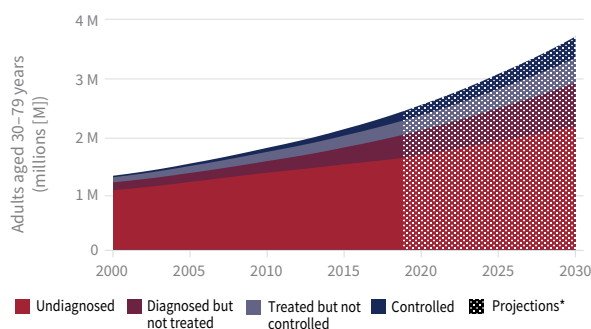
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.9 million adults aged 30–79 years with hypertension, approximately 2.7 million do not have the condition controlled^b

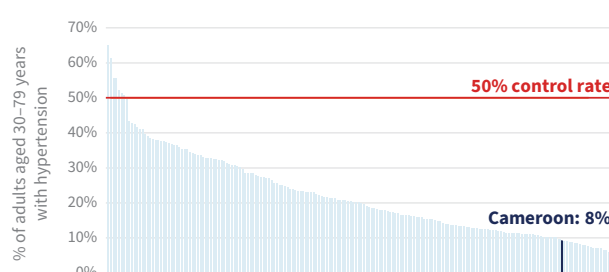


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	213 400	114 200	99 270	2021
Cardiovascular disease deaths	29 980	14 740	15 240	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	57	61	2021
Risk of premature death from NCDs (%) ^c	24	25	23	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	7	12	1	2022
Obesity, adults aged 18+ years (%)	13	8	19	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	8	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	19	16	21	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Canada

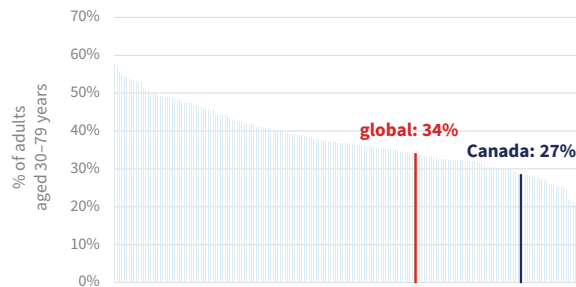
Hypertension profile

Total population (2024): 39 740 000

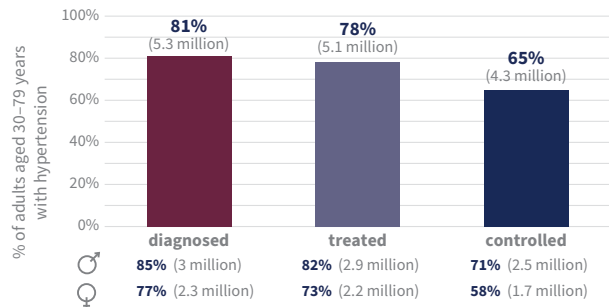
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 27% ♀ 30% ♀ 25%

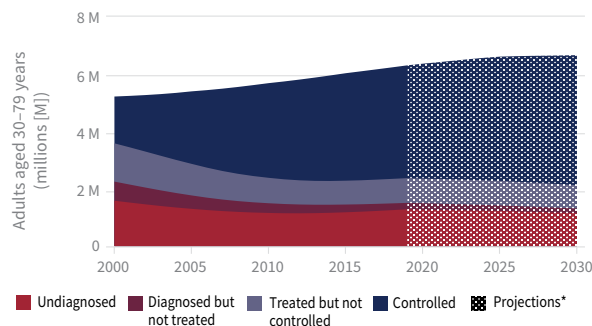
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 6.5 million adults aged 30–79 years with hypertension, approximately 2.3 million do not have the condition controlled^b

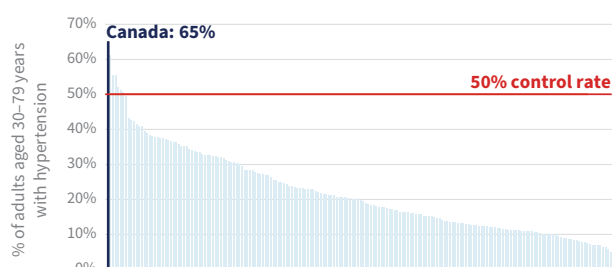


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	310 800	164 400	146 400	2021
Cardiovascular disease deaths	75 790	40 560	35 220	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	43	42	44	2021
Risk of premature death from NCDs (%) ^c	10	12	8	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	11	8	2021
Current tobacco use, adults aged 15+ years (%)	12	14	10	2022
Obesity, adults aged 18+ years (%)	27	29	26	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	10	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	37	36	39	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Central African Republic

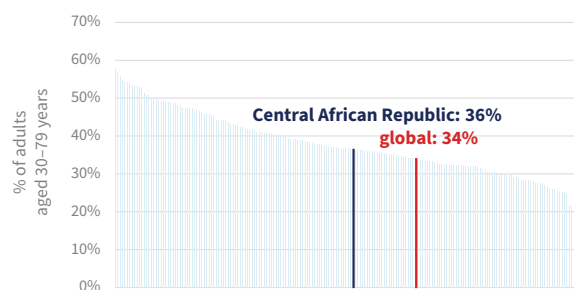
Hypertension profile

Total population (2024): 5 331 000

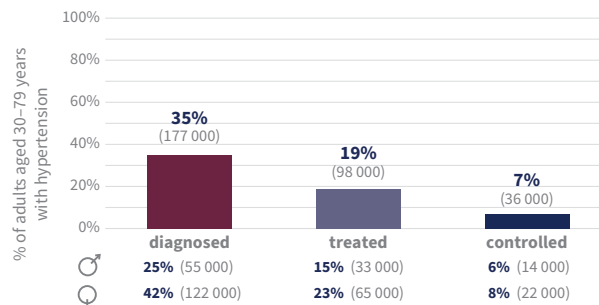
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 36% ♂ 33% ♀ 40%

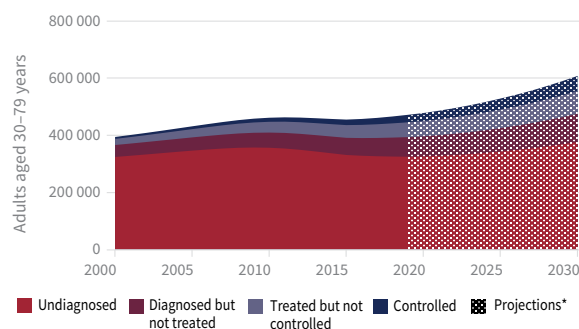
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 511 000 aged 30–79 years with hypertension, approximately 475 000 do not have the condition controlled^b

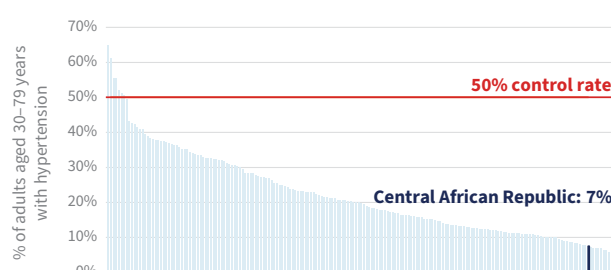


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	61 110	33 090	28 020	2021
Cardiovascular disease deaths	5830	2990	2840	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	55	51	59	2021
Risk of premature death from NCDs (%) ^c	31	36	27	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	8	5	10	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	17	14	19	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Chad

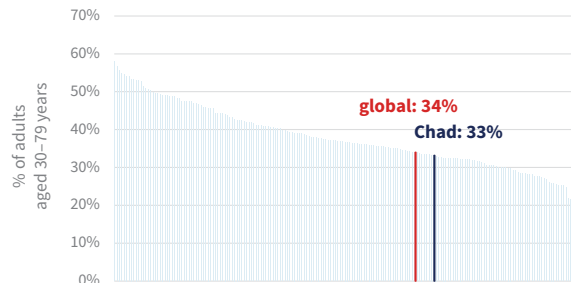
Hypertension profile

Total population (2024): 20 300 000

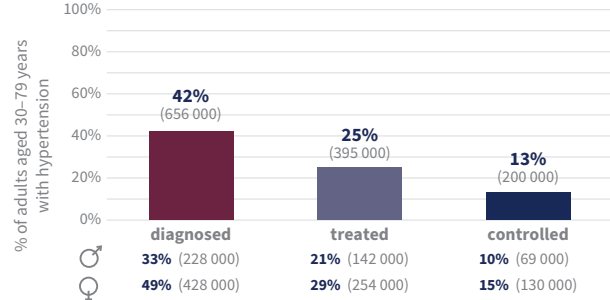
Prevalence of hypertension among adults aged 30–79 years (2024)^a

33% 29% 37%

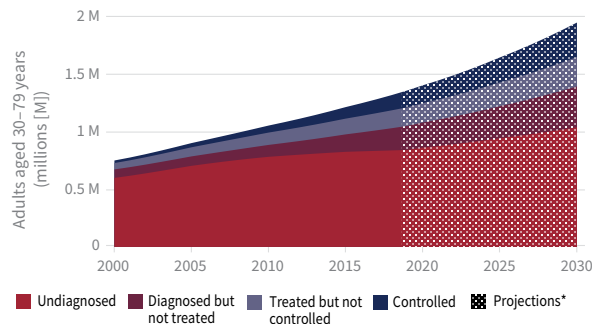
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.6 million adults aged 30–79 years with hypertension, approximately 1.4 million do not have the condition controlled^b

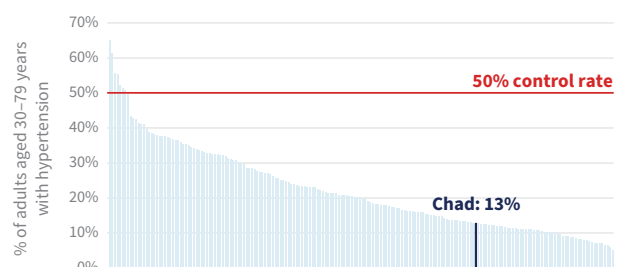


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	164 700	87 420	77 260	2021
Cardiovascular disease deaths	15 200	7300	7900	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	51	48	54	2021
Risk of premature death from NCDs (%) ^c	23	24	23	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	7	13	2	2022
Obesity, adults aged 18+ years (%)	6	6	5	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	18	17	19	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Don't know

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Chile

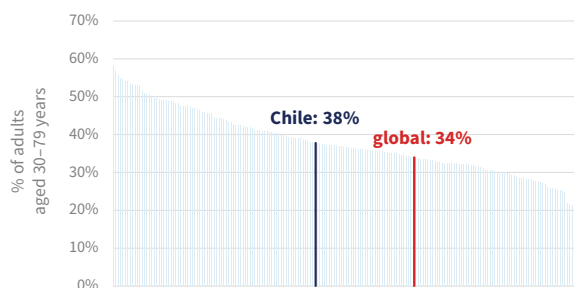
Hypertension profile

Total population (2024): 19 760 000

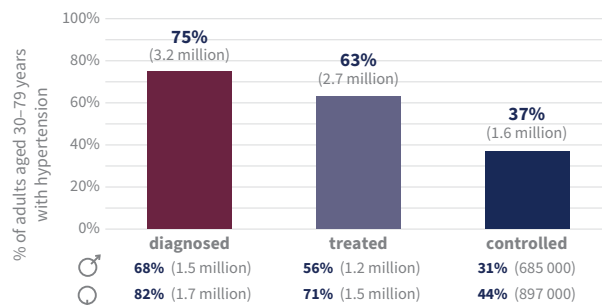
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 38% ♀ 40% ♀ 36%

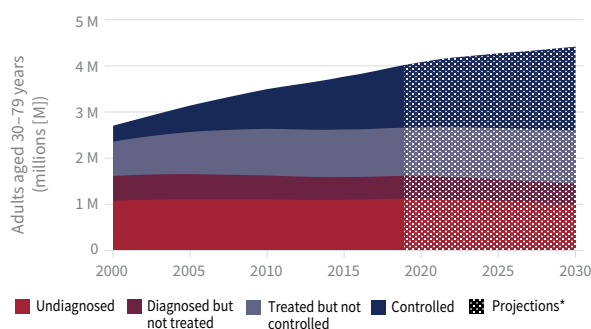
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 4.2 million adults aged 30–79 years with hypertension, approximately 2.6 million do not have the condition controlled^b

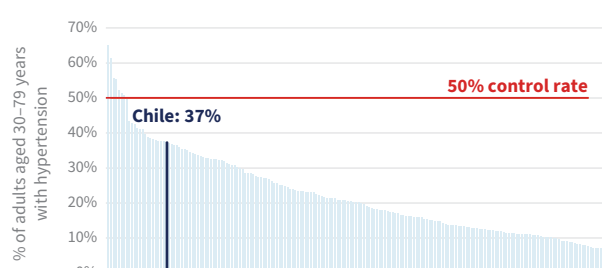


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	146 100	76 220	69 900	2021
Cardiovascular disease deaths	35 160	17 030	18 130	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	60	58	61	2021
Risk of premature death from NCDs (%) ^c	9	11	8	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	8	2021
Current tobacco use, adults aged 15+ years (%) ^d	29	31	27	2022
Obesity, adults aged 18+ years (%)	40	34	45	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	8	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	38	30	46	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

China

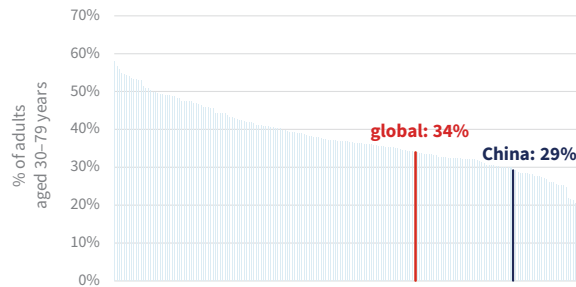
Hypertension profile

Total population (2024): 1 419 000 000

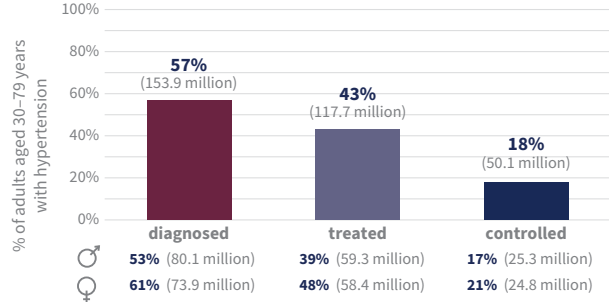
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 29% ♀ 32% ♀ 26%

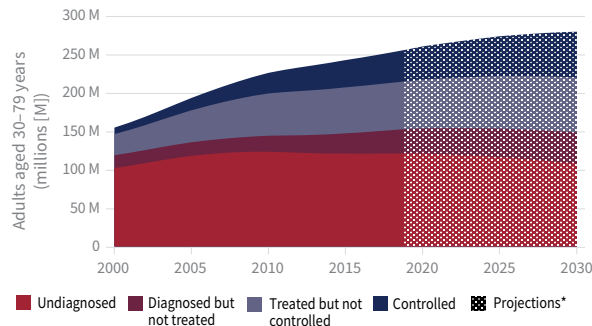
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 271.5 million adults aged 30–79 years with hypertension, approximately 221.4 million do not have the condition controlled^b

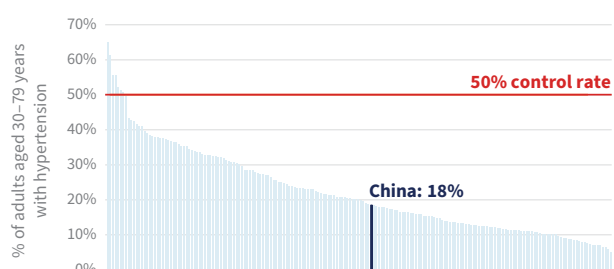


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	11 530 000	6 565 000	4 961 000	2021
Cardiovascular disease deaths	5 036 000	2 755 000	2 280 000	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	55	57	2021
Risk of premature death from NCDs (%) ^c	16	20	12	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	17	19	16	2021
Current tobacco use, adults aged 15+ years (%) ^d	23	45	2	2022
Obesity, adults aged 18+ years (%)	8	9	8	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	24	28	20	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Colombia

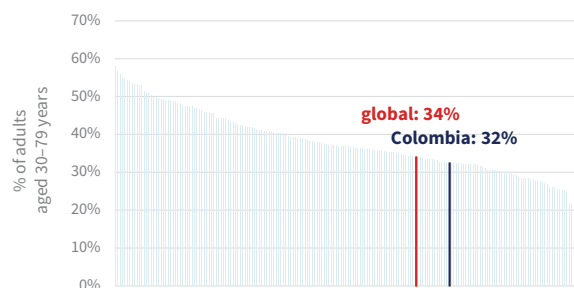
Hypertension profile

Total population (2024): 52 890 000

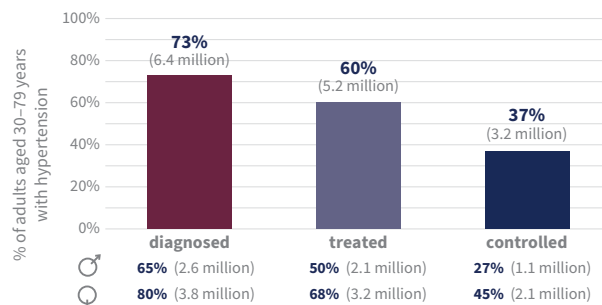
Prevalence of hypertension among adults aged 30–79 years (2024)^a

32% 31% 33%

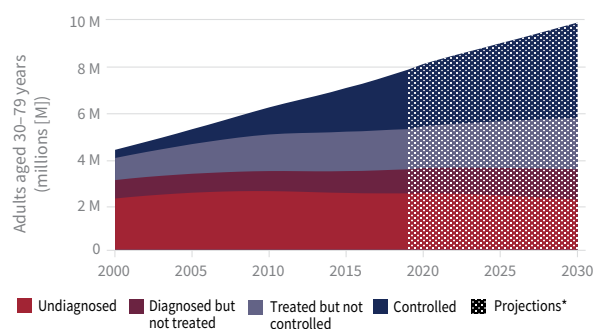
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 8.8 million adults aged 30–79 years with hypertension, approximately 5.5 million do not have the condition controlled^b

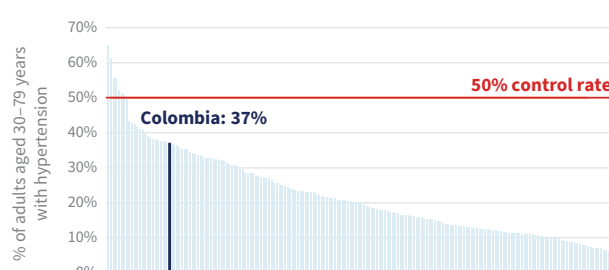


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	362 200	200 900	161 300	2021
Cardiovascular disease deaths	94 550	46 790	47 770	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	56	55	2021
Risk of premature death from NCDs (%) ^c	10	12	9	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	12	14	10	2021
Current tobacco use, adults aged 15+ years (%)	8	12	4	2022
Obesity, adults aged 18+ years (%)	24	18	29	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	34	28	41	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Comoros

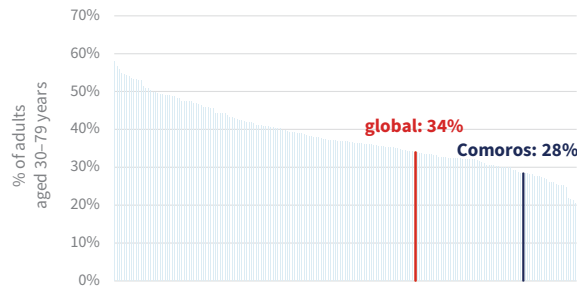
Hypertension profile

Total population (2024): 866 600

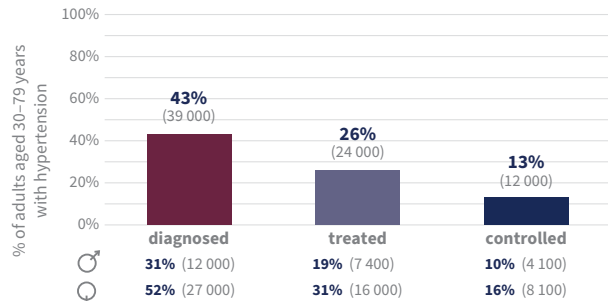
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 28% ♀ 25% ♀ 32%

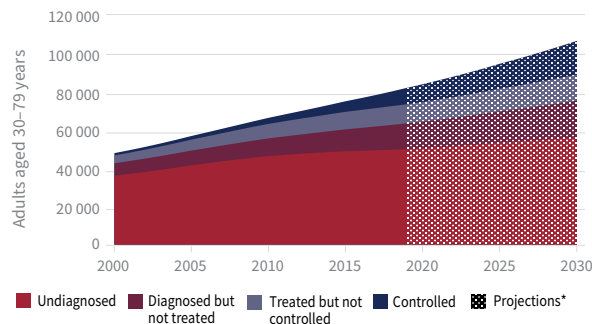
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 92 000 adults aged 30–79 years with hypertension, approximately 80 000 do not have the condition controlled^b

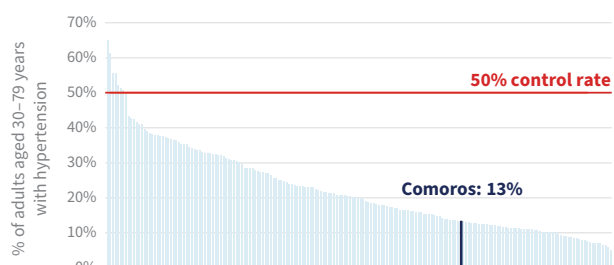


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	5510	2880	2630	2021
Cardiovascular disease deaths	1060	480	580	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	60	54	64	2021
Risk of premature death from NCDs (%) ^c	20	20	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	17	28	7	2022
Obesity, adults aged 18+ years (%)	16	8	24	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	17	11	24	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Congo

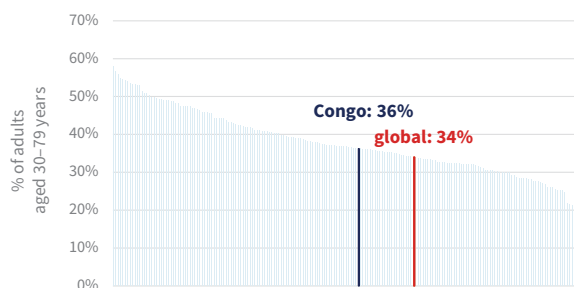
Hypertension profile

Total population (2024): 6 333 000

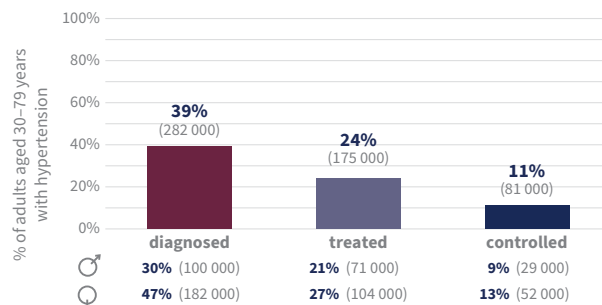
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 36% ♀ 34% 39%

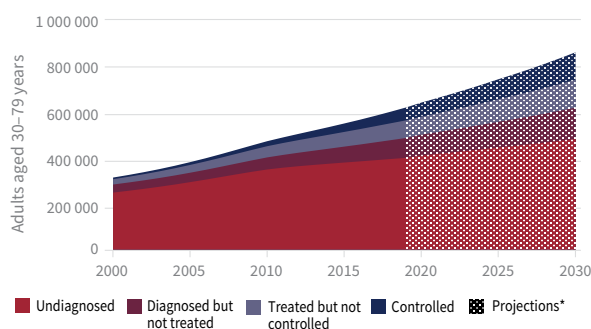
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 717 000 adults aged 30–79 years with hypertension, approximately 636 000 do not have the condition controlled^b

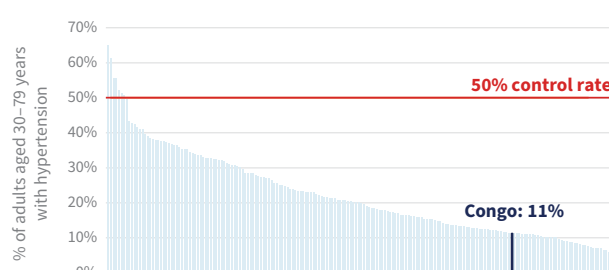


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	43 210	21 720	21 490	2021
Cardiovascular disease deaths	6810	2980	3830	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	60	56	63	2021
Risk of premature death from NCDs (%) ^c	21	21	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	15	29	2	2022
Obesity, adults aged 18+ years (%)	8	4	12	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	16	12	19	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Cook Islands

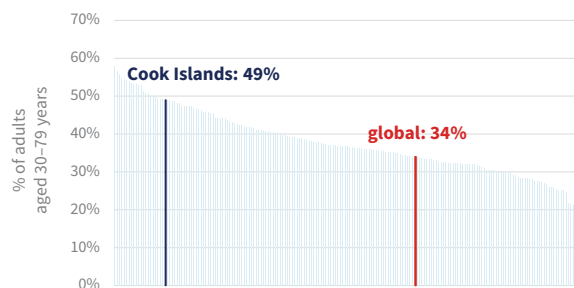
Hypertension profile

Total population (2024): 13 730

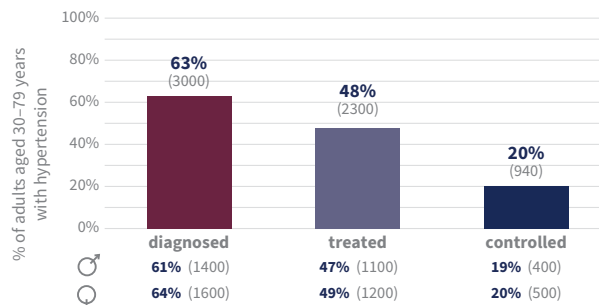
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 49% ♀ 50% ♀ 48%

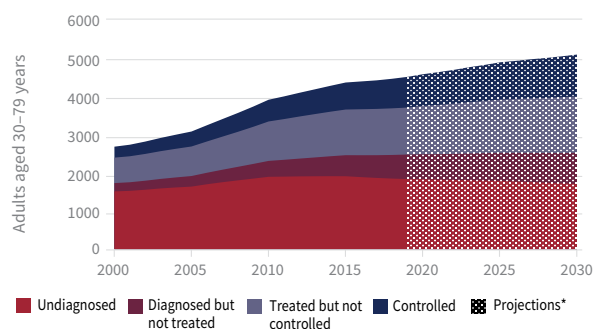
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 4800 adults aged 30–79 years with hypertension, approximately 3900 do not have the condition controlled^b

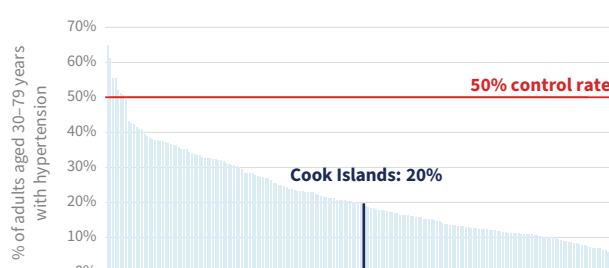


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	no data	no data	no data	2021
Cardiovascular disease deaths	no data	no data	no data	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	63	62	64	2021
Risk of premature death from NCDs (%) ^c	no data	no data	no data	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	27	32	22	2022
Obesity, adults aged 18+ years (%)	68	65	72	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	no data	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	25	16	33	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Costa Rica

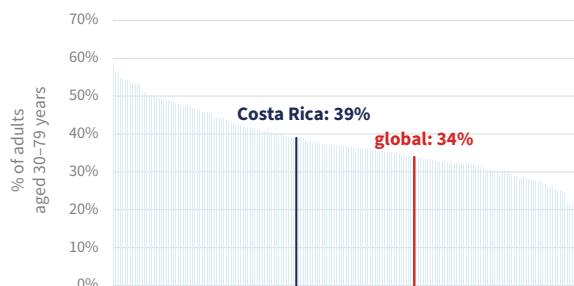
Hypertension profile

Total population (2024): 5 130 000

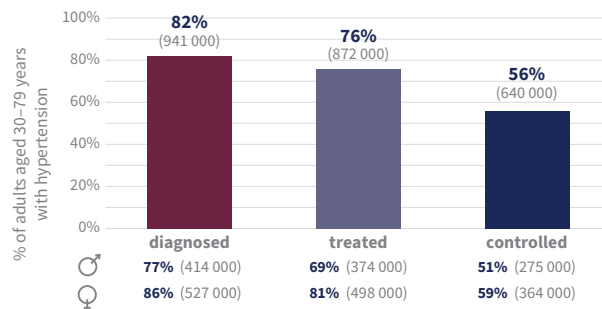
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 39% ♀ 37% ♀ 41%

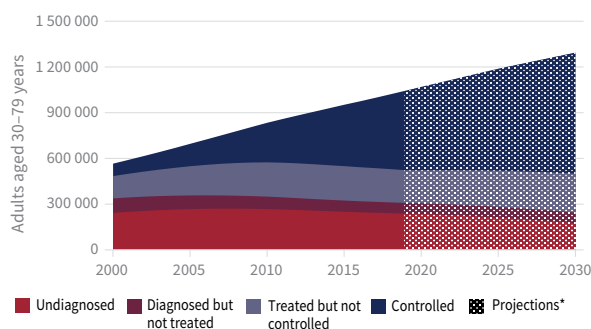
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.2 million adults aged 30–79 years with hypertension, approximately 512 000 do not have the condition controlled^b

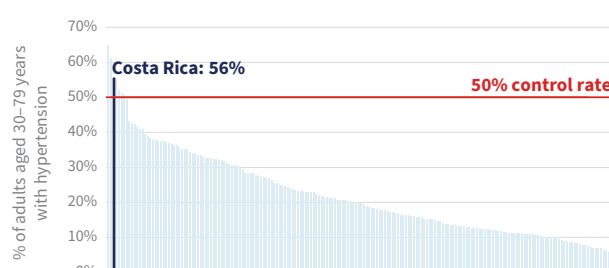


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	31 250	17 130	14 120	2021
Cardiovascular disease deaths	6650	3320	3330	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	53	57	2021
Risk of premature death from NCDs (%) ^c	10	11	9	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	9	2021
Current tobacco use, adults aged 15+ years (%)	9	13	5	2022
Obesity, adults aged 18+ years (%)	32	25	39	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	50	42	58	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Côte d'Ivoire

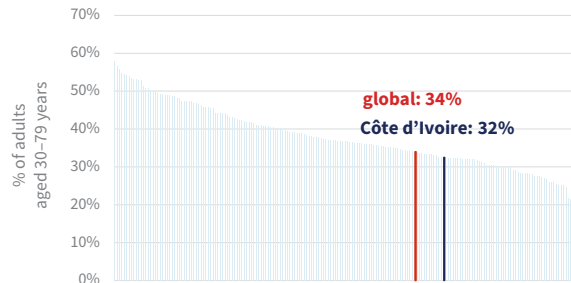
Hypertension profile

Total population (2024): 31 930 000

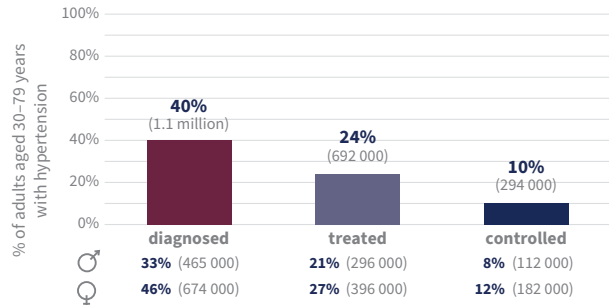
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 32% ♂ 31% ♀ 34%

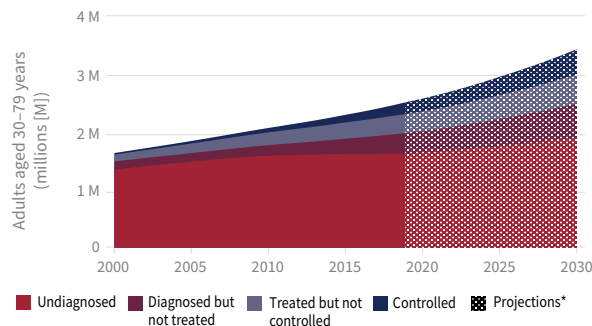
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.9 million adults aged 30–79 years with hypertension, approximately 2.6 million do not have the condition controlled^b

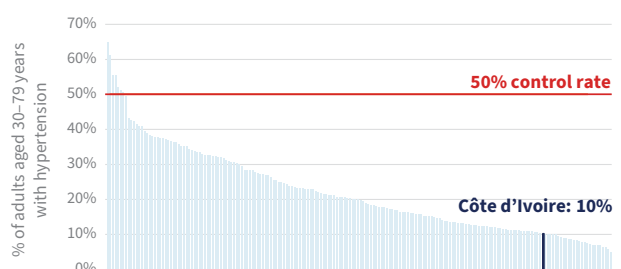


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	209 700	119 300	90 430	2021
Cardiovascular disease deaths	30 720	17 280	13 450	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	58	57	59	2021
Risk of premature death from NCDs (%) ^c	23	24	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	9	17	1	2022
Obesity, adults aged 18+ years (%)	11	7	14	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	20	16	24	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Croatia

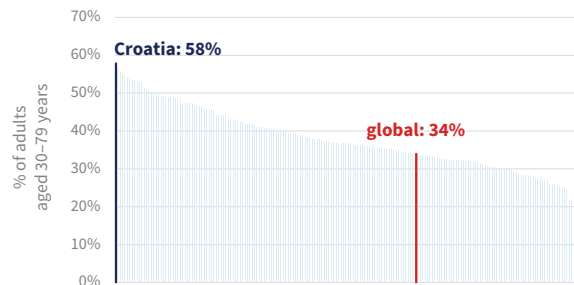
Hypertension profile

Total population (2024): 3 875 000

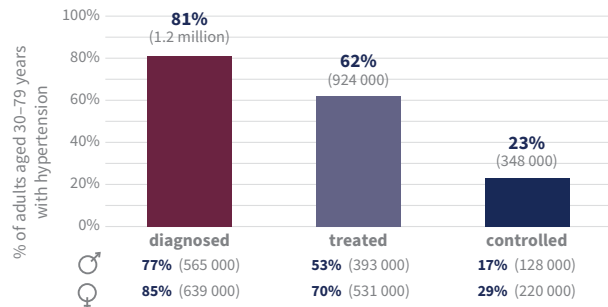
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 58% ♀ 59% ♀ 57%

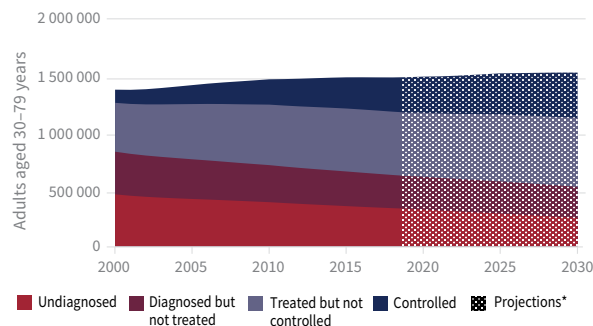
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.5 million adults aged 30–79 years with hypertension, approximately 1.1 million do not have the condition controlled^b

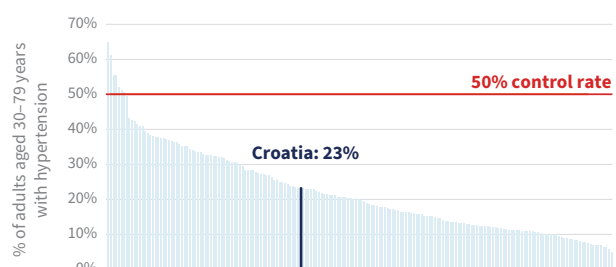


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	60 300	29 250	31 050	2021
Cardiovascular disease deaths	22 150	9190	12 950	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	56	58	2021
Risk of premature death from NCDs (%) ^c	16	21	11	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	12	15	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	37	37	37	2022
Obesity, adults aged 18+ years (%)	36	37	35	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	28	28	29	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Cuba

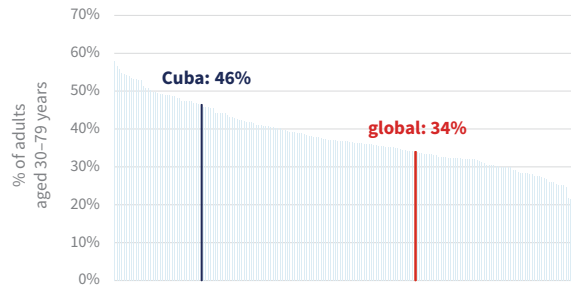
Hypertension profile

Total population (2024): 10 980 000

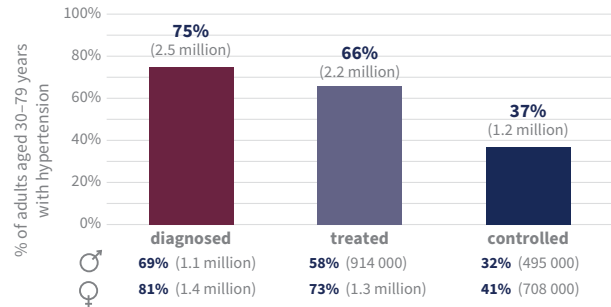
Prevalence of hypertension among adults aged 30–79 years (2024)^a

46% 45% 48%

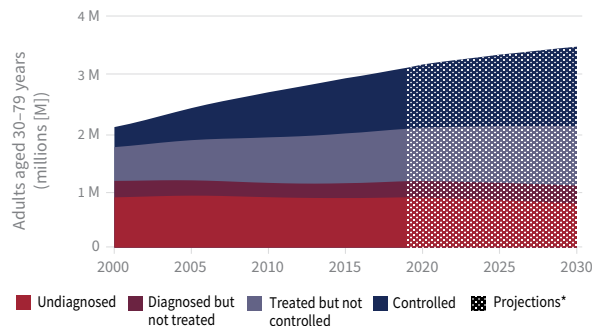
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 3.3 million adults aged 30–79 years with hypertension, approximately 2.1 million do not have the condition controlled^b

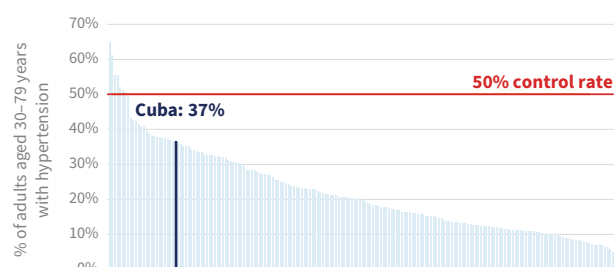


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	168 100	93 460	74 650	2021
Cardiovascular disease deaths	49 350	26 490	22 850	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	47	46	47	2021
Risk of premature death from NCDs (%) ^c	18	22	14	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	17	25	10	2022
Obesity, adults aged 18+ years (%)	24	20	27	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	61	50	72	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Cyprus

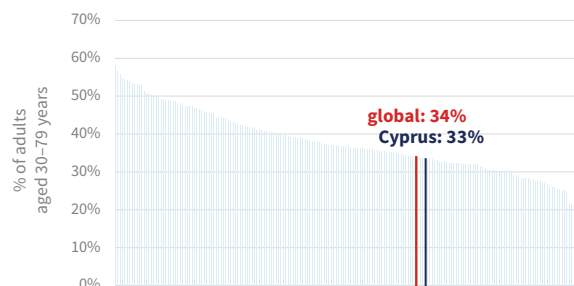
Hypertension profile

Total population (2024): 1 358 000

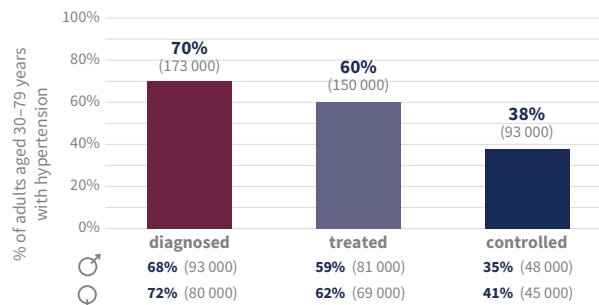
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 33% ♂ 38% ♀ 29%

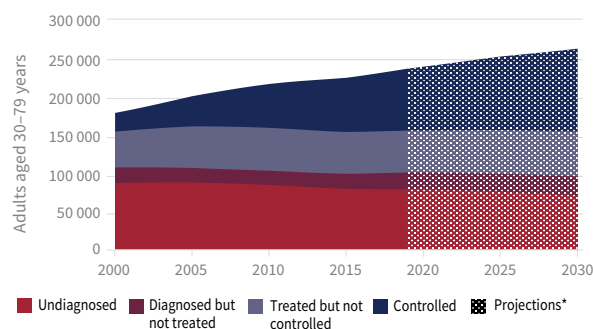
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 248 000 adults aged 30–79 years with hypertension, approximately 155 000 do not have the condition controlled^b

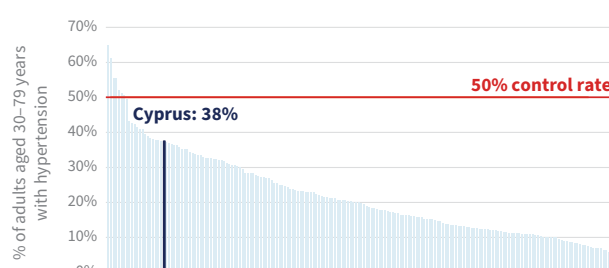


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	8440	4410	4030	2021
Cardiovascular disease deaths	2190	1150	1040	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	50	50	50	2021
Risk of premature death from NCDs (%) ^c	9	11	6	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	10	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	36	47	24	2022
Obesity, adults aged 18+ years (%)	25	27	23	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	41	35	47	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Don't know
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Don't know
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Czechia

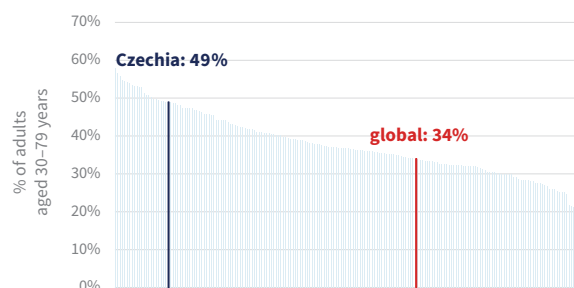
Hypertension profile

Total population (2024): 10 740 000

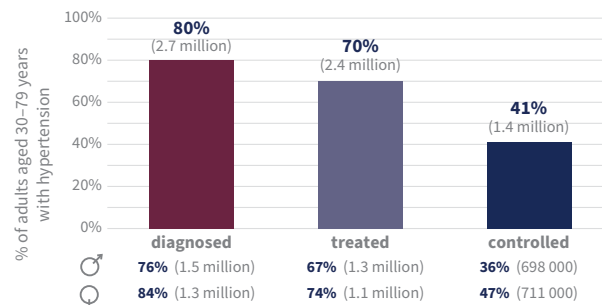
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 49% ♀ 56% 42%

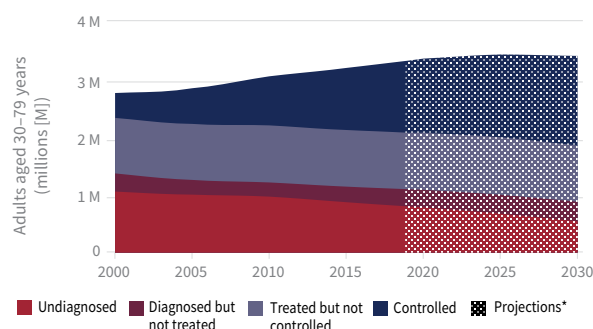
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 3.4 million adults aged 30–79 years with hypertension, approximately 2 million do not have the condition controlled^b

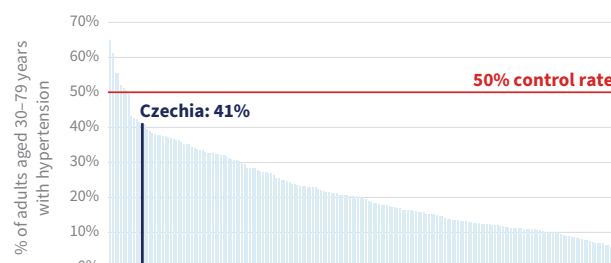


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	140 200	73 710	66 460	2021
Cardiovascular disease deaths	48 130	23 050	25 080	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	53	55	2021
Risk of premature death from NCDs (%) ^c	14	19	10	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	13	15	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	30	33	27	2022
Obesity, adults aged 18+ years (%)	31	34	28	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	14	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	23	23	24	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature death from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Democratic People's Republic of Korea

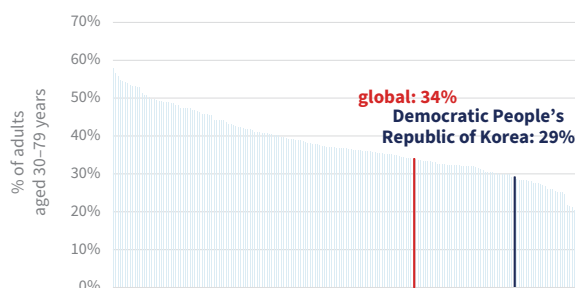
Hypertension profile

Total population (2024): 26 500 000

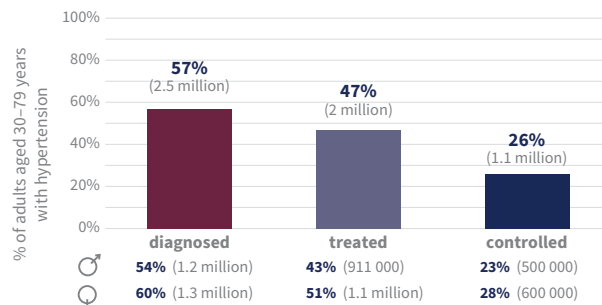
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 29% ♀ 28%

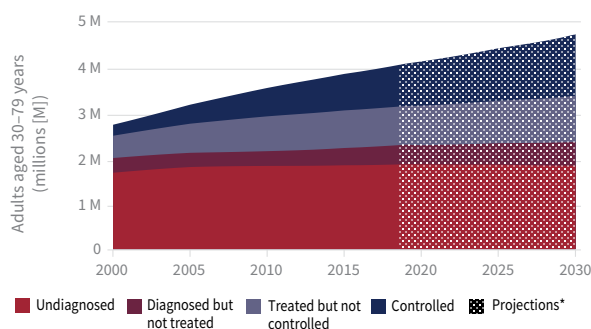
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 4.3 million adults aged 30–79 years with hypertension, approximately 3.2 million do not have the condition controlled^b

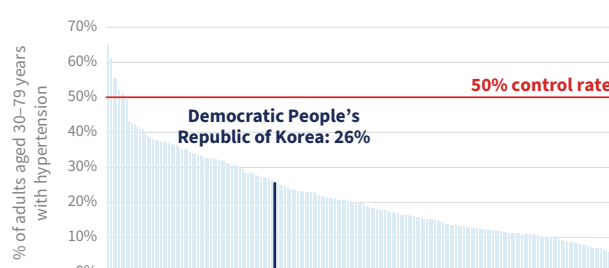


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	265 300	136 300	129 000	2021
Cardiovascular disease deaths	103 900	49 090	54 820	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	53	54	2021
Risk of premature death from NCDs (%) ^c	24	29	19	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	12	13	12	2021
Current tobacco use, adults aged 15+ years (%) ^d	17	33	0	2022
Obesity, adults aged 18+ years (%)	11	9	13	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	27	24	29	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Democratic Republic of the Congo

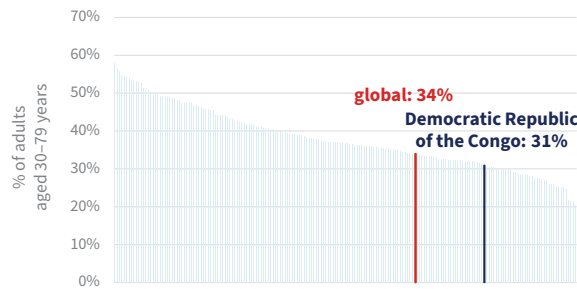
Hypertension profile

Total population (2024): 109 300 000

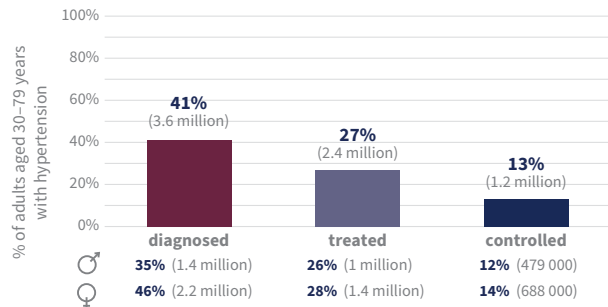
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 31% ♂ 29% ♀ 34%

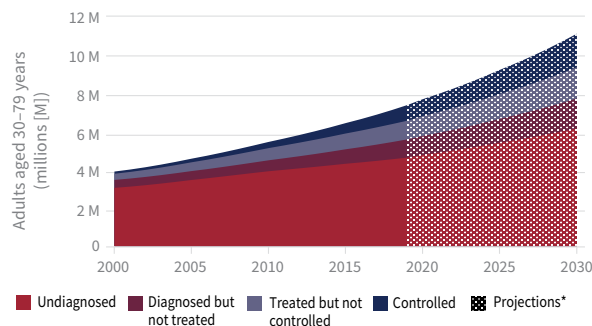
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 8.8 million adults aged 30–79 years with hypertension, approximately 7.7 million do not have the condition controlled^b

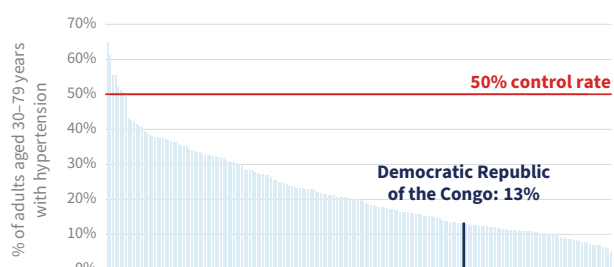


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	857 800	463 900	393 900	2021
Cardiovascular disease deaths	123 800	59 210	64 610	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	50	61	2021
Risk of premature death from NCDs (%) ^c	25	26	24	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	6	5	2021
Current tobacco use, adults aged 15+ years (%)	12	22	3	2022
Obesity, adults aged 18+ years (%)	6	3	8	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	15	12	17	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Denmark

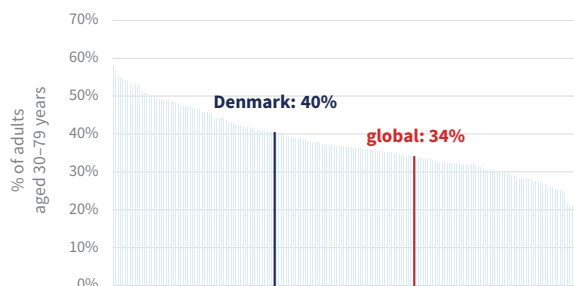
Hypertension profile

Total population (2024): 5 977 000

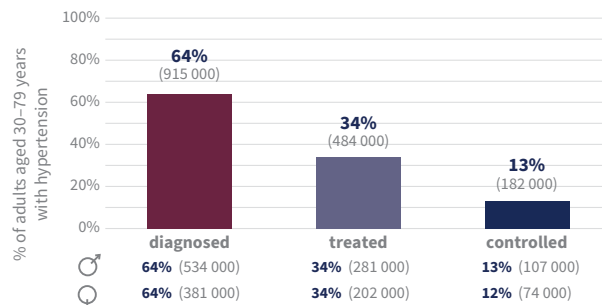
Prevalence of hypertension among adults aged 30–79 years (2024)^a

40% 47% 34%

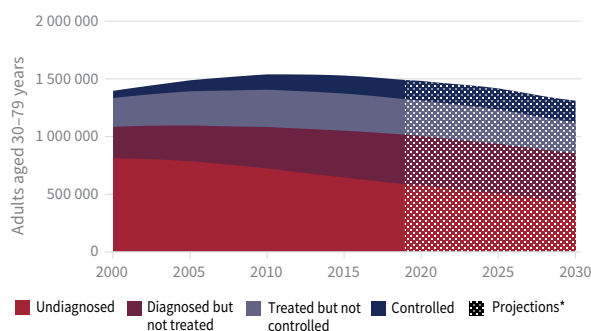
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.4 million adults aged 30–79 years with hypertension, approximately 1.2 million do not have the condition controlled^b

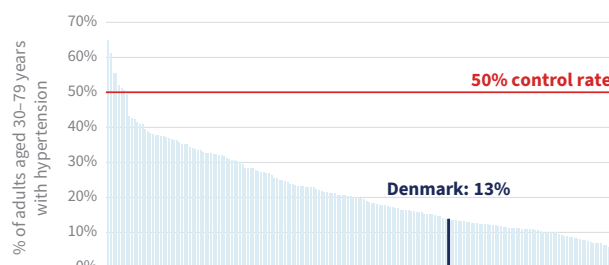


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	57 020	29 090	27 930	2021
Cardiovascular disease deaths	12 700	6580	6130	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	49	48	49	2021
Risk of premature death from NCDs (%) ^c	11	12	9	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	10	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	16	16	16	2022
Obesity, adults aged 18+ years (%)	14	17	12	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	10	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	12	13	11	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Djibouti

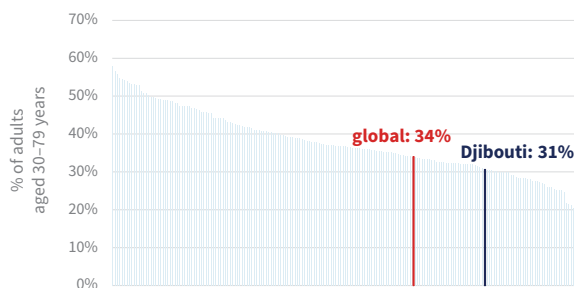
Hypertension profile

Total population (2024): 1 169 000

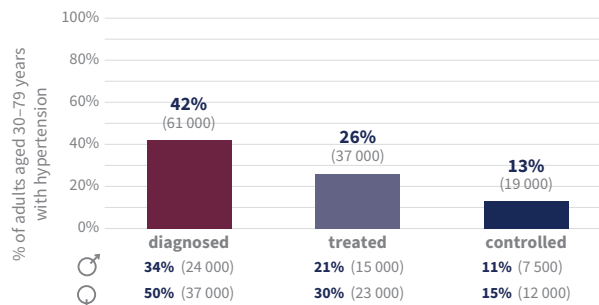
Prevalence of hypertension among adults aged 30–79 years (2024)^a

31% 29% 33%

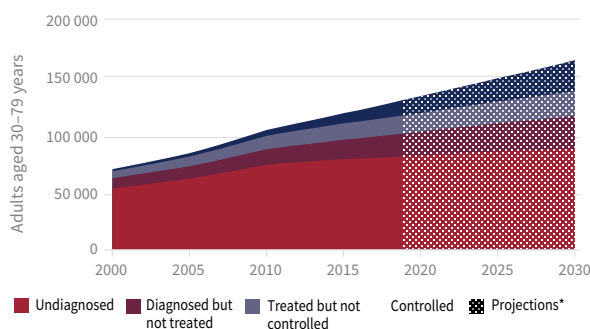
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 145 000 adults aged 30–79 years with hypertension, approximately 126 000 do not have the condition controlled^b

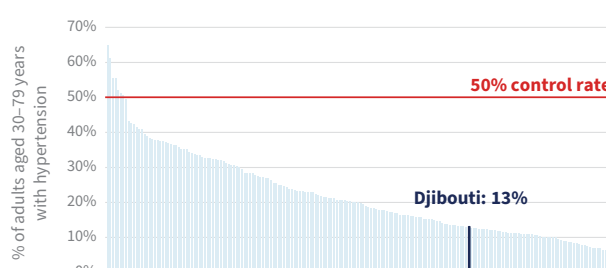


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	8870	4700	4170	2021
Cardiovascular disease deaths	1740	870	870	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	54	65	2021
Risk of premature death from NCDs (%) ^c	21	22	19	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	11	6	16	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	17	14	20	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Dominica

Hypertension profile

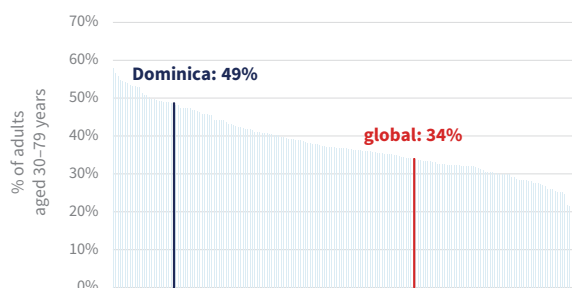
Total population (2024):

66 210

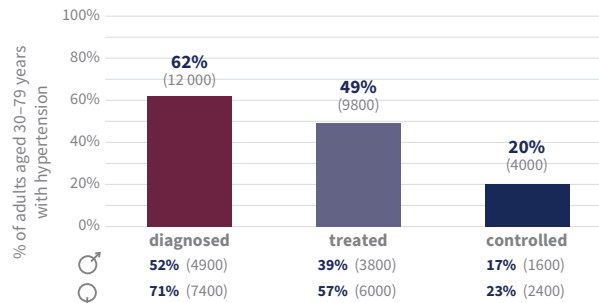
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 49% ♂ 46% ♀ 52%

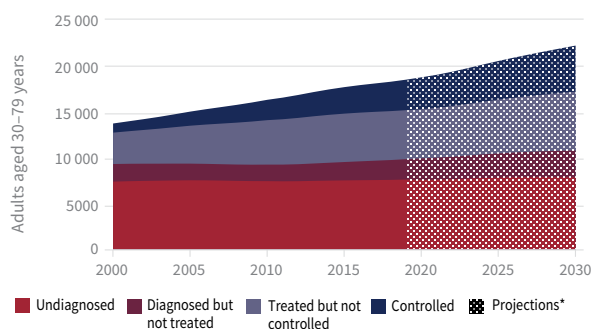
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 20 000 adults aged 30–79 years with hypertension, approximately 16 000 do not have the condition controlled^b

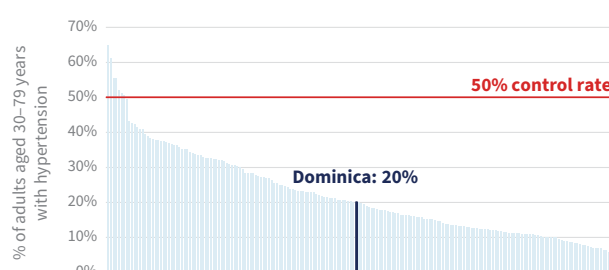


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	no data	no data	no data	2021
Cardiovascular disease deaths	no data	no data	no data	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	55	54	55	2021
Risk of premature death from NCDs (%) ^c	no data	no data	no data	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	32	18	45	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	7	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	31	21	39	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Dominican Republic

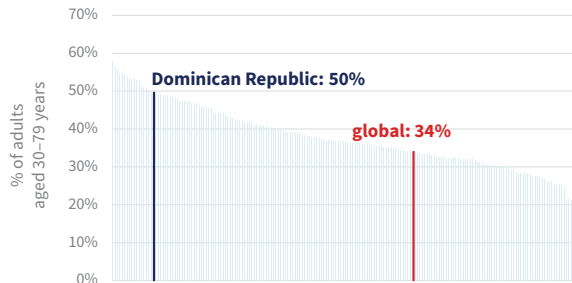
Hypertension profile

Total population (2024): 11 430 000

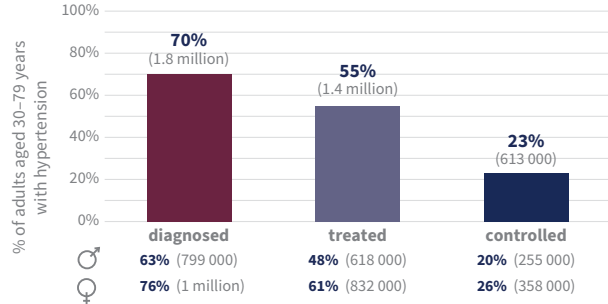
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 50% ♀ 49% ♀ 50%

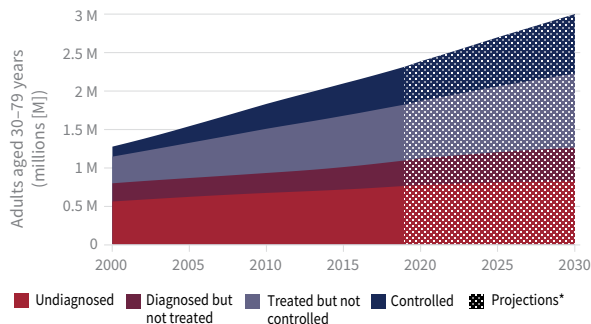
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.6 million adults aged 30–79 years with hypertension, approximately 2 million do not have the condition controlled^b

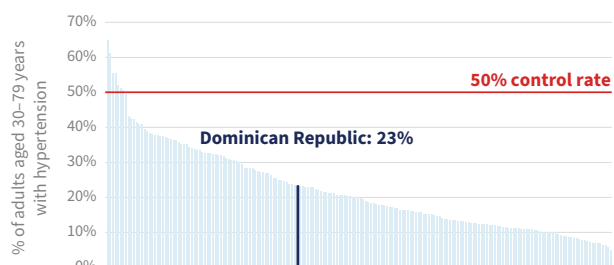


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	67 390	37 700	29 690	2021
Cardiovascular disease deaths	19 880	10 460	9420	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	51	52	51	2021
Risk of premature death from NCDs (%) ^c	17	21	14	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	11	14	7	2022
Obesity, adults aged 18+ years (%)	29	23	35	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	37	31	43	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Ecuador

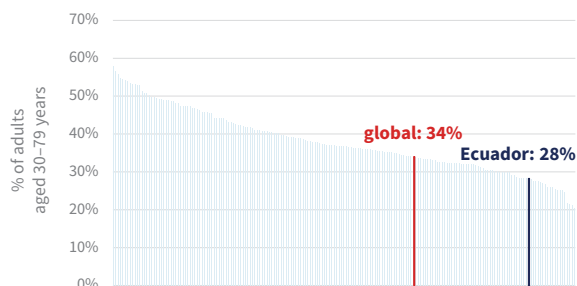
Hypertension profile

Total population (2024): 18 140 000

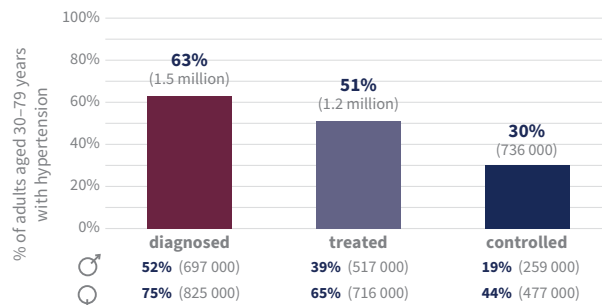
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 28% ♂ 31% ♀ 25%

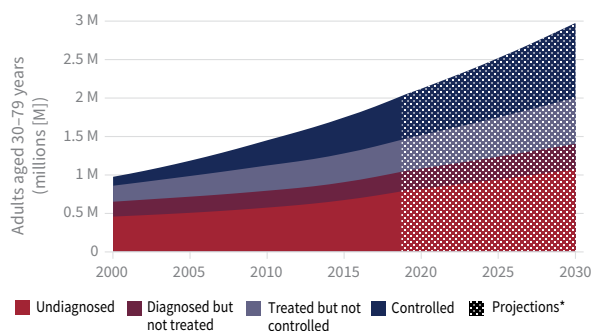
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.4 million adults aged 30–79 years with hypertension, approximately 1.7 million do not have the condition controlled^b

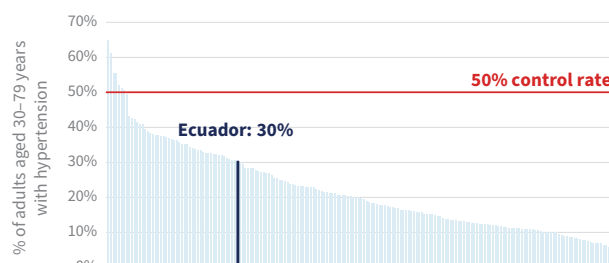


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	116 200	65 950	50 260	2021
Cardiovascular disease deaths	30 050	15 890	14 160	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	46	44	49	2021
Risk of premature death from NCDs (%) ^c	13	15	12	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	8	2021
Current tobacco use, adults aged 15+ years (%)	10	18	3	2022
Obesity, adults aged 18+ years (%)	27	22	32	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	23	18	28	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Egypt

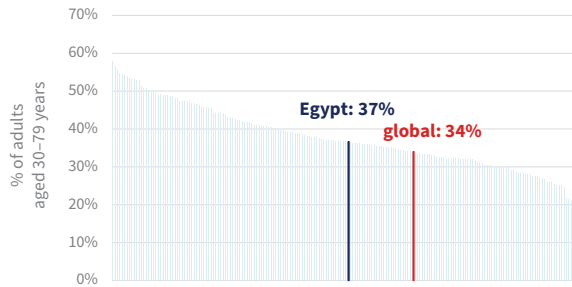
Hypertension profile

Total population (2024): 116 500 000

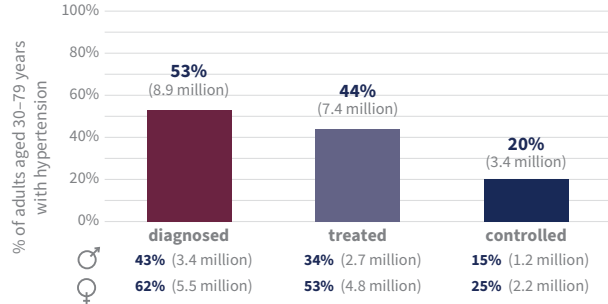
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 37% ♀ 35% ♀ 39%

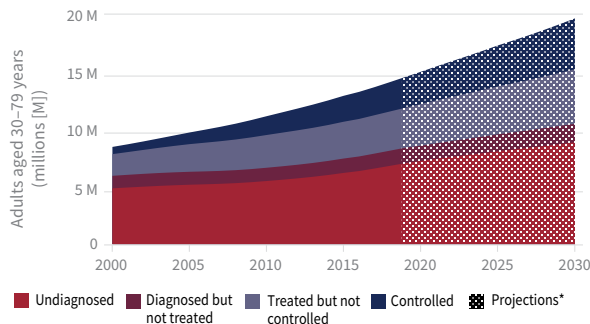
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 16.8 million adults aged 30–79 years with hypertension, approximately 13.4 million do not have the condition controlled^b

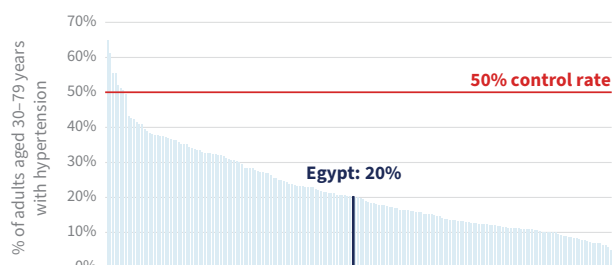


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	746 500	417 600	328 900	2021
Cardiovascular disease deaths	246 800	132 200	114 600	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	53	60	2021
Risk of premature death from NCDs (%) ^c	26	31	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%) ^d	25	49	0	2022
Obesity, adults aged 18+ years (%)	43	30	56	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	34	30	37	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

El Salvador

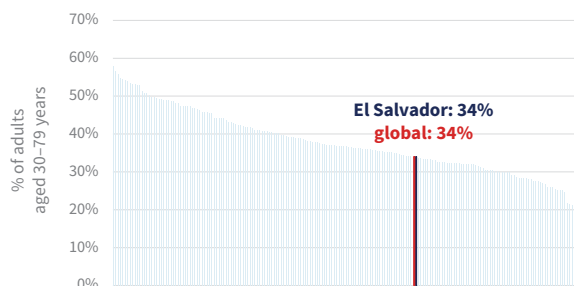
Hypertension profile

Total population (2024): 6 338 000

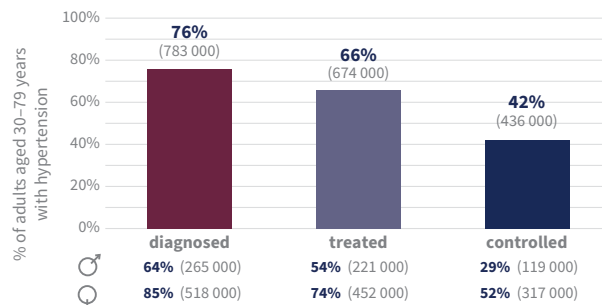
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 34% ♂ 31% ♀ 35%

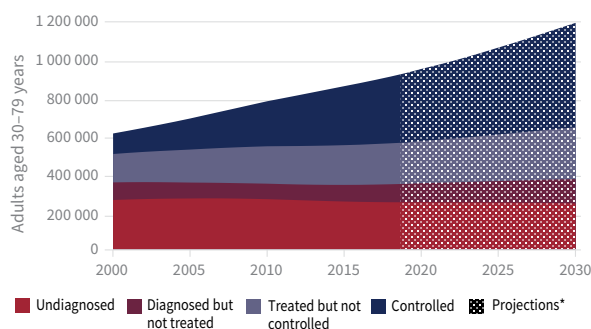
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1 million adults aged 30–79 years with hypertension, approximately 590 000 do not have the condition controlled^b

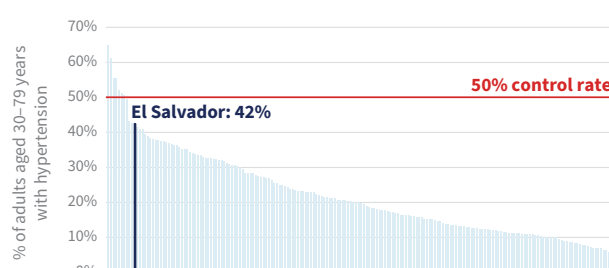


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	46 490	25 860	20 630	2021
Cardiovascular disease deaths	7840	3830	40 10	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	52	52	52	2021
Risk of premature death from NCDs (%) ^c	13	15	11	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	9	2021
Current tobacco use, adults aged 15+ years (%) ^d	9	16	2	2022
Obesity, adults aged 18+ years (%)	30	22	37	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	39	32	46	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Equatorial Guinea

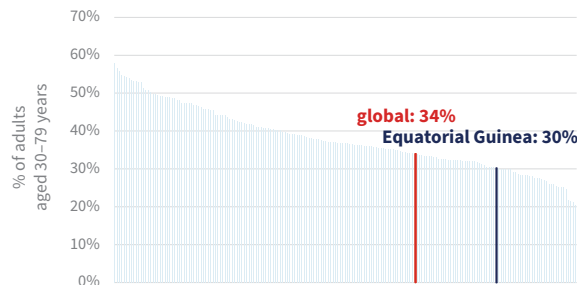
Hypertension profile

Total population (2024): 1 893 000

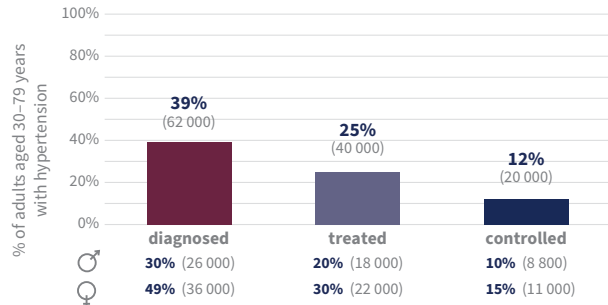
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 30% ♀ 27% ♀ 34%

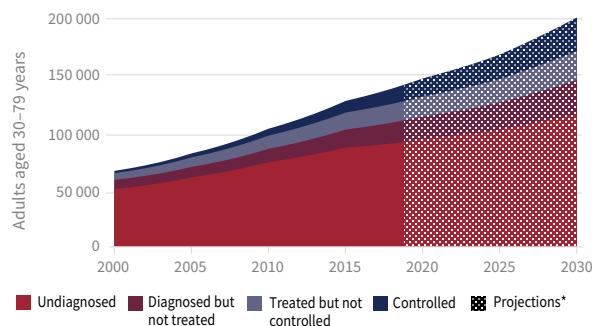
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 162 000 adults aged 30–79 years with hypertension, approximately 142 000 do not have the condition controlled^b

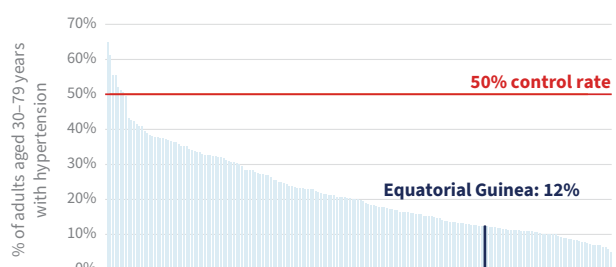


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	15 520	8620	6900	2021
Cardiovascular disease deaths	2010	950	1060	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	55	62	2021
Risk of premature death from NCDs (%) ^c	20	21	20	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	17	7	29	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	20	15	24	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Eritrea

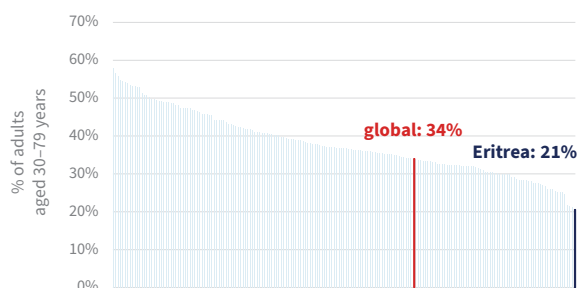
Hypertension profile

Total population (2024): 3 536 000

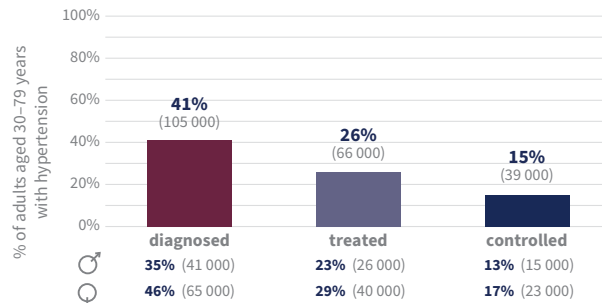
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 21% ♂ 19% ♀ 22%

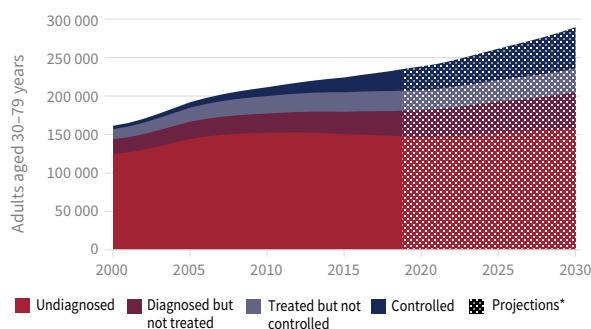
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 256 000 adults aged 30–79 years with hypertension, approximately 217 000 do not have the condition controlled^b

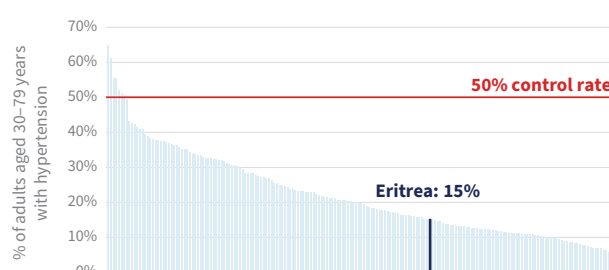


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	27 410	14 580	12 830	2021
Cardiovascular disease deaths	6080	2790	3290	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	46	60	2021
Risk of premature death from NCDs (%) ^c	27	29	26	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	4	2	6	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	12	7	16	2022

National response

Targets

National target for blood pressure	No response
National target for salt consumption	No response

Policies

Operational cardiovascular disease policy	No response
Operational salt reduction policy	No response

Treatment

Guidelines for management of hypertension	No response
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No response
Conducted recent, national survey on salt/sodium intake	No response
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No response

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Estonia

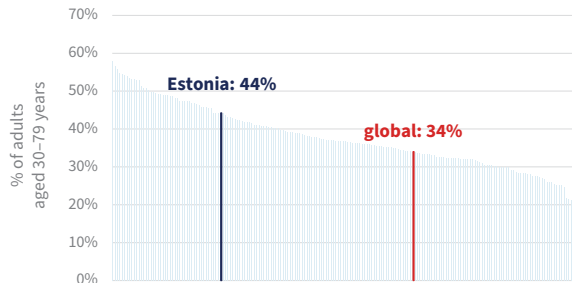
Hypertension profile

Total population (2024): 1 361 000

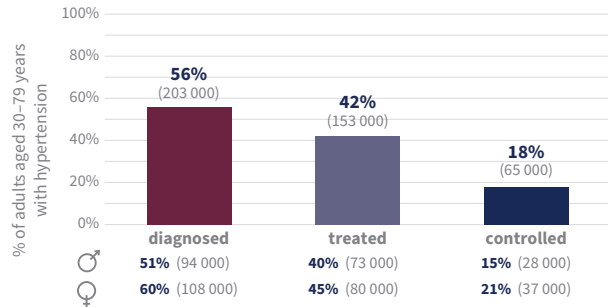
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 44% ♂ 47% ♀ 42%

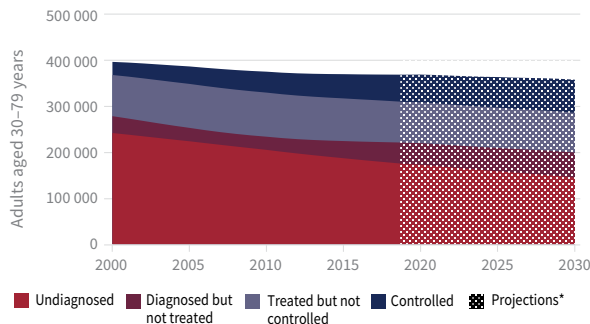
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 363 000 adults aged 30–79 years with hypertension, approximately 298 000 do not have the condition controlled^b

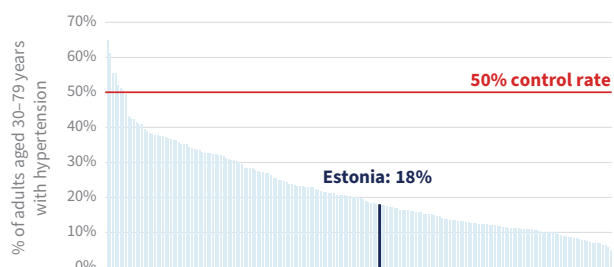


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	18 490	8760	9730	2021
Cardiovascular disease deaths	8470	3350	5120	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	68	63	71	2021
Risk of premature death from NCDs (%) ^c	16	23	9	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%)	28	34	23	2022
Obesity, adults aged 18+ years (%)	27	25	28	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	10	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	16	17	15	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Eswatini

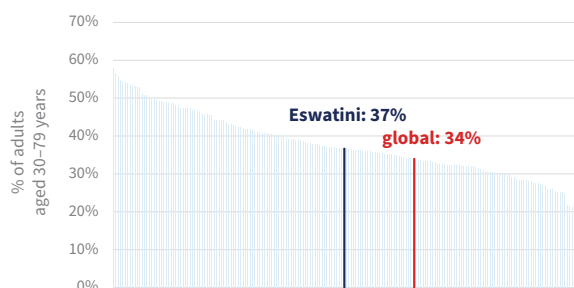
Hypertension profile

Total population (2024): 1 243 000

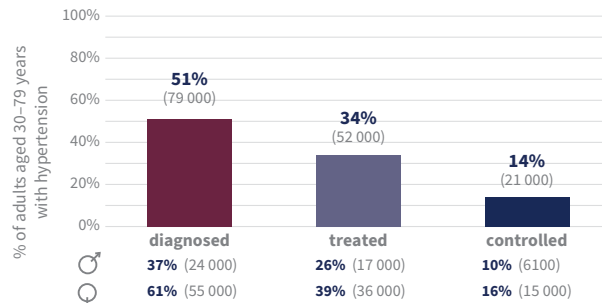
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 37% ♂ 32% ♀ 41%

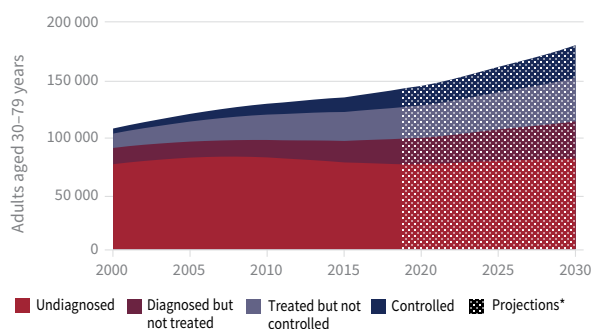
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 155 000 adults aged 30–79 years with hypertension, approximately 134 000 do not have the condition controlled^b

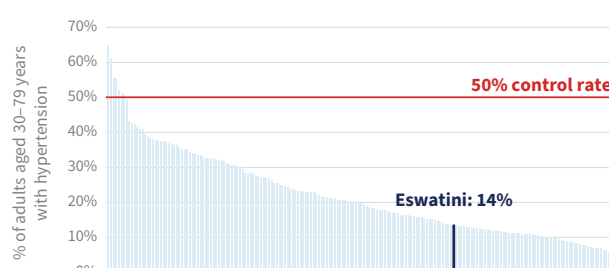


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	15 780	8580	7200	2021
Cardiovascular disease deaths	2050	1020	1040	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	62	58	66	2021
Risk of premature death from NCDs (%) ^c	32	38	28	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	10	17	2	2022
Obesity, adults aged 18+ years (%)	27	13	41	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	7	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	19	15	23	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Ethiopia

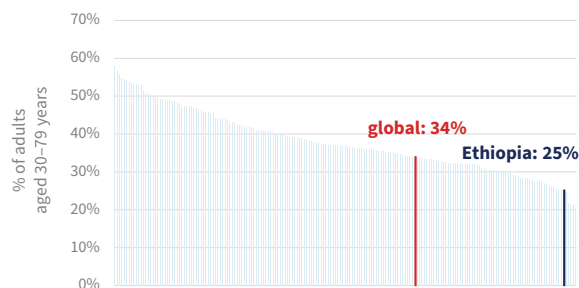
Hypertension profile

Total population (2024): 132 100 000

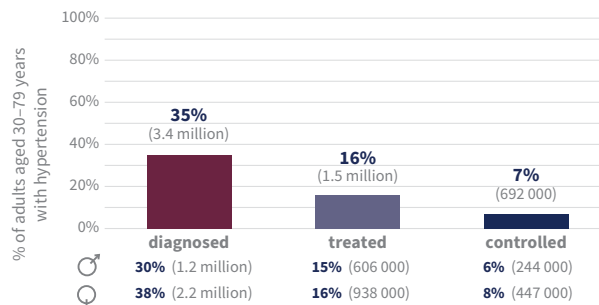
Prevalence of hypertension among adults aged 30–79 years (2024)^a

25% 21% 29%

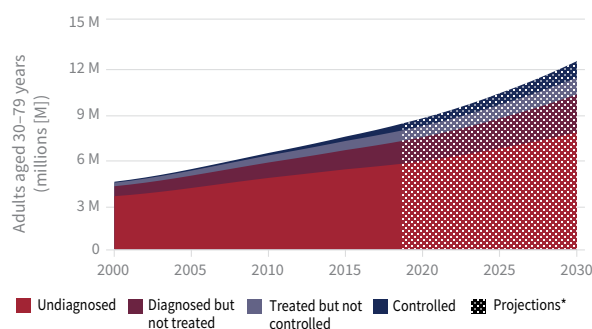
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 9.8 million adults aged 30–79 years with hypertension, approximately 9.1 million do not have the condition controlled^b

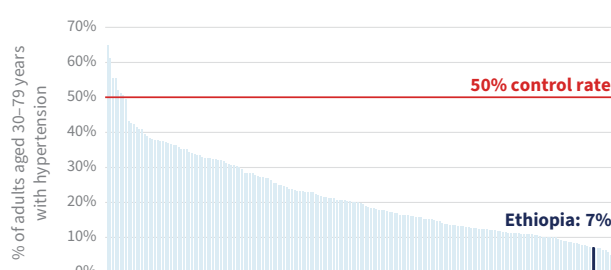


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	686 000	370 900	315 000	2021
Cardiovascular disease deaths	82 620	37 690	44 920	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	49	42	56	2021
Risk of premature death from NCDs (%) ^c	17	16	17	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	5	9	2	2022
Obesity, adults aged 18+ years (%)	2	1	4	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	9	7	12	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

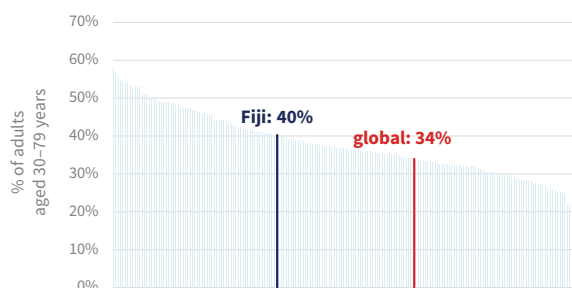
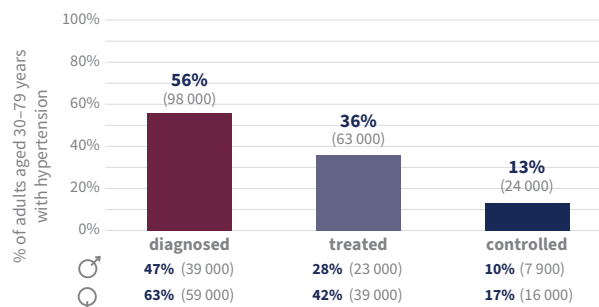
† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

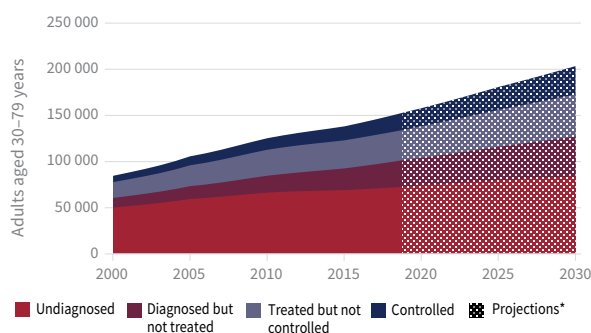
World Health Organization: Hypertension profiles, 2025

Prevalence of hypertension among adults aged 30–79 years (2024)^a

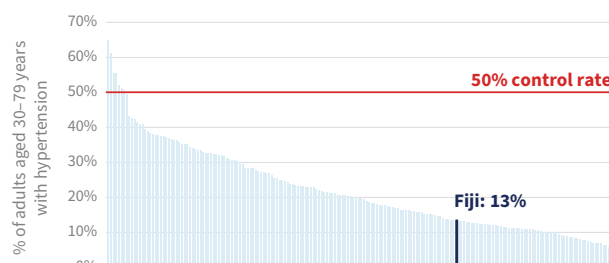
♂ 40% ♂ 38% ♀ 43%

Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^aOf the 176 000 adults aged 30–79 years with hypertension, approximately 152 000 do not have the condition controlled^b

Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b

Mortality†

	both sexes	males	females	year
Total deaths	9410	5020	4400	2021
Cardiovascular disease deaths	2610	1500	1120	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	55	60	2021
Risk of premature death from NCDs (%) ^c	38	41	35	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	28	42	13	2022
Obesity, adults aged 18+ years (%)	34	26	42	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	16	9	22	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

Finland

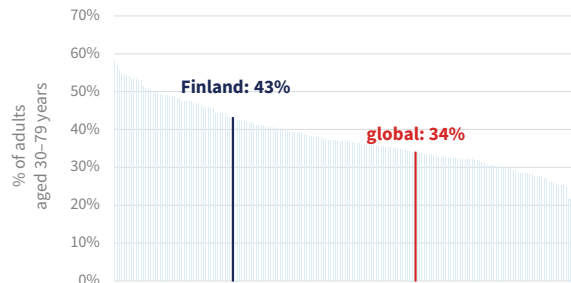
Hypertension profile

Total population (2024): 5 617 000

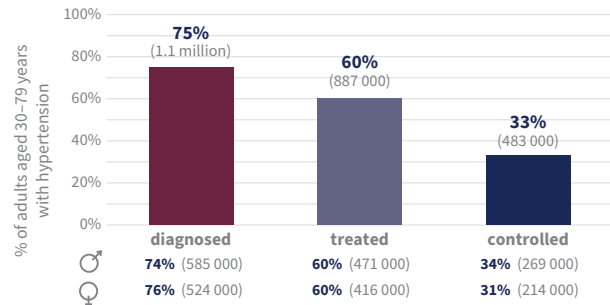
Prevalence of hypertension among adults aged 30–79 years (2024)^a

43% 46% 40%

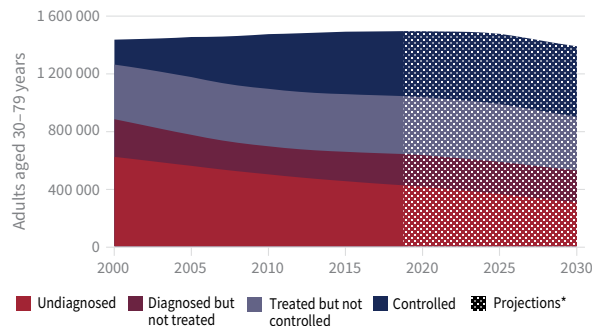
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.5 million adults aged 30–79 years with hypertension, approximately 999 000 do not have the condition controlled^b

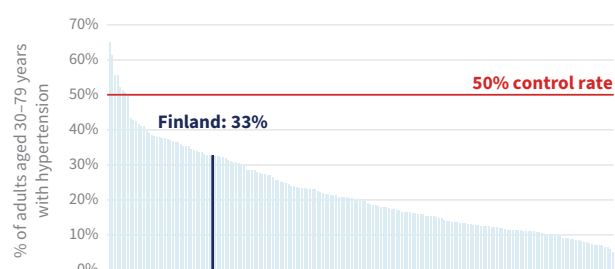


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	57 690	29 180	28 500	2021
Cardiovascular disease deaths	22 030	10 750	11 280	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	53	51	55	2021
Risk of premature death from NCDs (%) ^c	10	13	7	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	7	2021
Current tobacco use, adults aged 15+ years (%)	22	26	19	2022
Obesity, adults aged 18+ years (%)	24	23	25	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	10	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	10	11	8	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

France

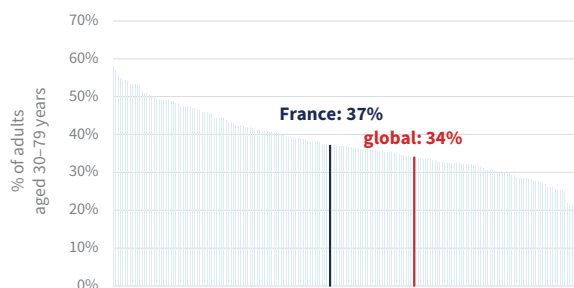
Hypertension profile

Total population (2024): 66 550 000

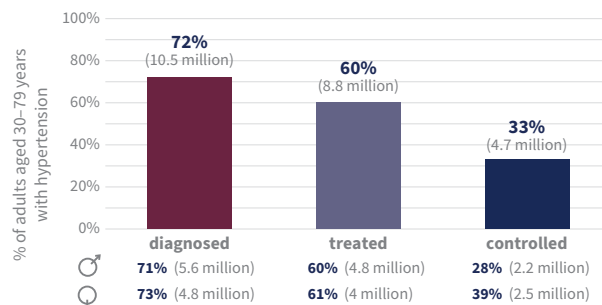
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 37% ♀ 42% 33%

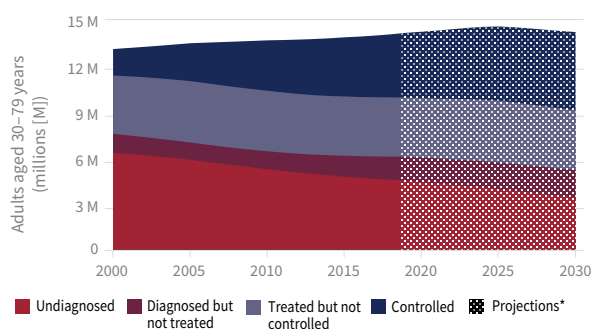
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 14.5 million adults aged 30–79 years with hypertension, approximately 9.8 million do not have the condition controlled^b

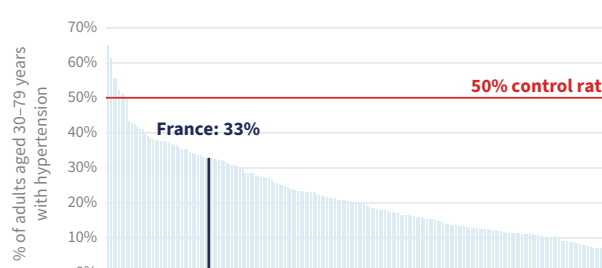


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	648 600	327 000	321 600	2021
Cardiovascular disease deaths	150 900	70 800	80 080	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	44	44	44	2021
Risk of premature death from NCDs (%) ^c	10	13	7	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	9	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	35	36	34	2022
Obesity, adults aged 18+ years (%)	11	11	10	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	23	20	26	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Don't know

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Gabon

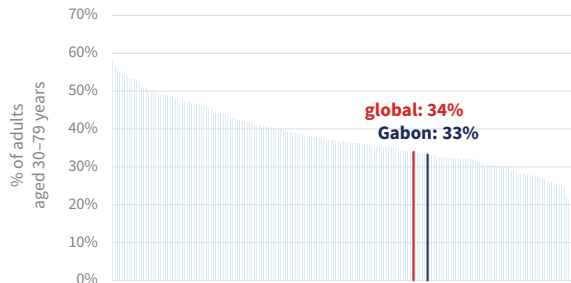
Hypertension profile

Total population (2024): 2 539 000

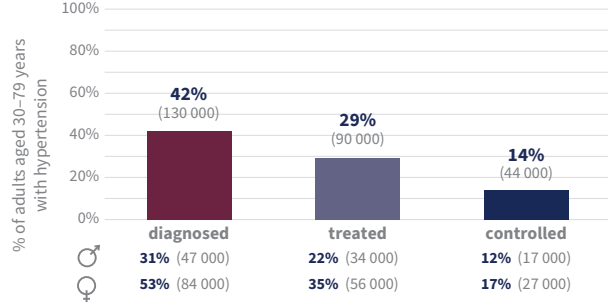
Prevalence of hypertension among adults aged 30–79 years (2024)^a

33% 31% 35%

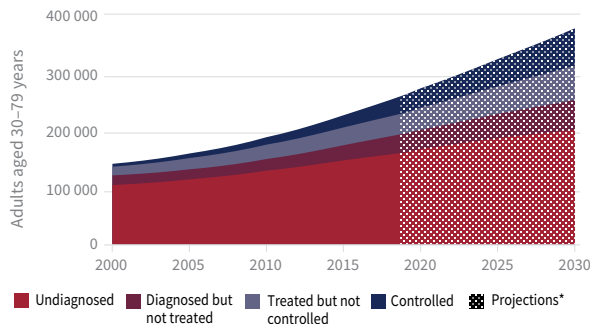
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 311 000 adults aged 30–79 years with hypertension, approximately 266 000 do not have the condition controlled^b

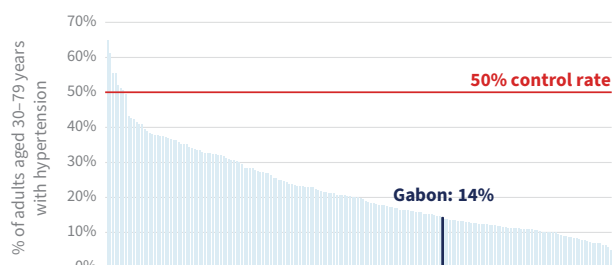


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	18 370	10 450	7920	2021
Cardiovascular disease deaths	2760	1380	1380	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	60	57	63	2021
Risk of premature death from NCDs (%) ^c	18	20	16	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	20	10	30	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	8	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	21	17	25	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Gambia

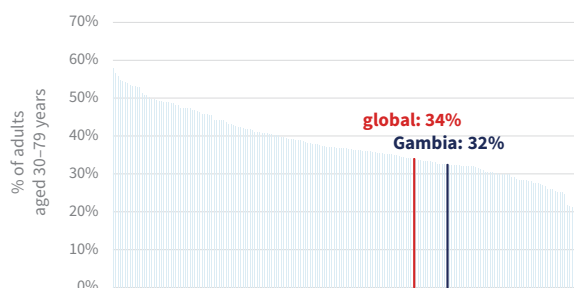
Hypertension profile

Total population (2024): 2 760 000

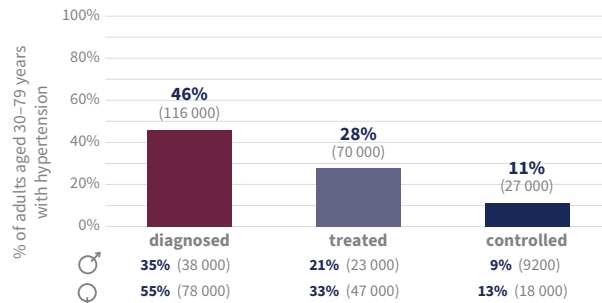
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 32% ♀ 29% ♀ 36%

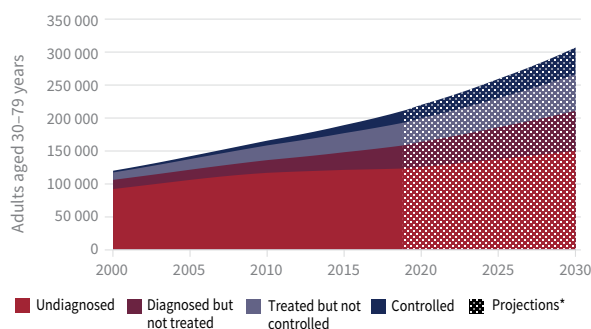
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 250 000 adults aged 30–79 years with hypertension, approximately 223 000 do not have the condition controlled^b

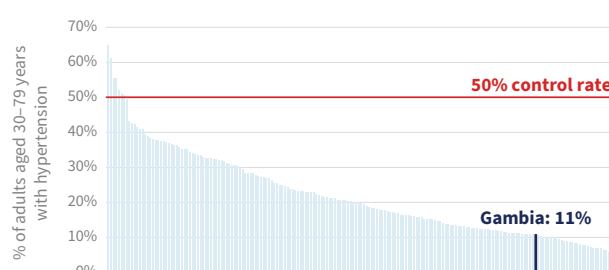


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	17 310	9350	7960	2021
Cardiovascular disease deaths	3090	1450	1640	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	60	57	62	2021
Risk of premature death from NCDs (%) ^c	22	23	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	11	20	1	2022
Obesity, adults aged 18+ years (%)	13	9	18	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	21	17	25	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Georgia

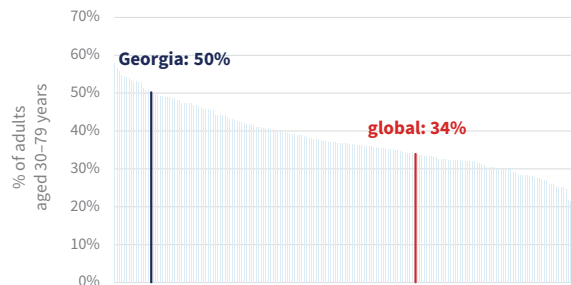
Hypertension profile

Total population (2024): 3 808 000

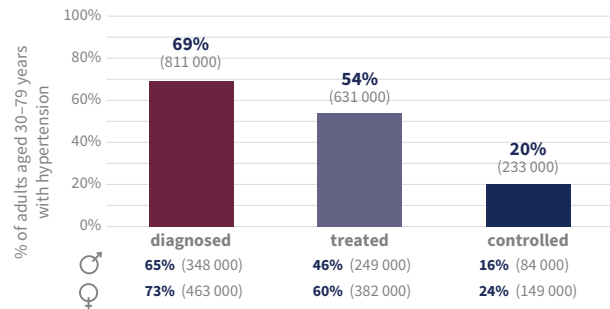
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 50% ♀ 50%

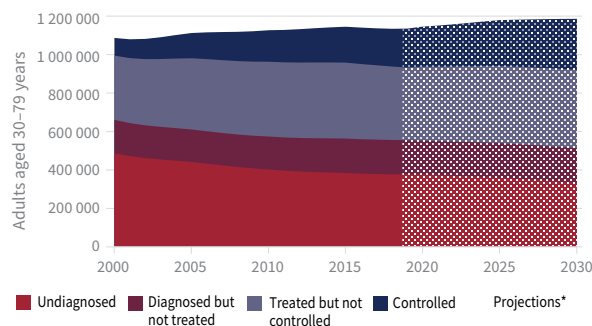
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.2 million adults aged 30–79 years with hypertension, approximately 938 000 do not have the condition controlled^b

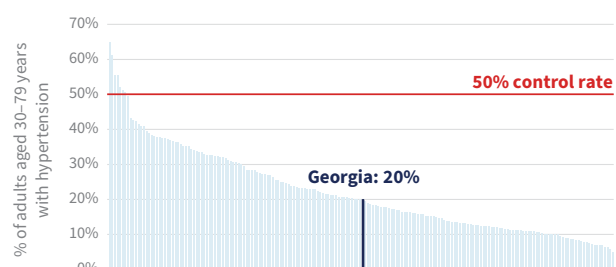


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	63 170	31 440	31 730	2021
Cardiovascular disease deaths	27 550	12 790	14 760	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	64	63	64	2021
Risk of premature death from NCDs (%) ^c	22	33	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	7	2021
Current tobacco use, adults aged 15+ years (%)	32	56	8	2022
Obesity, adults aged 18+ years (%)	39	35	42	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	16	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	24	24	24	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Germany

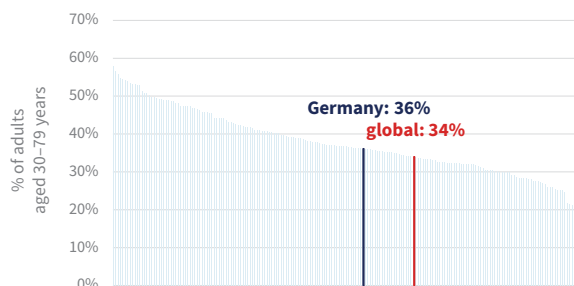
Hypertension profile

Total population (2024): 84 550 000

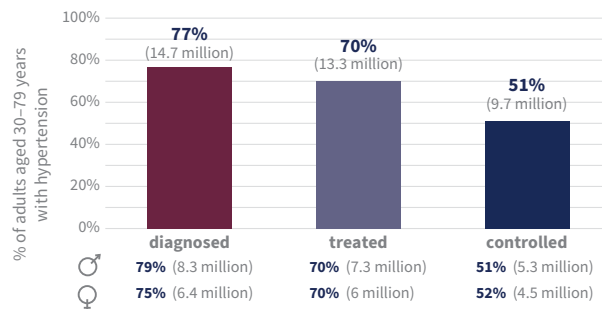
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 36% ♀ 40% ♀ 33%

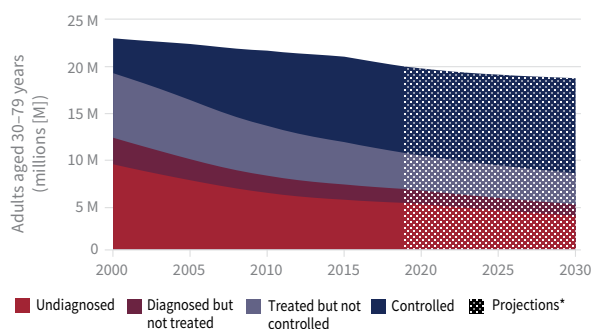
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 19 million adults aged 30–79 years with hypertension, approximately 9.3 million do not have the condition controlled^b

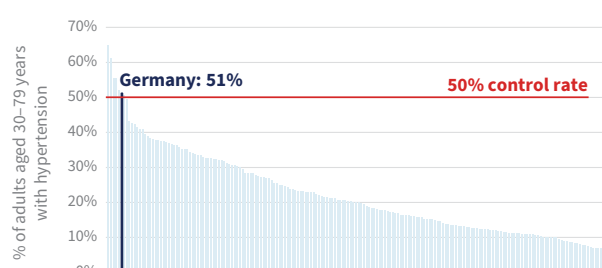


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	1 038 000	524 000	514 500	2021
Cardiovascular disease deaths	350 100	166 000	184 200	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	53	50	56	2021
Risk of premature death from NCDs (%) ^c	12	15	9	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	21	23	19	2022
Obesity, adults aged 18+ years (%)	24	26	23	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	12	12	12	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Ghana

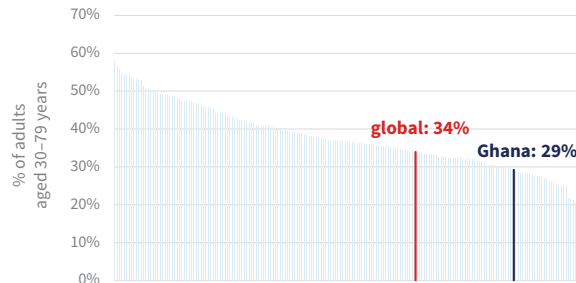
Hypertension profile

Total population (2024): 34 430 000

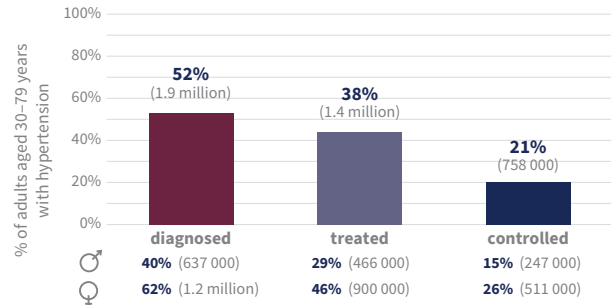
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 29% ♀ 32%

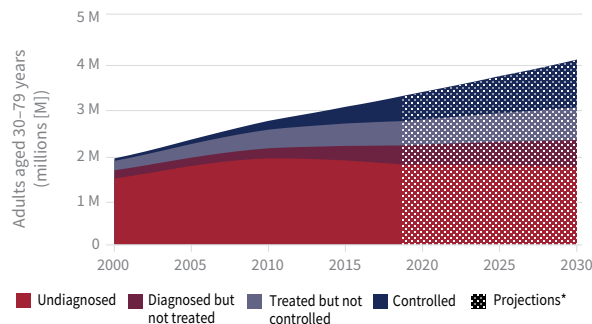
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 3.6 million adults aged 30–79 years with hypertension, approximately 2.8 million do not have the condition controlled^b

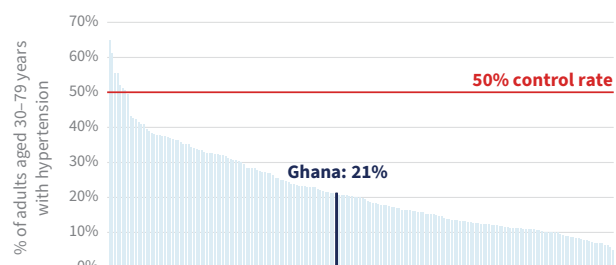


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	217 600	120 100	97 530	2021
Cardiovascular disease deaths	45 760	23 780	21 980	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	52	63	2021
Risk of premature death from NCDs (%) ^c	22	25	20	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	8	8	2021
Current tobacco use, adults aged 15+ years (%)	3	7	0	2022
Obesity, adults aged 18+ years (%)	12	5	19	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	21	18	24	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Greece

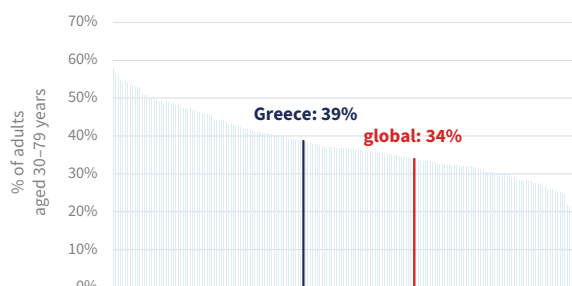
Hypertension profile

Total population (2024): 10 050 000

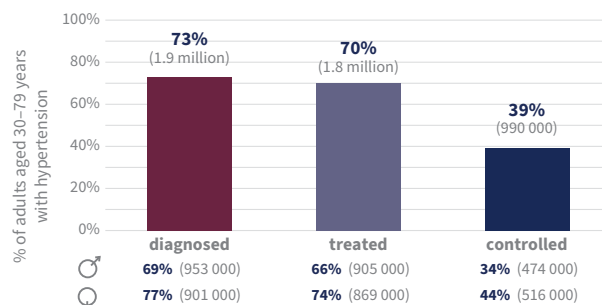
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 39% ♂ 43% ♀ 35%

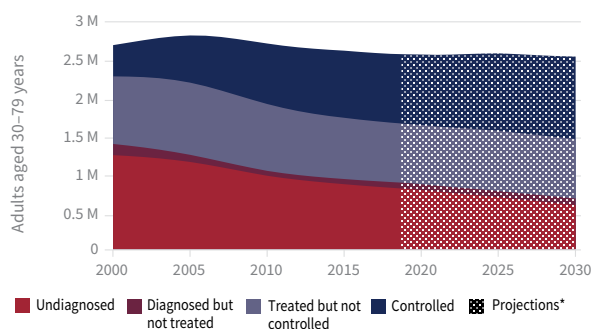
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.5 million adults aged 30–79 years with hypertension, approximately 1.6 million do not have the condition controlled^b

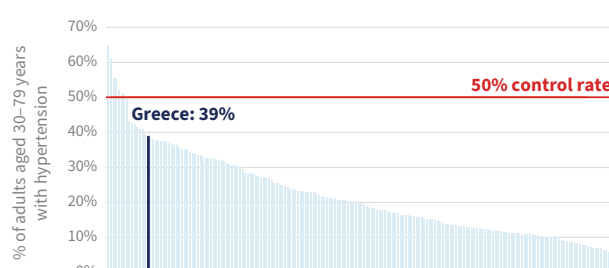


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	156 800	70 060	86 700	2021
Cardiovascular disease deaths	55 110	21 610	33 500	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	47	45	49	2021
Risk of premature death from NCDs (%) ^c	12	16	8	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	10	7	2021
Current tobacco use, adults aged 15+ years (%)	33	35	31	2022
Obesity, adults aged 18+ years (%)	34	33	34	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	7	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	35	33	37	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Grenada

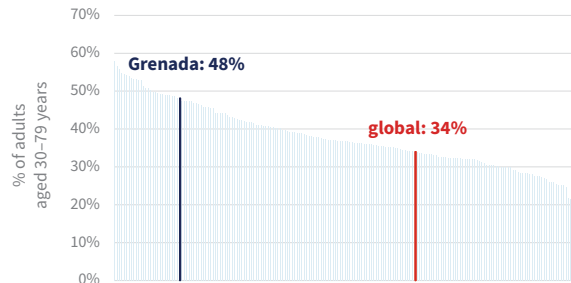
Hypertension profile

Total population (2024): 117 200

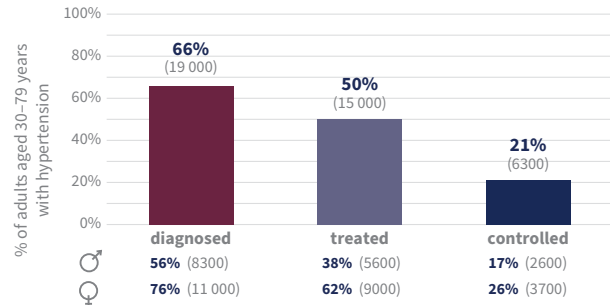
Prevalence of hypertension among adults aged 30–79 years (2024)^a

48% 49% 48%

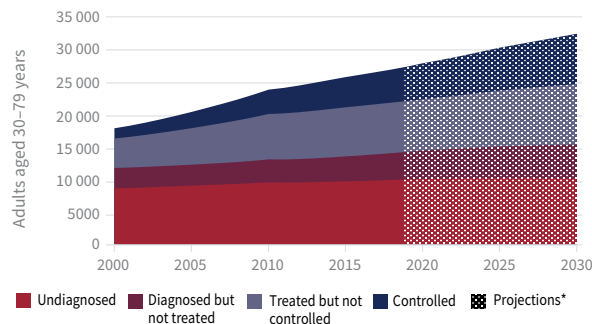
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 29 000 adults aged 30–79 years with hypertension, approximately 23 000 do not have the condition controlled^b

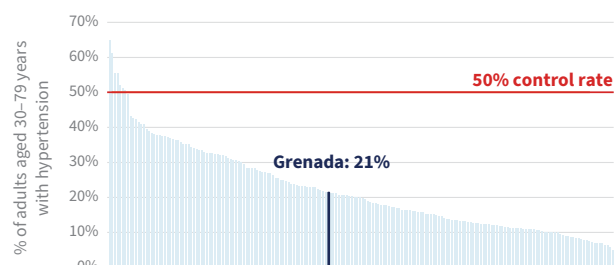


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	1320	700	620	2021
Cardiovascular disease deaths	340	170	170	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	52	51	53	2021
Risk of premature death from NCDs (%) ^c	17	18	16	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	30	19	42	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	8	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	36	29	43	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Guatemala

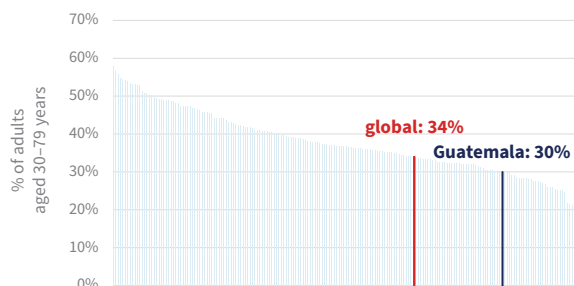
Hypertension profile

Total population (2024): 18 410 000

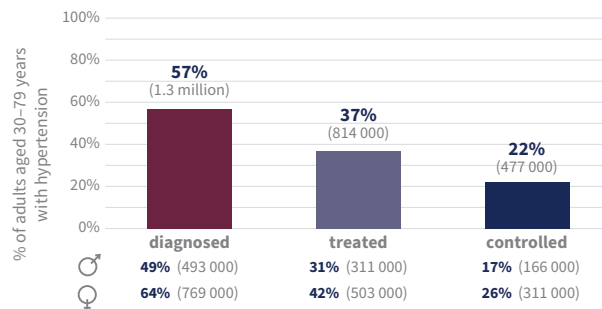
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 30% ♂ 29% ♀ 31%

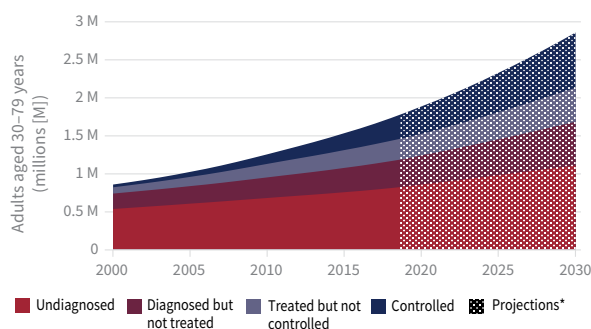
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.2 million adults aged 30–79 years with hypertension, approximately 1.7 million do not have the condition controlled^b

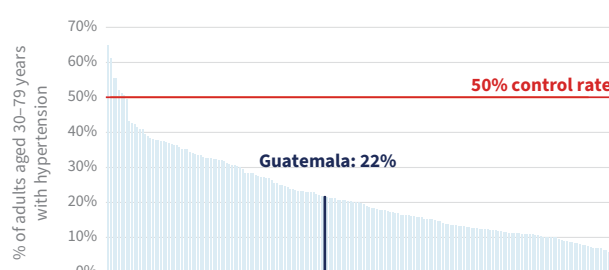


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	109 500	62 930	46 610	2021
Cardiovascular disease deaths	11 710	5320	6390	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	48	46	49	2021
Risk of premature death from NCDs (%) ^c	15	12	16	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	9	2021
Current tobacco use, adults aged 15+ years (%)	12	22	2	2022
Obesity, adults aged 18+ years (%)	25	21	29	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	37	28	45	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Guinea

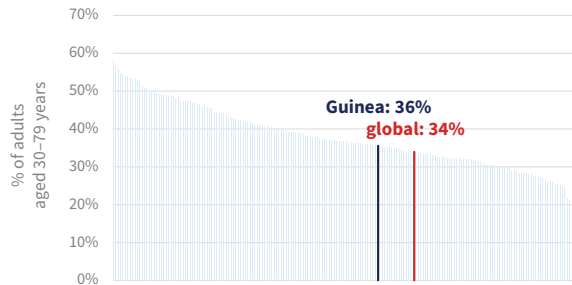
Hypertension profile

Total population (2024): 14 750 000

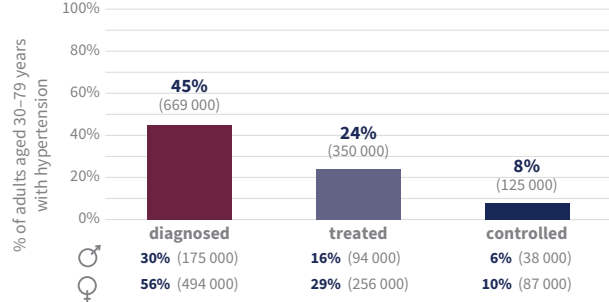
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 36% ♂ 32% ♀ 39%

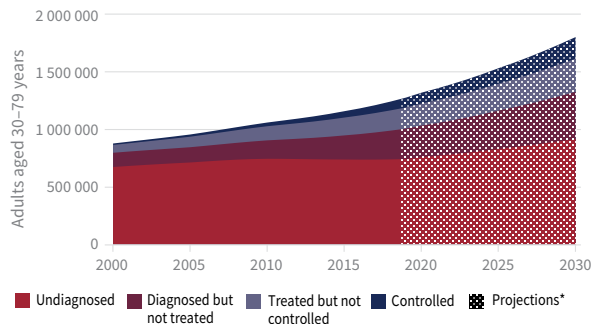
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.5 million adults aged 30–79 years with hypertension, approximately 1.4 million do not have the condition controlled^b

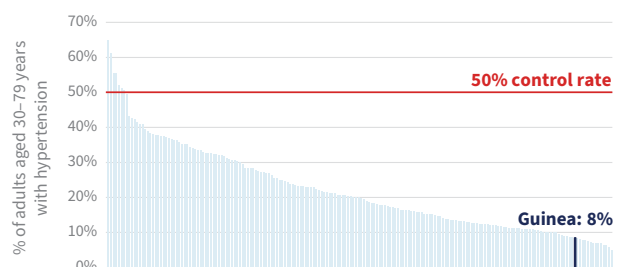


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	121 200	60 980	60 230	2021
Cardiovascular disease deaths	17 780	7390	10 390	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	53	50	56	2021
Risk of premature death from NCDs (%) ^c	24	23	24	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	8	5	12	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	17	14	19	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Guinea-Bissau

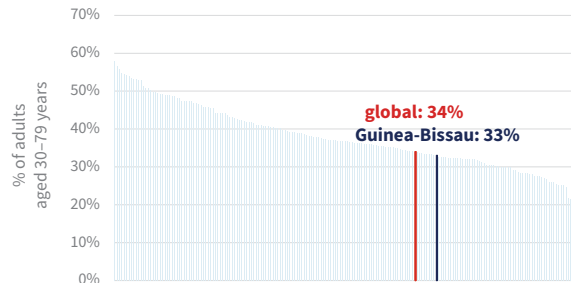
Hypertension profile

Total population (2024): 2 201 000

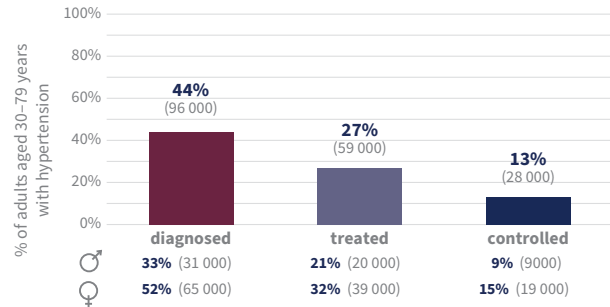
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 33% ♀ 30% ♀ 35%

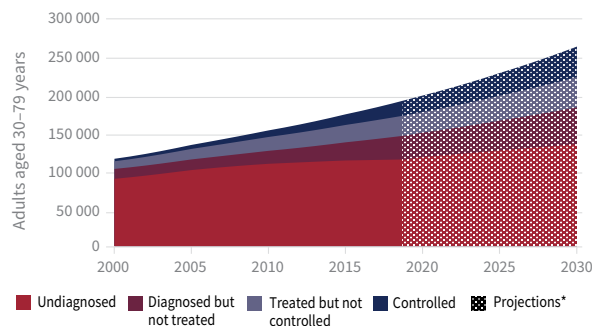
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 219 000 adults aged 30–79 years with hypertension, approximately 191 000 do not have the condition controlled^b

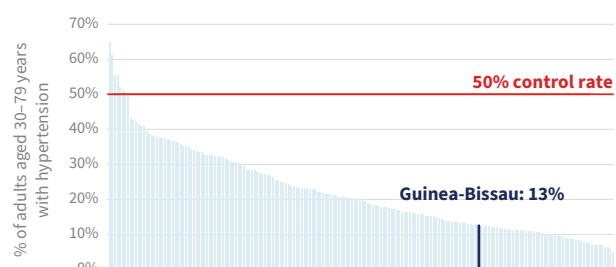


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	19 440	10 250	9 190	2021
Cardiovascular disease deaths	2 720	1 340	1 380	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	54	60	2021
Risk of premature death from NCDs (%) ^c	25	28	23	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	8	16	1	2022
Obesity, adults aged 18+ years (%)	10	7	13	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	18	15	20	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Guyana

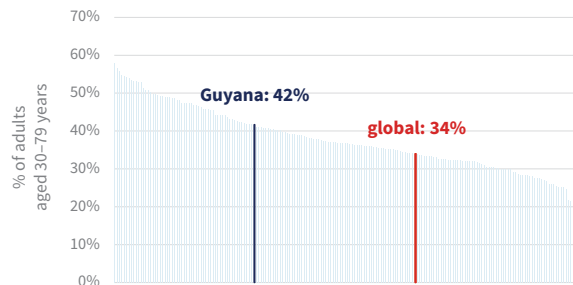
Hypertension profile

Total population (2024): 831 100

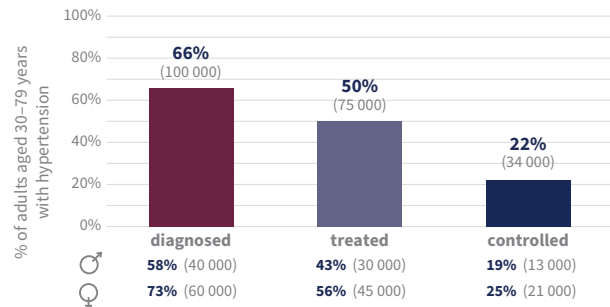
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 42% ♀ 39% ♀ 44%

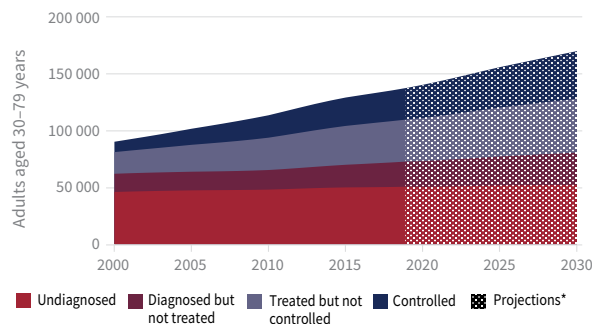
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 151 000 adults aged 30–79 years with hypertension, approximately 117 000 do not have the condition controlled^b

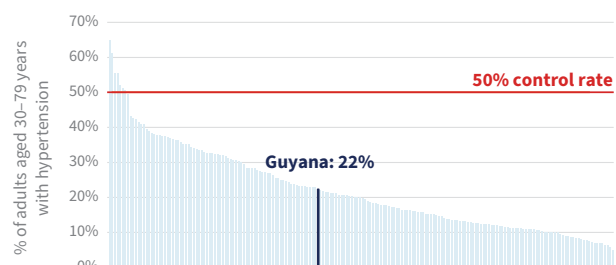


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	7720	4230	3480	2021
Cardiovascular disease deaths	1710	850	850	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	55	57	2021
Risk of premature death from NCDs (%) ^c	25	27	24	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	11	20	2	2022
Obesity, adults aged 18+ years (%)	28	17	38	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	35	24	45	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Haiti

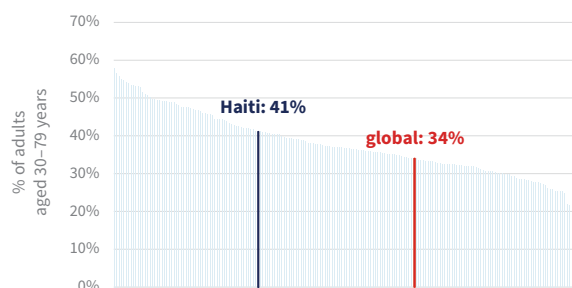
Hypertension profile

Total population (2024): 11 770 000

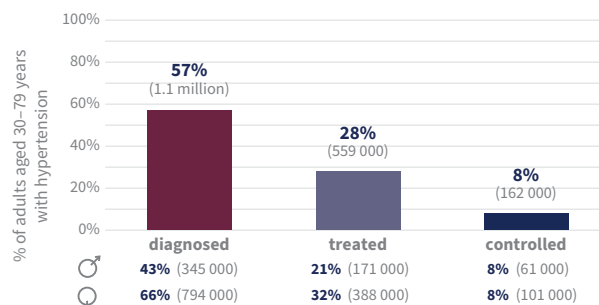
Prevalence of hypertension among adults aged 30–79 years (2024)^a

41% 35% 47%

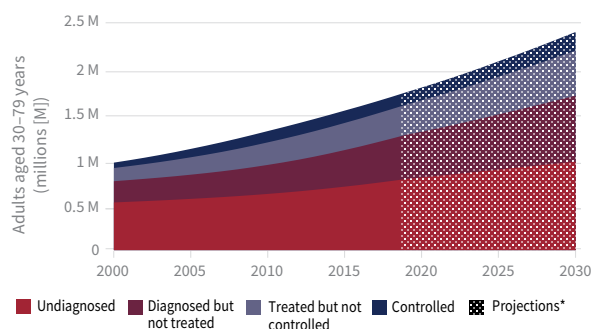
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2 million adults aged 30–79 years with hypertension, approximately 1.8 million do not have the condition controlled^b

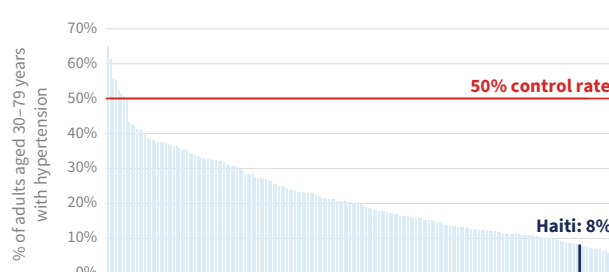


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	102 200	49 400	52 810	2021
Cardiovascular disease deaths	27 830	11 100	16 740	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	52	58	2021
Risk of premature death from NCDs (%) ^c	32	29	34	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	8	14	3	2022
Obesity, adults aged 18+ years (%)	10	6	14	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	28	20	36	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Don't know

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Honduras

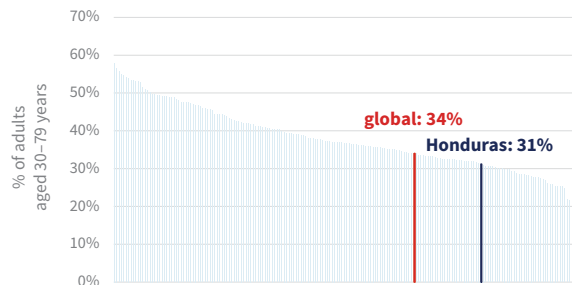
Hypertension profile

Total population (2024): 10 830 000

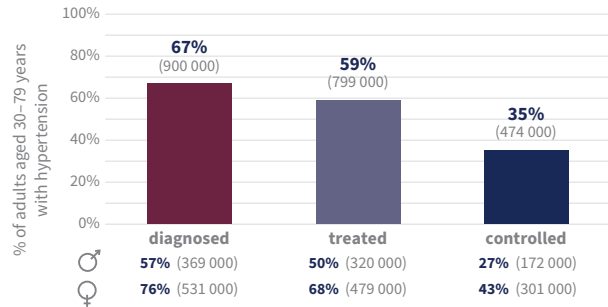
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 31% ♂ 30% ♀ 32%

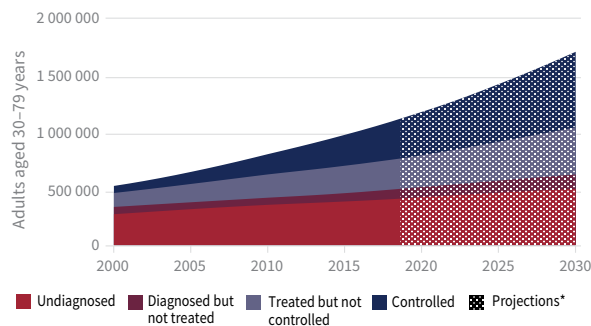
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.3 million adults aged 30–79 years with hypertension, approximately 874 000 do not have the condition controlled^b

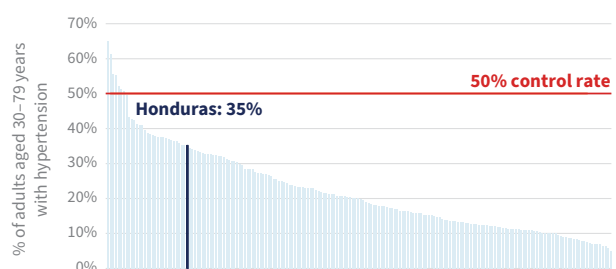


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	61 040	31 780	29 260	2021
Cardiovascular disease deaths	12 090	6 010	6080	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	56	56	2021
Risk of premature death from NCDs (%) ^c	18	19	17	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	9	2021
Current tobacco use, adults aged 15+ years (%) ^d	12	23	2	2022
Obesity, adults aged 18+ years (%)	29	22	35	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	37	31	43	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Hungary

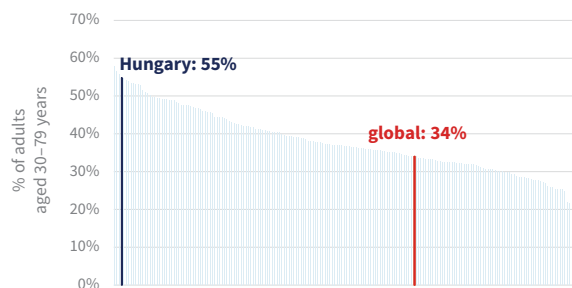
Hypertension profile

Total population (2024): 9 676 000

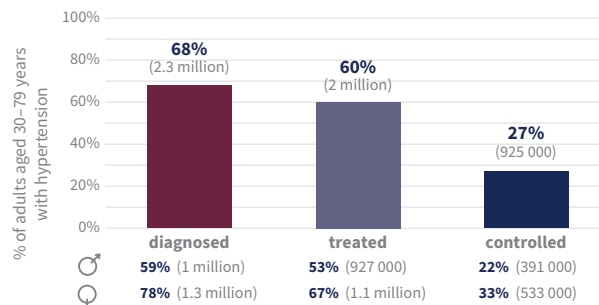
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 55% ♀ 60% 50%

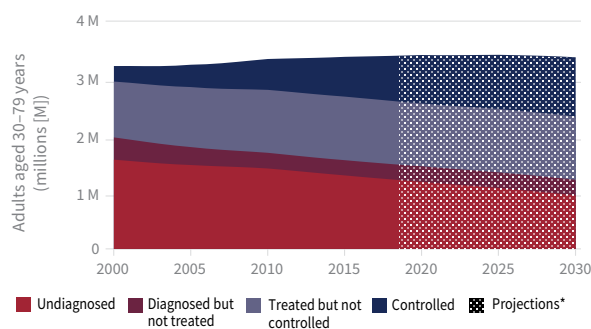
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 3.4 million adults aged 30–79 years with hypertension, approximately 2.5 million do not have the condition controlled^b

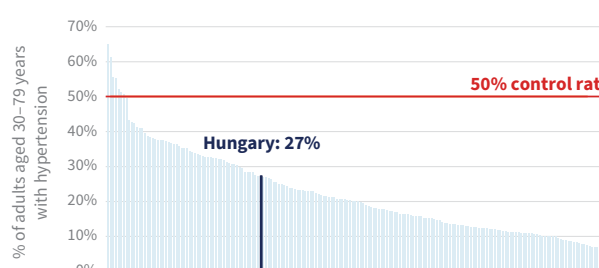


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	153 700	76 830	76 870	2021
Cardiovascular disease deaths	64 760	29 740	35 020	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	63	61	66	2021
Risk of premature death from NCDs (%) ^c	22	29	15	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	14	16	11	2021
Current tobacco use, adults aged 15+ years (%) ^d	32	36	28	2022
Obesity, adults aged 18+ years (%)	36	39	35	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	29	28	31	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Iceland

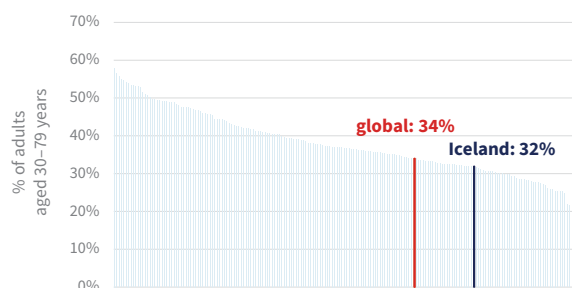
Hypertension profile

Total population (2024): 393 400

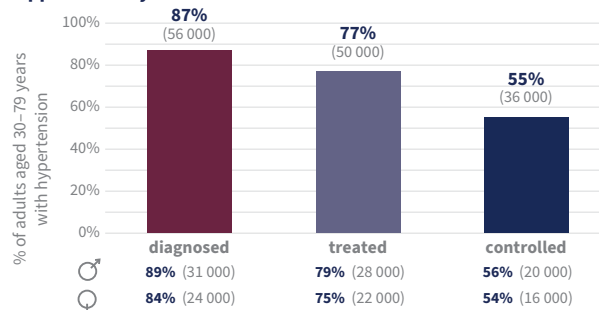
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 32% ♀ 35% 29%

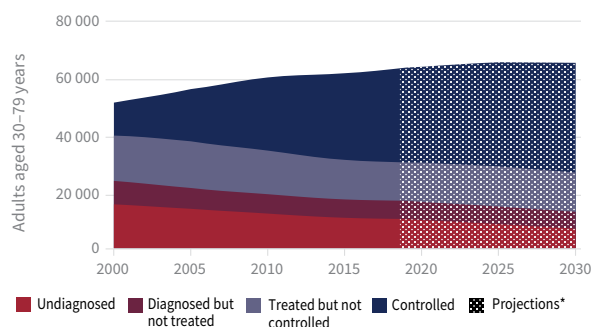
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 64 000 adults aged 30–79 years with hypertension, approximately 29 000 do not have the condition controlled^b

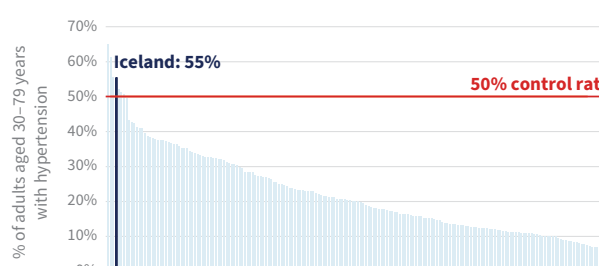


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	2400	1220	1180	2021
Cardiovascular disease deaths	690	360	330	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	47	47	48	2021
Risk of premature death from NCDs (%) ^c	9	9	8	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	10	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	9	9	9	2022
Obesity, adults aged 18+ years (%)	23	24	21	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	8	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	26	24	28	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

India

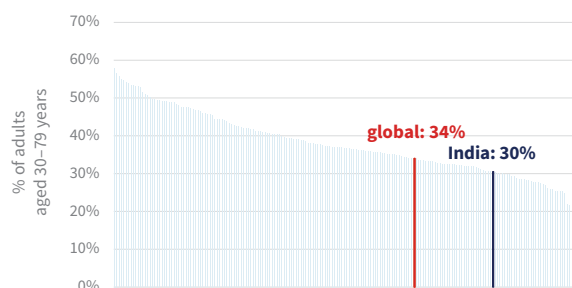
Hypertension profile

Total population (2024): 1 451 000 000

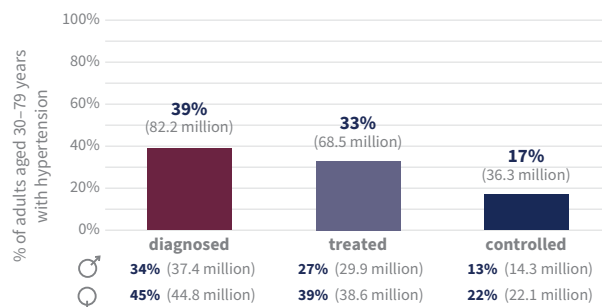
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 30% ♀ 31% ♀ 30%

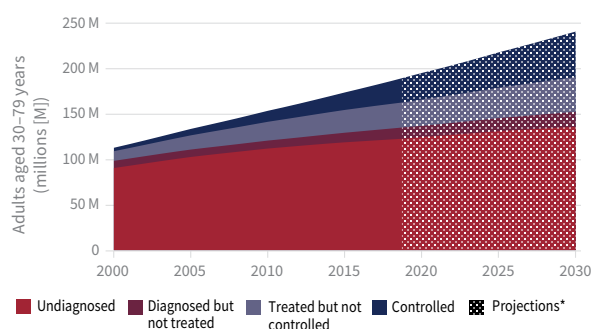
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 210.2 million adults aged 30–79 years with hypertension, approximately 173.9 million do not have the condition controlled^b

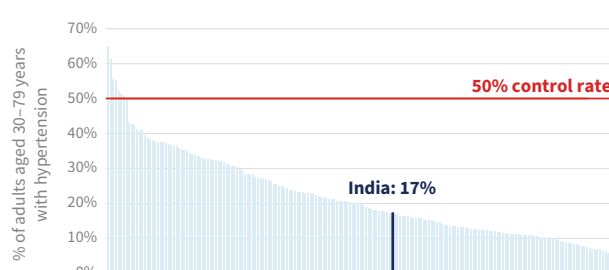


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	13 040 000	7 099 000	5 944 000	2021
Cardiovascular disease deaths	2 785 000	1 427 000	1 358 000	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	48	46	51	2021
Risk of premature death from NCDs (%) ^c	24	24	23	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	10	9	2021
Current tobacco use, adults aged 15+ years (%)	24	38	11	2022
Obesity, adults aged 18+ years (%)	7	5	9	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	49	42	57	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Indonesia

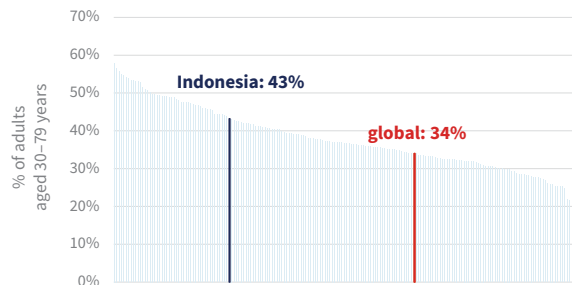
Hypertension profile

Total population (2024): 283 500 000

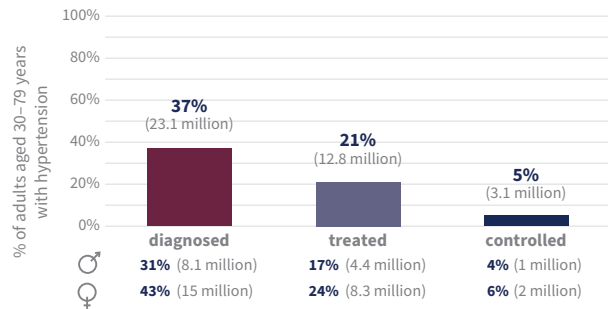
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 43% ♀ 49%

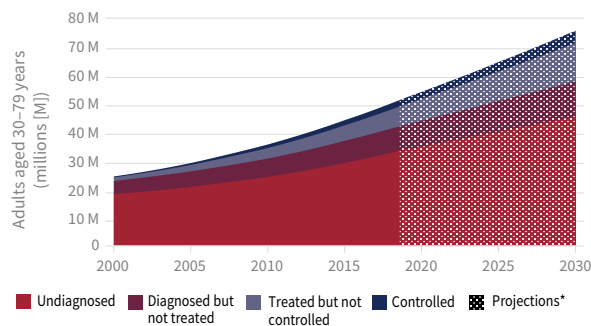
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 61.5 million adults aged 30–79 years with hypertension, approximately 58.5 million do not have the condition controlled^b

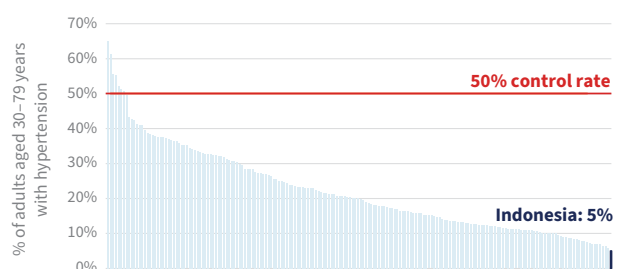


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	2 639 000	1 364 000	1 275 000	2021
Cardiovascular disease deaths	721 700	314 600	407 000	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	67	64	69	2021
Risk of premature death from NCDs (%) ^c	22	23	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	10	2021
Current tobacco use, adults aged 15+ years (%)	38	73	3	2022
Obesity, adults aged 18+ years (%)	12	7	16	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	19	22	16	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Iran (Islamic Republic of)

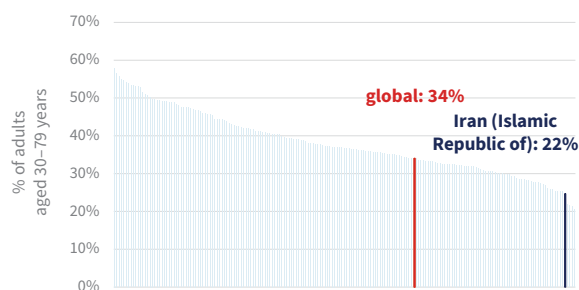
Hypertension profile

Total population (2024): 91 570 000

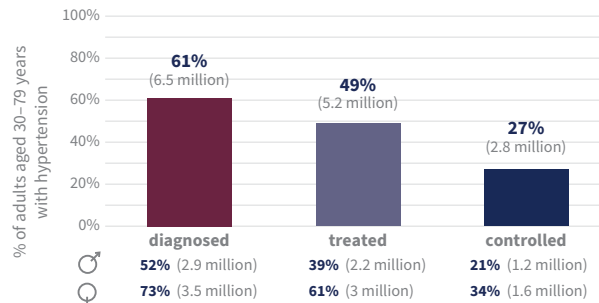
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 22% ♀ 24% 20%

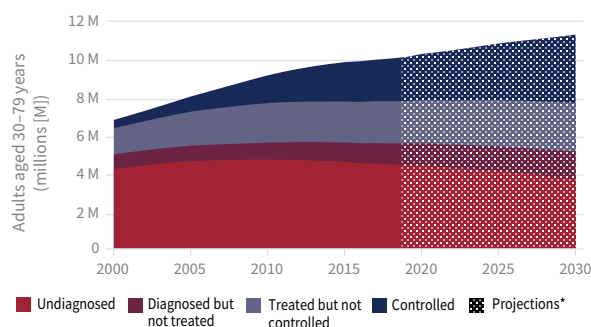
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 10.6 million adults aged 30–79 years with hypertension, approximately 7.7 million do not have the condition controlled^b

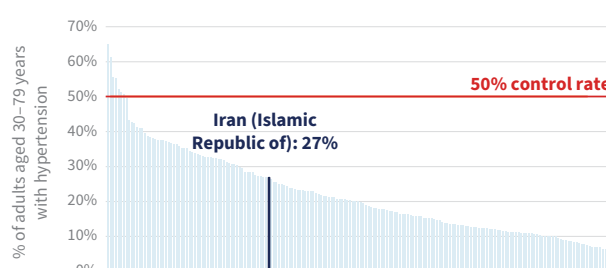


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	515 200	278 100	237 100	2021
Cardiovascular disease deaths	134 200	59 810	74 440	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	53	51	55	2021
Risk of premature death from NCDs (%) ^c	14	15	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%)	13	24	3	2022
Obesity, adults aged 18+ years (%)	25	18	32	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	46	36	57	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Iraq

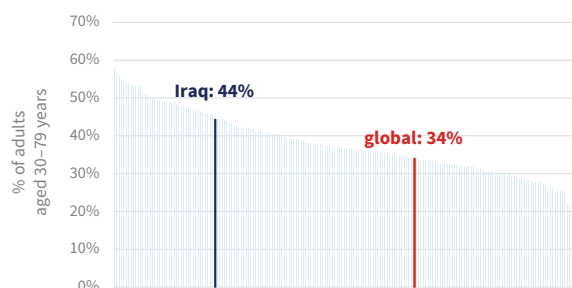
Hypertension profile

Total population (2024): 46 040 000

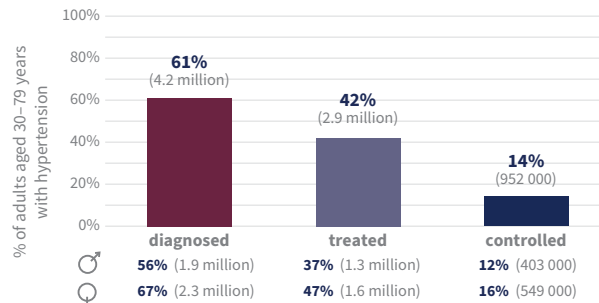
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 44% ♀ 45% ♀ 44%

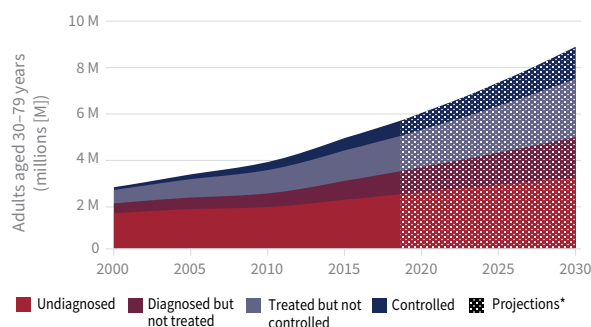
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 6.9 million adults aged 30–79 years with hypertension, approximately 6 million do not have the condition controlled^b

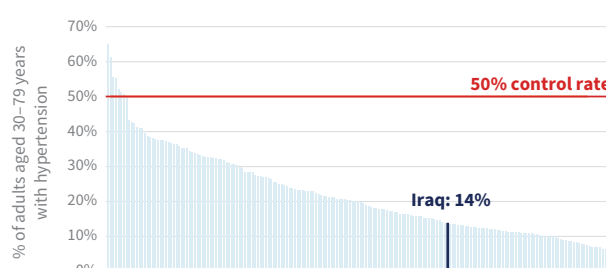


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	185 300	100 600	84 710	2021
Cardiovascular disease deaths	65 350	32 690	32 650	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	62	62	62	2021
Risk of premature death from NCDs (%) ^c	23	27	20	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%)	19	37	2	2022
Obesity, adults aged 18+ years (%)	37	29	45	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	52	42	62	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Ireland

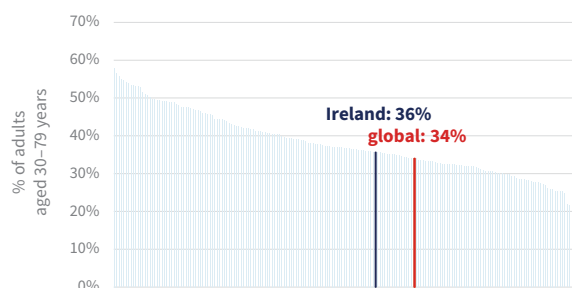
Hypertension profile

Total population (2024): 5 255 000

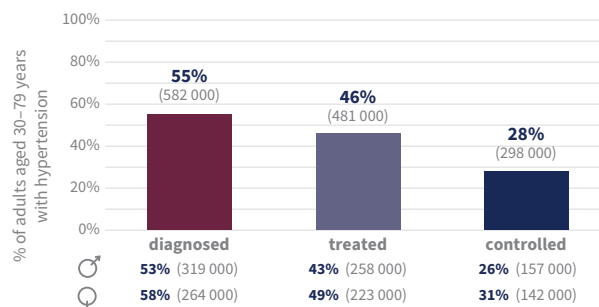
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 36% ♂ 41% ♀ 30%

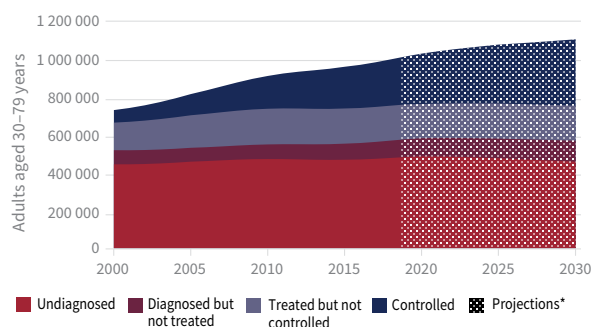
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.1 million adults aged 30–79 years with hypertension, approximately 756 000 do not have the condition controlled^b

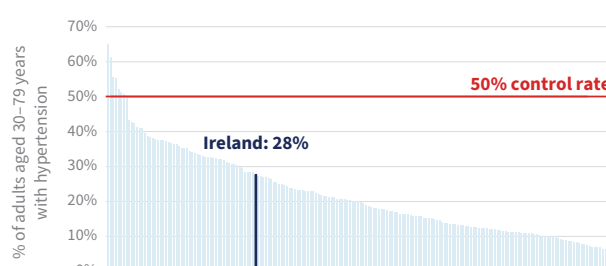


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	35 650	18 630	17 010	2021
Cardiovascular disease deaths	8790	4750	4040	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	48	49	47	2021
Risk of premature death from NCDs (%) ^c	10	11	8	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	9	6	2021
Current tobacco use, adults aged 15+ years (%) ^d	19	22	17	2022
Obesity, adults aged 18+ years (%)	31	32	29	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	22	20	24	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Israel

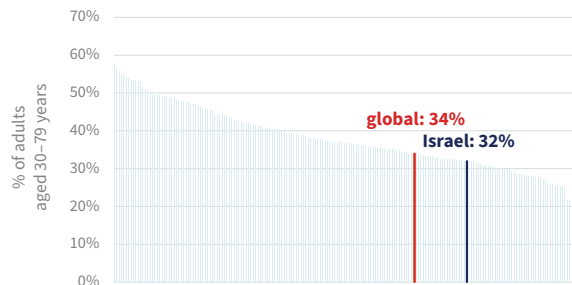
Hypertension profile

Total population (2024): 9 387 000

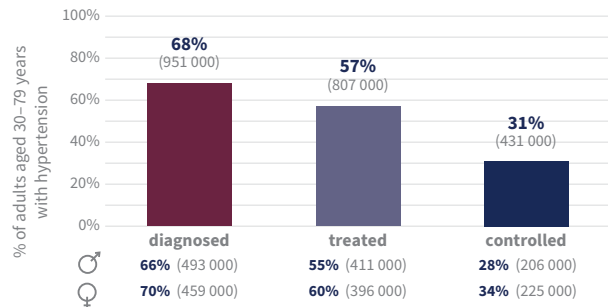
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 32% ♂ 35% ♀ 29%

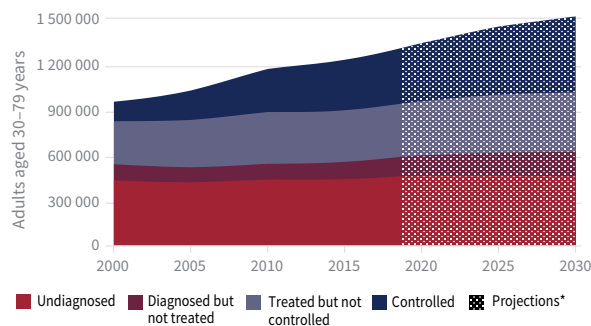
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.4 million adults aged 30–79 years with hypertension, approximately 975 000 do not have the condition controlled^b

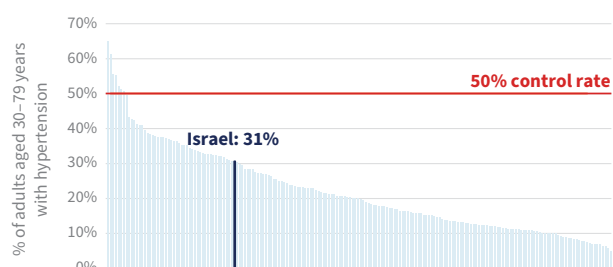


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	53 740	19 540	34 200	2021
Cardiovascular disease deaths	11 650	3540	8100	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	49	48	49	2021
Risk of premature death from NCDs (%) ^c	8	9	6	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	10	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	20	27	14	2022
Obesity, adults aged 18+ years (%)	23	24	23	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	27	24	29	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Italy

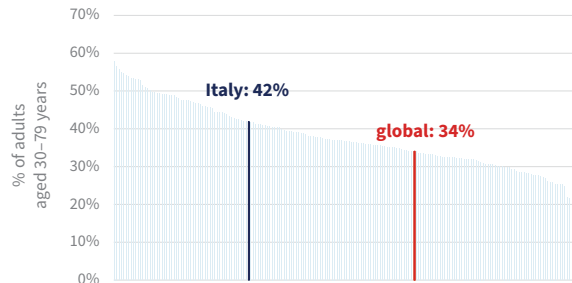
Hypertension profile

Total population (2024): 59 340 000

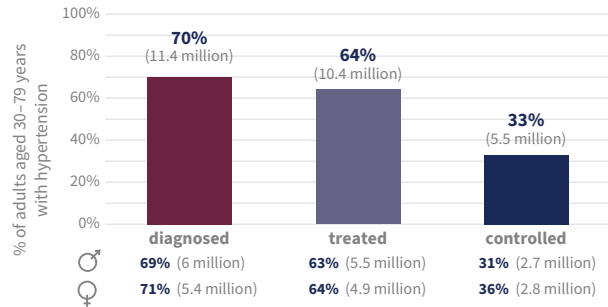
Prevalence of hypertension among adults aged 30–79 years (2024)^a

42% 46% 38%

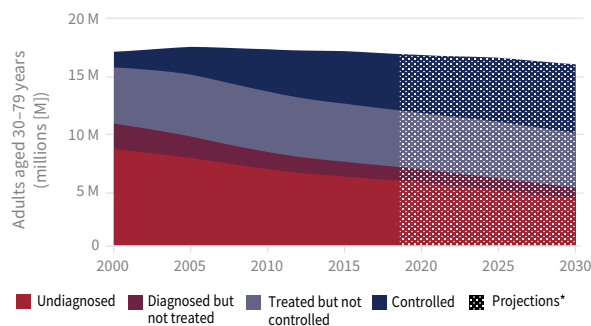
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 16.4 million adults aged 30–79 years with hypertension, approximately 10.9 million do not have the condition controlled^b

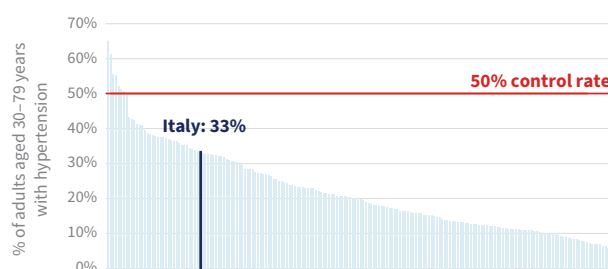


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	710 300	352 600	357 600	2021
Cardiovascular disease deaths	212 100	95 430	116 700	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	48	46	50	2021
Risk of premature death from NCDs (%) ^c	9	11	7	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	9	2021
Current tobacco use, adults aged 15+ years (%) ^d	22	26	19	2022
Obesity, adults aged 18+ years (%)	22	20	23	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	8	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	40	36	44	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Jamaica

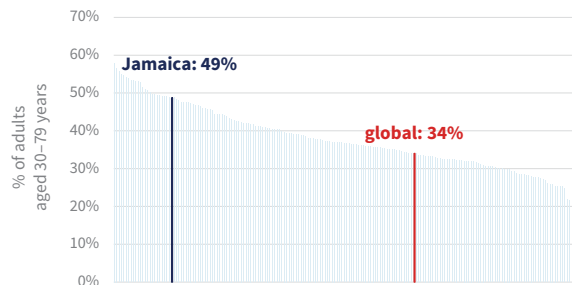
Hypertension profile

Total population (2024): 2 839 000

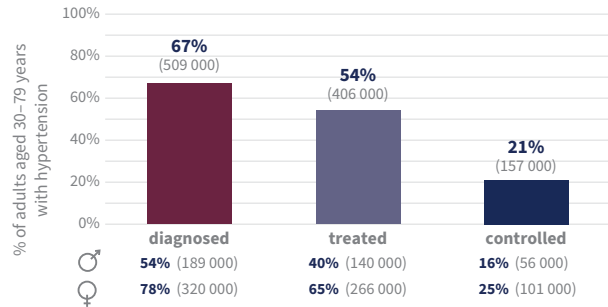
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 49% ♀ 46% 51%

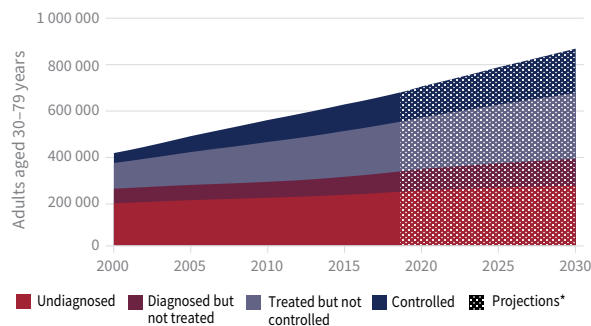
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 756 000 adults aged 30–79 years with hypertension, approximately 600 000 do not have the condition controlled^b

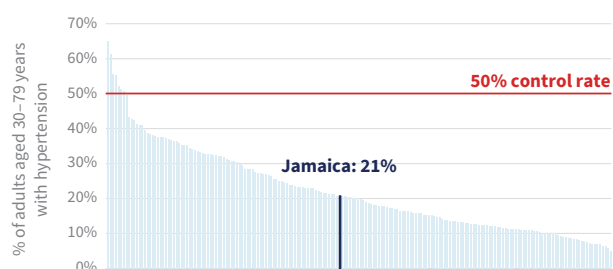


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	26 990	14 430	12 560	2021
Cardiovascular disease deaths	7690	3820	3870	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	55	54	57	2021
Risk of premature death from NCDs (%) ^c	20	23	18	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%) ^d	10	16	4	2022
Obesity, adults aged 18+ years (%)	34	19	49	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	39	31	46	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Japan

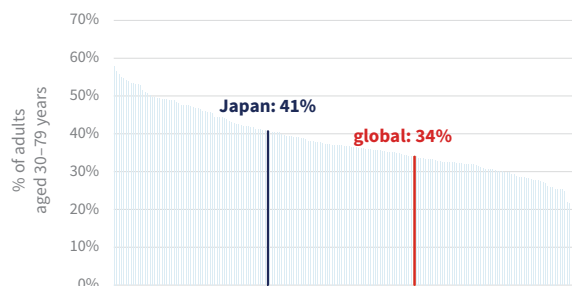
Hypertension profile

Total population (2024): 123 800 000

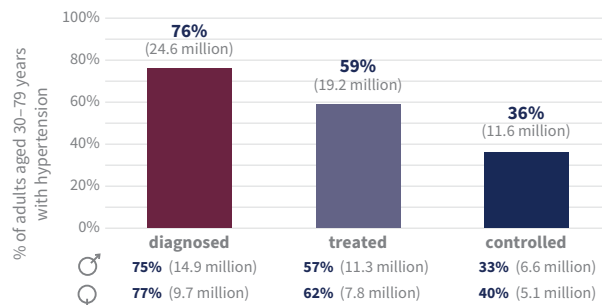
Prevalence of hypertension among adults aged 30–79 years (2024)^a

41% 50% 32%

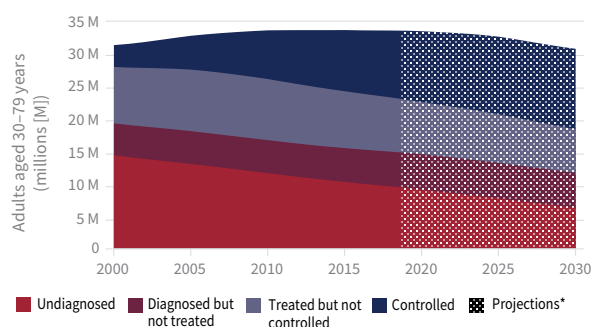
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 32.4 million adults aged 30–79 years with hypertension, approximately 20.8 million do not have the condition controlled^b

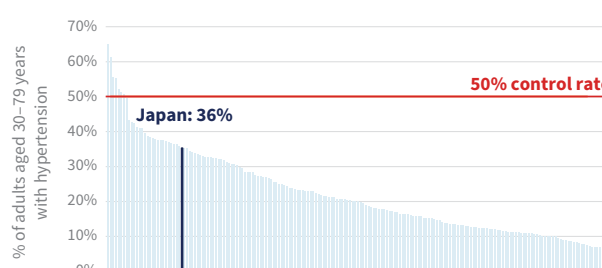


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	1 388 000	719 700	668 100	2021
Cardiovascular disease deaths	394 800	181 800	213 000	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	44	47	41	2021
Risk of premature death from NCDs (%) ^c	8	11	5	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	9	2021
Current tobacco use, adults aged 15+ years (%) ^d	19	29	10	2022
Obesity, adults aged 18+ years (%)	5	6	4	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	45	40	50	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Don't know
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Jordan

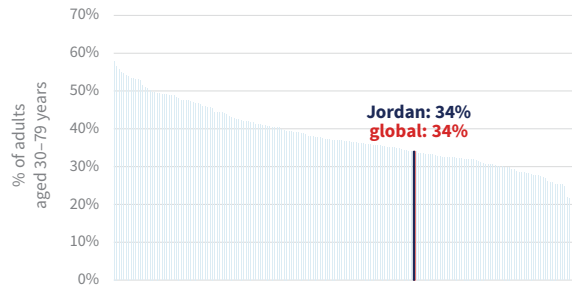
Hypertension profile

Total population (2024): 11 550 000

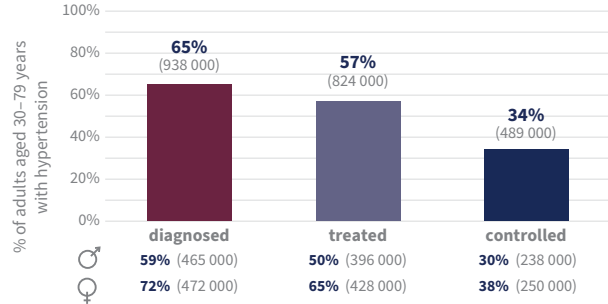
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 34% ♀ 31%

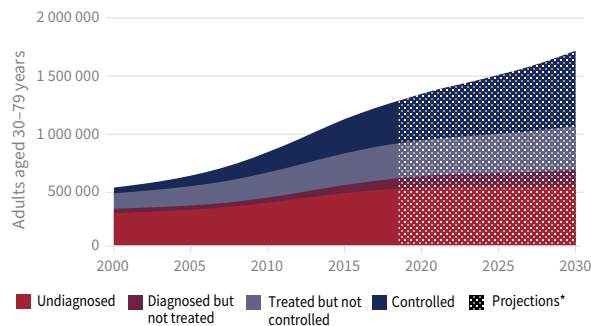
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.4 million adults aged 30–79 years with hypertension, approximately 958 000 do not have the condition controlled^b

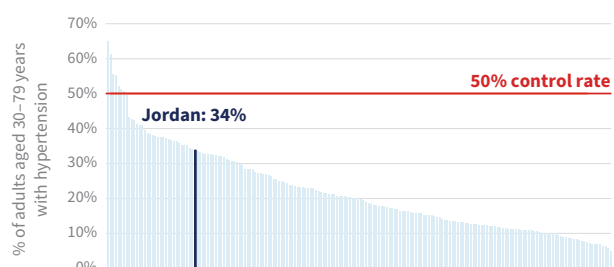


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	39 450	21 330	18 120	2021
Cardiovascular disease deaths	8130	3430	4700	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	58	56	61	2021
Risk of premature death from NCDs (%) ^c	12	12	11	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%) ^d	36	58	14	2022
Obesity, adults aged 18+ years (%)	36	31	40	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	28	30	26	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Kazakhstan

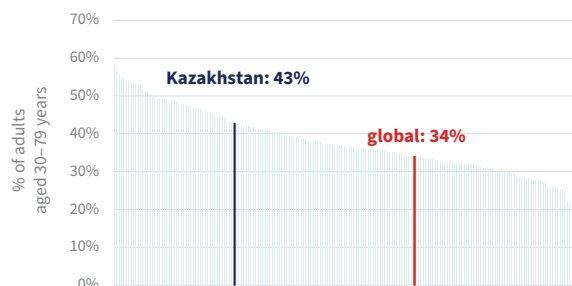
Hypertension profile

Total population (2024): 20 590 000

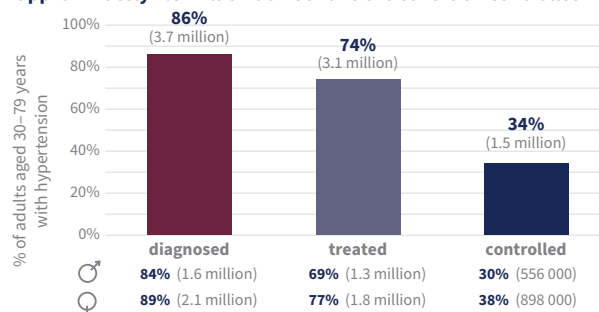
Prevalence of hypertension among adults aged 30–79 years (2024)^a

43% 40% 45%

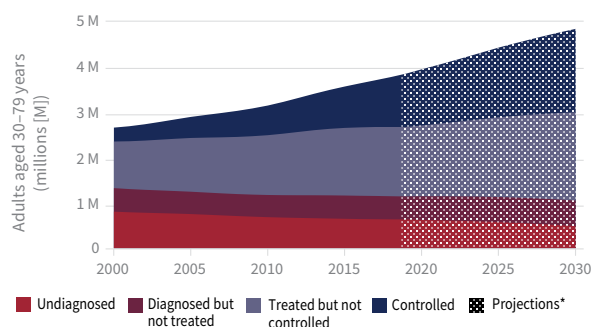
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 4.3 million adults aged 30–79 years with hypertension, approximately 2.8 million do not have the condition controlled^b

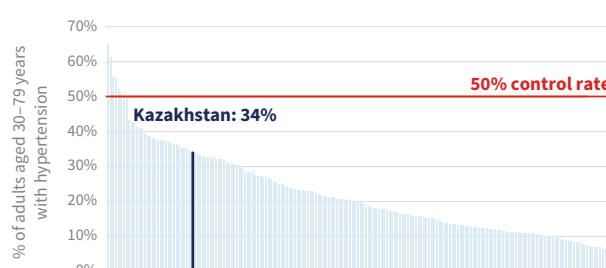


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	186 900	95 830	91 110	2021
Cardiovascular disease deaths	62 910	26 760	36 160	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	58	53	63	2021
Risk of premature death from NCDs (%) ^c	21	28	15	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	7	2021
Current tobacco use, adults aged 15+ years (%)	22	37	7	2022
Obesity, adults aged 18+ years (%)	19	19	20	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	28	29	28	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Kenya

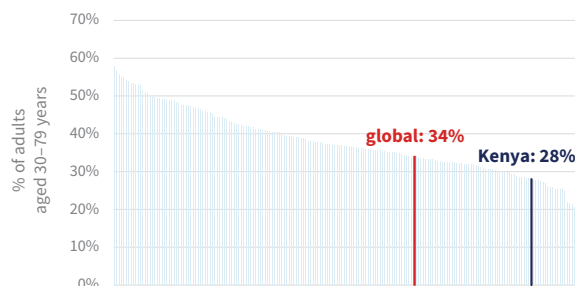
Hypertension profile

Total population (2024): 56 430 000

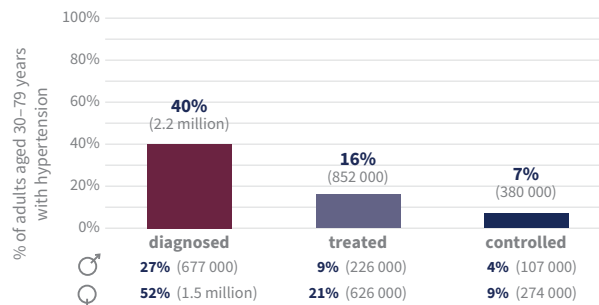
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 28% ♀ 29%

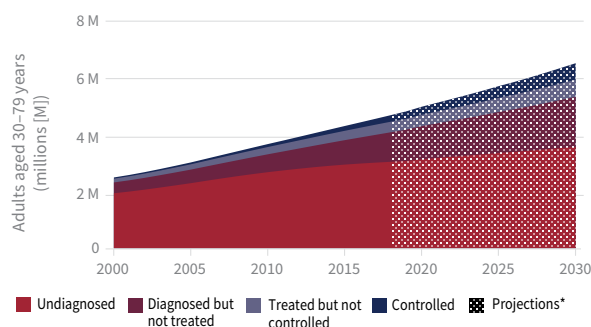
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 5.5 million adults aged 30–79 years with hypertension, approximately 5.1 million do not have the condition controlled^b

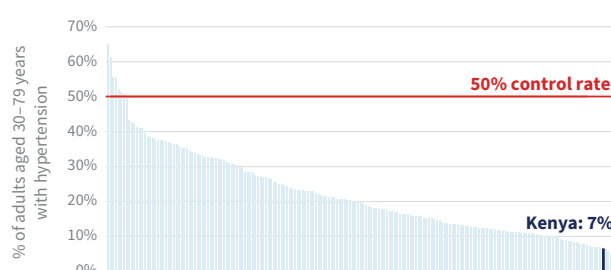


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	306 600	166 500	140 100	2021
Cardiovascular disease deaths	34 870	14 630	20 240	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	54	64	2021
Risk of premature death from NCDs (%) ^c	18	18	18	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	4	8	2021
Current tobacco use, adults aged 15+ years (%)	11	19	3	2022
Obesity, adults aged 18+ years (%)	11	5	17	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	9	8	9	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Kiribati

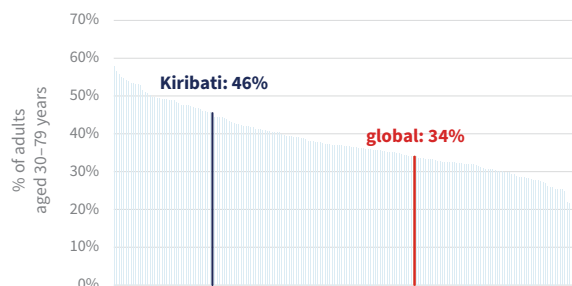
Hypertension profile

Total population (2024): 134 500

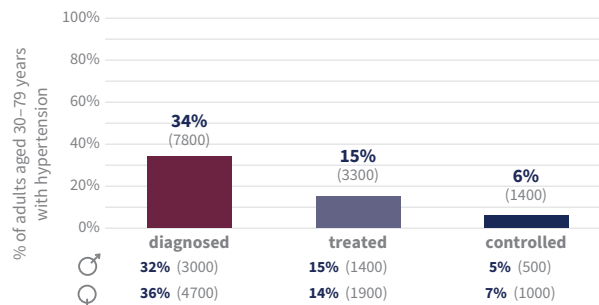
Prevalence of hypertension among adults aged 30–79 years (2024)^a

46% 41% 49%

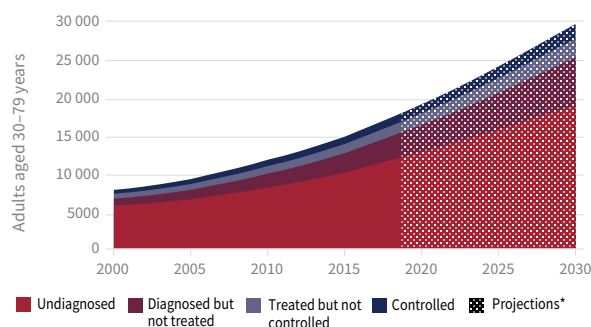
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 23 000 adults aged 30–79 years with hypertension, approximately 21 000 do not have the condition controlled^b

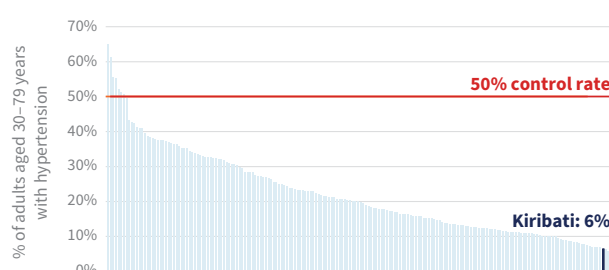


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	1280	670	610	2021
Cardiovascular disease deaths	340	200	130	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	43	46	39	2021
Risk of premature death from NCDs (%) ^c	44	51	38	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	40	53	27	2022
Obesity, adults aged 18+ years (%)	46	36	55	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	32	21	41	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Kuwait

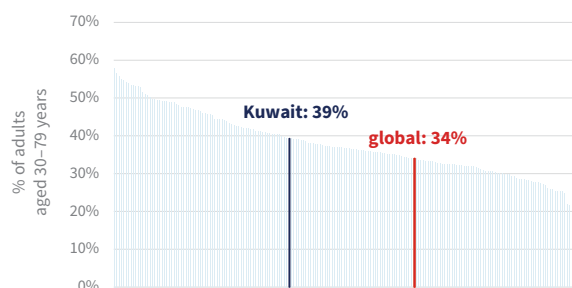
Hypertension profile

Total population (2024): 4 935 000

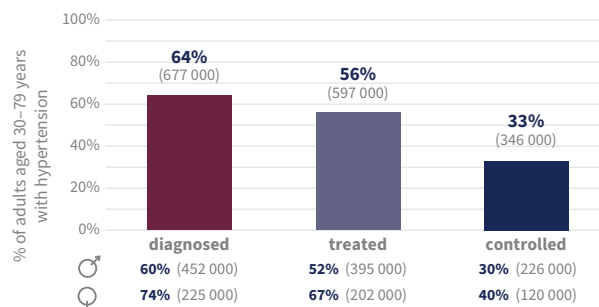
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 39% ♂ 44% ♀ 32%

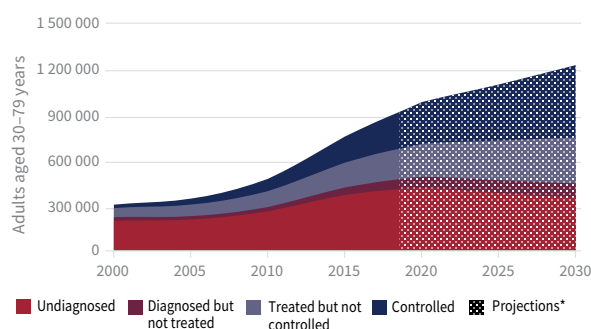
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.1 million adults aged 30–79 years with hypertension, approximately 711 000 do not have the condition controlled^b

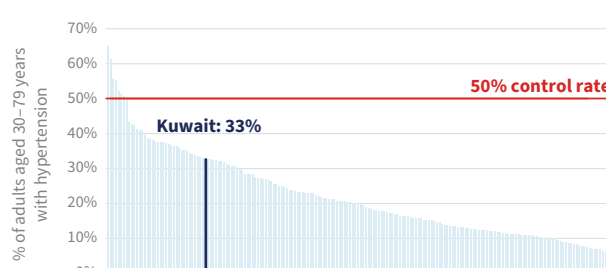


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	11 410	8160	3260	2021
Cardiovascular disease deaths	3370	2880	480	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	53	51	59	2021
Risk of premature death from NCDs (%) ^c	9	12	5	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	9	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	20	38	2	2022
Obesity, adults aged 18+ years (%)	45	42	52	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	63	62	65	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Kyrgyzstan

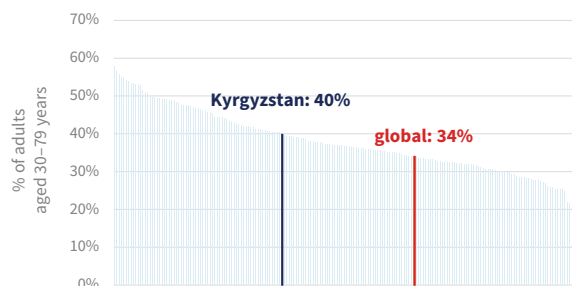
Hypertension profile

Total population (2024): 7 186 000

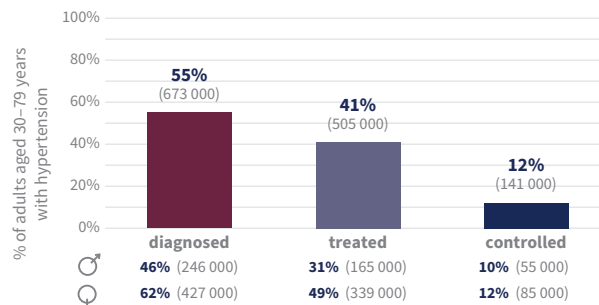
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 40% ♂ 37% ♀ 43%

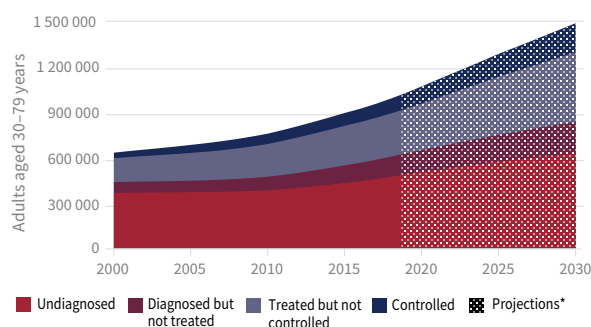
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.2 million adults aged 30–79 years with hypertension, approximately 1.1 million do not have the condition controlled^b

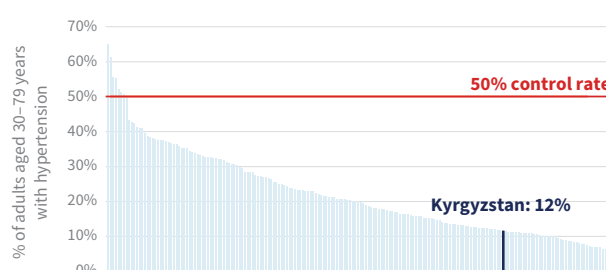


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	38 840	22 660	16 180	2021
Cardiovascular disease deaths	13 350	7440	5910	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	51	57	2021
Risk of premature death from NCDs (%) ^c	19	25	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	7	2021
Current tobacco use, adults aged 15+ years (%)	27	51	3	2022
Obesity, adults aged 18+ years (%)	24	22	27	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	20	17	22	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Lao People's Democratic Republic

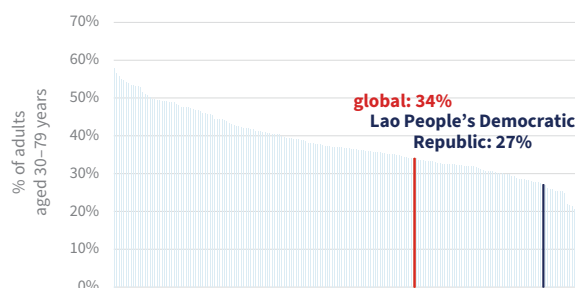
Hypertension profile

Total population (2024): 7 770 000

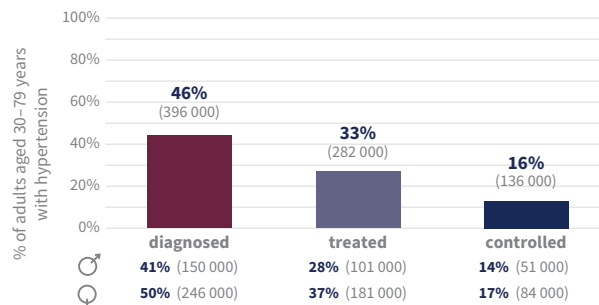
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 27% ♀ 30%

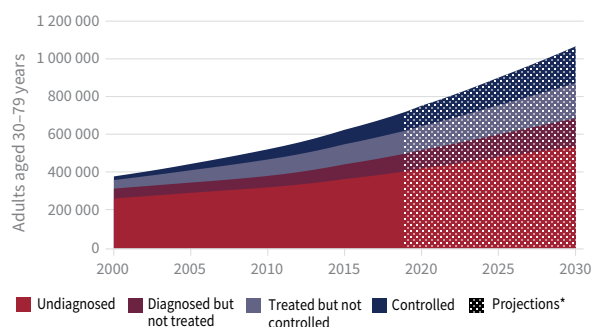
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 858 000 adults aged 30–79 years with hypertension, approximately 723 000 do not have the condition controlled^b

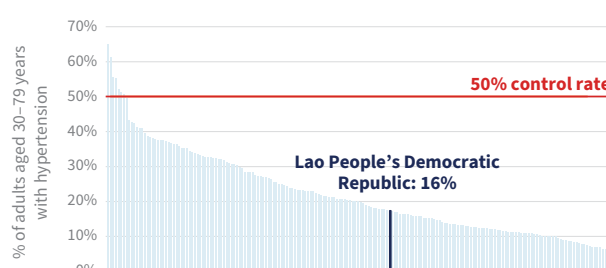


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	47 500	26 150	21 350	2021
Cardiovascular disease deaths	14 030	7240	6790	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	55	56	55	2021
Risk of premature death from NCDs (%) ^c	27	30	23	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	10	2021
Current tobacco use, adults aged 15+ years (%)	27	45	9	2022
Obesity, adults aged 18+ years (%)	8	6	10	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	16	9	22	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Latvia

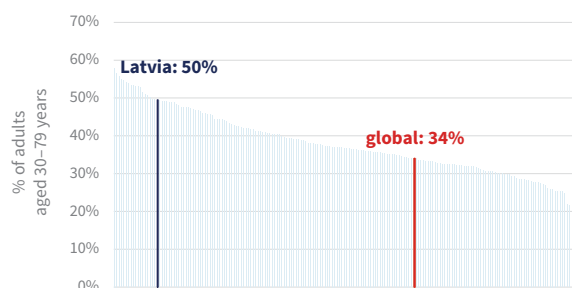
Hypertension profile

Total population (2024): 1 872 000

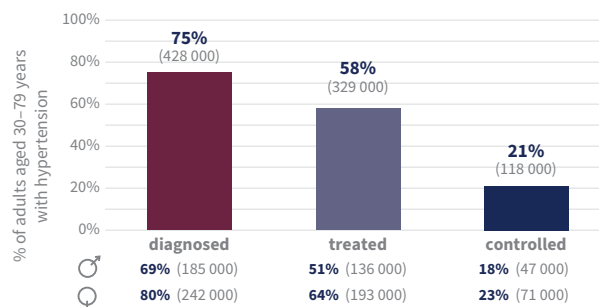
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 50% ♀ 51% ♀ 48%

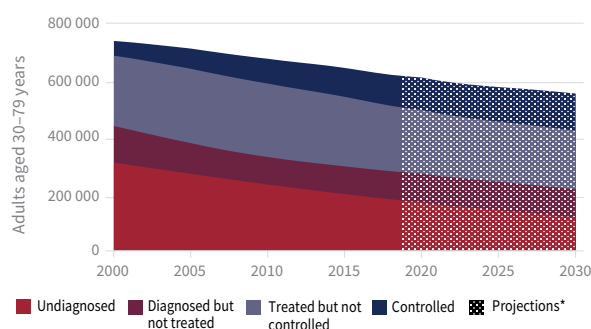
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 572 000 adults aged 30–79 years with hypertension, approximately 453 000 do not have the condition controlled^b

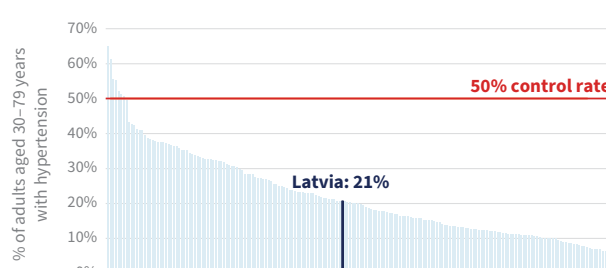


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	34 390	16 050	18 340	2021
Cardiovascular disease deaths	17 310	7240	10 060	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	58	54	61	2021
Risk of premature death from NCDs (%) ^c	23	33	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	10	6	2021
Current tobacco use, adults aged 15+ years (%)	34	47	21	2022
Obesity, adults aged 18+ years (%)	30	28	32	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	15	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	14	15	14	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Lebanon

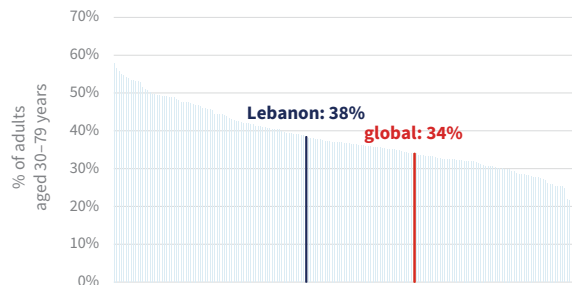
Hypertension profile

Total population (2024): 5 806 000

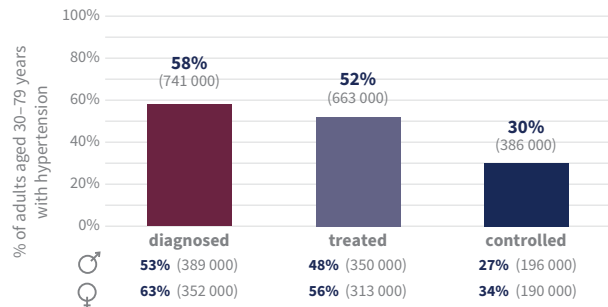
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 38% ♂ 43% ♀ 33%

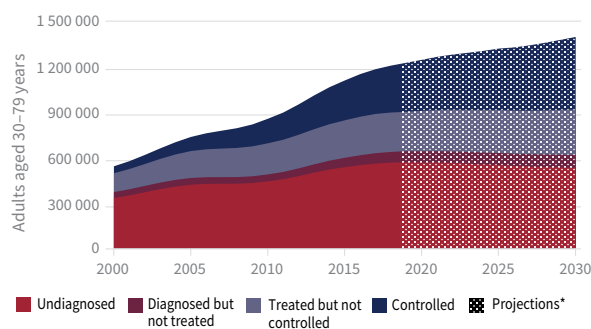
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.3 million adults aged 30–79 years with hypertension, approximately 901 000 do not have the condition controlled^b

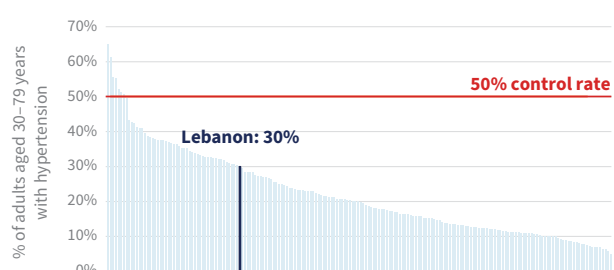


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	43 890	24 220	19 670	2021
Cardiovascular disease deaths	8610	4690	3920	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	51	53	49	2021
Risk of premature death from NCDs (%) ^c	12	15	9	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%) ^d	34	43	26	2022
Obesity, adults aged 18+ years (%)	31	29	33	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	59	58	59	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Lesotho

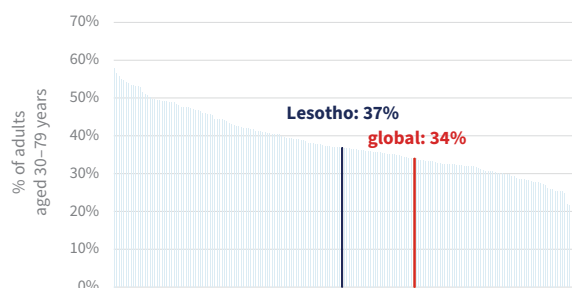
Hypertension profile

Total population (2024): 2 337 000

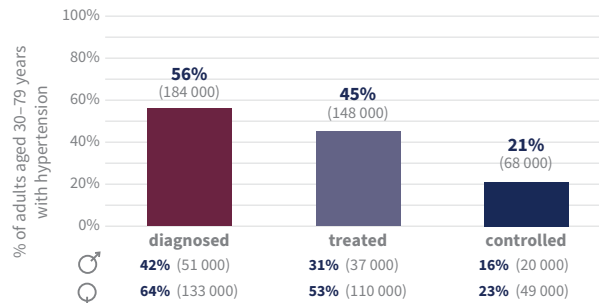
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 37% ♀ 45%

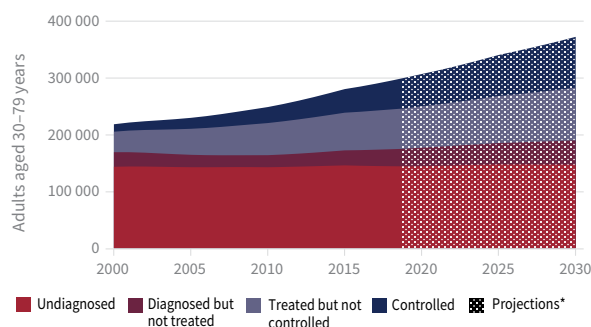
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 329 000 adults aged 30–79 years with hypertension, approximately 261 000 do not have the condition controlled^b

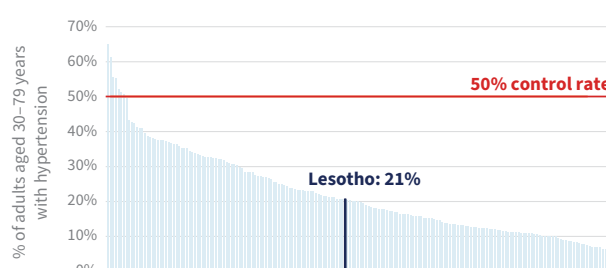


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	33 440	17 290	16 150	2021
Cardiovascular disease deaths	4810	1890	2920	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	54	63	2021
Risk of premature death from NCDs (%) ^c	36	40	34	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	24	44	5	2022
Obesity, adults aged 18+ years (%)	19	7	31	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	8	9	7	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Liberia

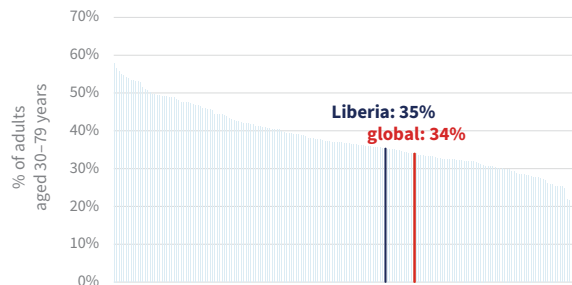
Hypertension profile

Total population (2024): 5 613 000

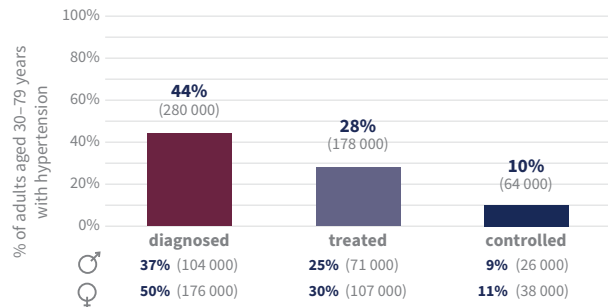
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 35% ♂ 32% ♀ 39%

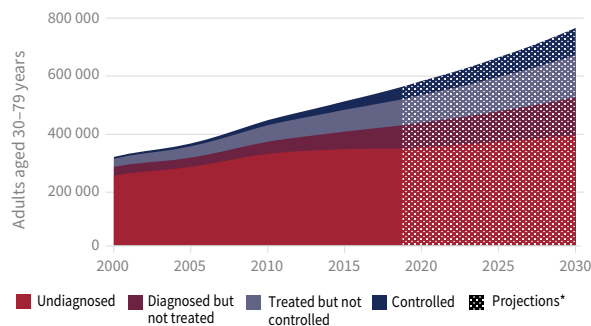
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 635 000 adults aged 30–79 years with hypertension, approximately 571 000 do not have the condition controlled^b

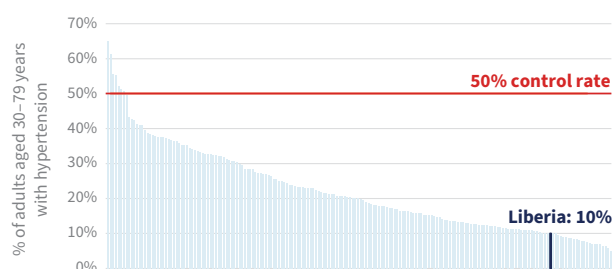


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	39 370	20 110	19 250	2021
Cardiovascular disease deaths	5810	2530	3280	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	58	57	60	2021
Risk of premature death from NCDs (%) ^c	22	20	23	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	8	15	2	2022
Obesity, adults aged 18+ years (%)	16	12	20	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	15	14	16	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Libya

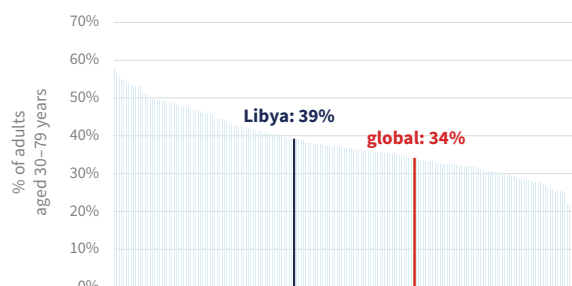
Hypertension profile

Total population (2024): 7 381 000

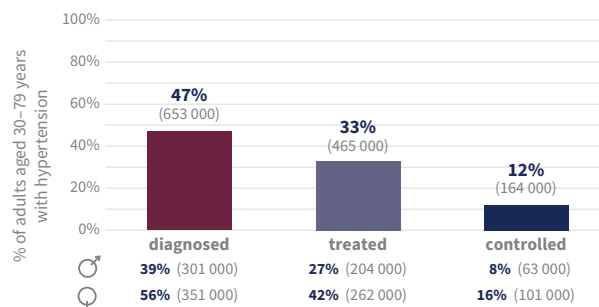
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 39% ♂ 43% ♀ 35%

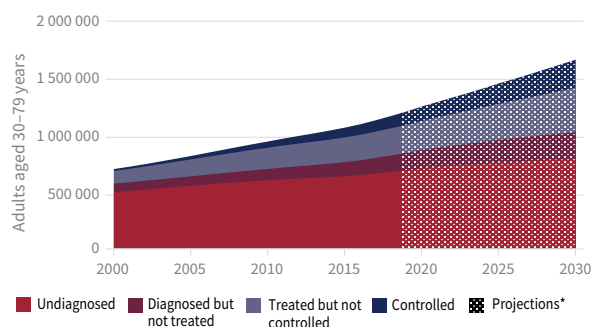
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.4 million adults aged 30–79 years with hypertension, approximately 1.2 million do not have the condition controlled^b

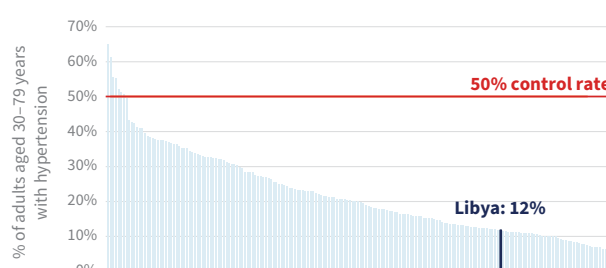


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	40 690	22 520	18 170	2021
Cardiovascular disease deaths	12 480	6330	6150	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	58	60	2021
Risk of premature death from NCDs (%) ^c	20	21	18	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	36	27	45	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	46	37	54	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Lithuania

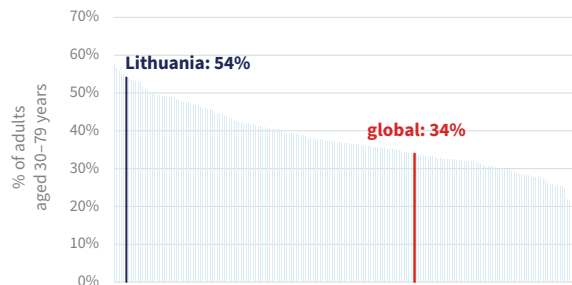
Hypertension profile

Total population (2024): 2 859 000

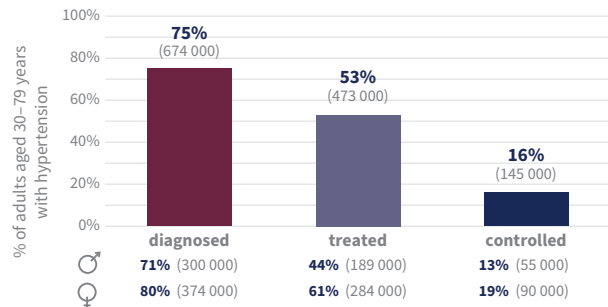
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 54% ♀ 56% 52%

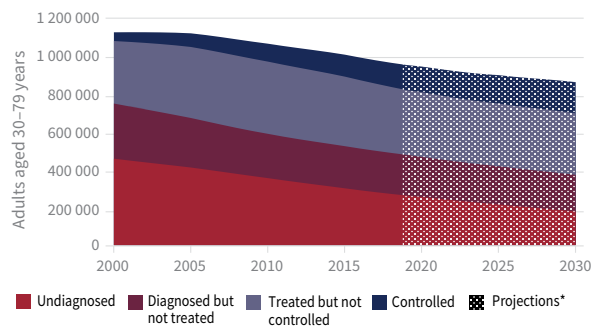
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 892 000 adults aged 30–79 years with hypertension, approximately 748 000 do not have the condition controlled^b

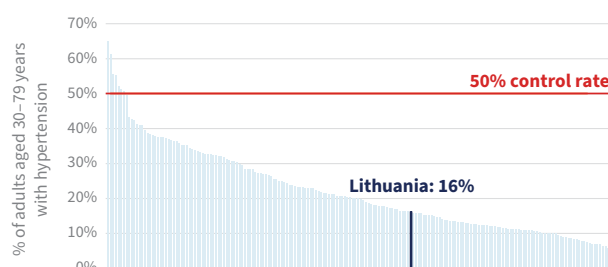


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	48 020	22 540	25 480	2021
Cardiovascular disease deaths	23 880	9880	13 990	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	57	60	2021
Risk of premature death from NCDs (%) ^c	20	29	12	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	31	41	22	2022
Obesity, adults aged 18+ years (%)	31	30	32	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	12	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	20	21	20	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Luxembourg

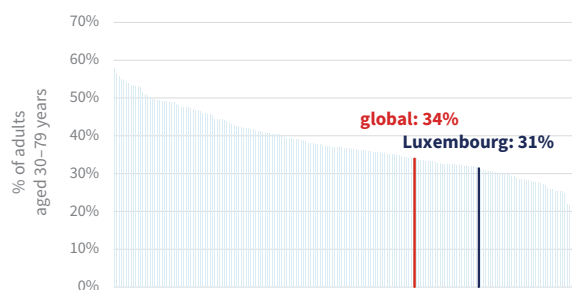
Hypertension profile

Total population (2024): 673 000

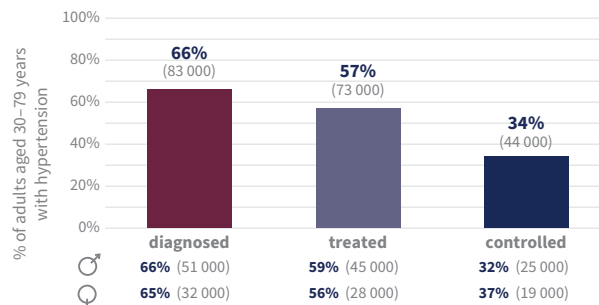
Prevalence of hypertension among adults aged 30–79 years (2024)^a

31% 37% 25%

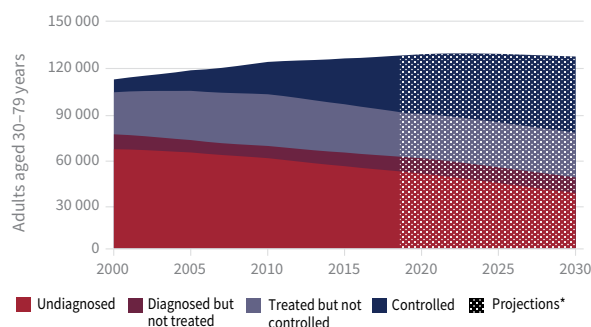
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 127 000 adults aged 30–79 years with hypertension, approximately 83 000 do not have the condition controlled^b

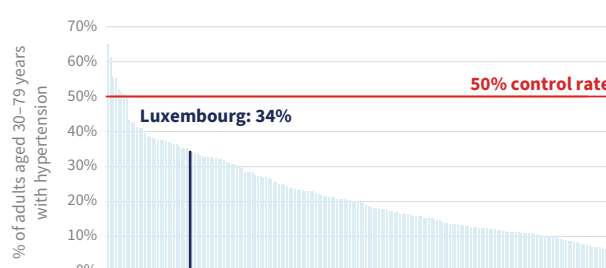


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	4340	2210	2120	2021
Cardiovascular disease deaths	1060	530	530	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	47	48	45	2021
Risk of premature death from NCDs (%) ^c	8	10	6	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	10	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	23	24	22	2022
Obesity, adults aged 18+ years (%)	20	22	18	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	14	14	14	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Madagascar

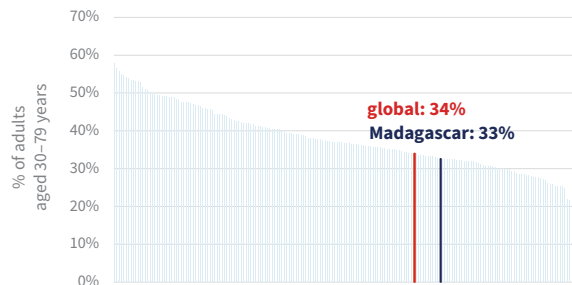
Hypertension profile

Total population (2024): 31 960 000

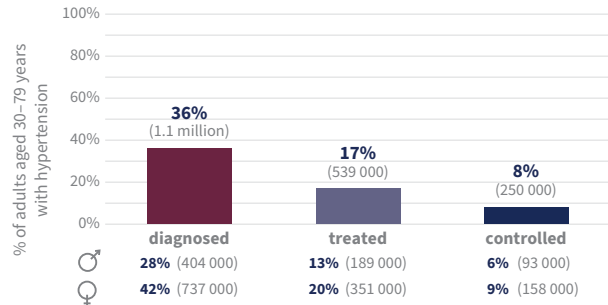
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 33% ♀ 30% 35%

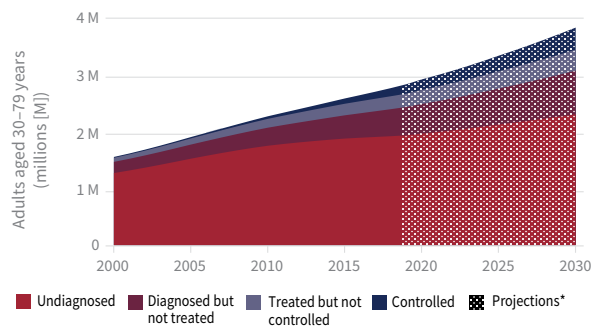
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 3.2 million adults aged 30–79 years with hypertension, approximately 3 million do not have the condition controlled^b

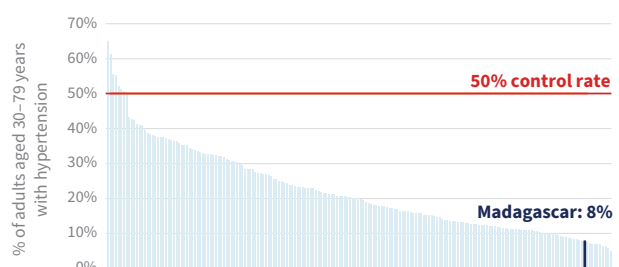


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	229 300	118 900	110 400	2021
Cardiovascular disease deaths	44 670	21 730	22 950	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	50	62	2021
Risk of premature death from NCDs (%) ^c	26	26	26	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	27	43	11	2022
Obesity, adults aged 18+ years (%)	4	4	4	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	14	13	15	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Malawi

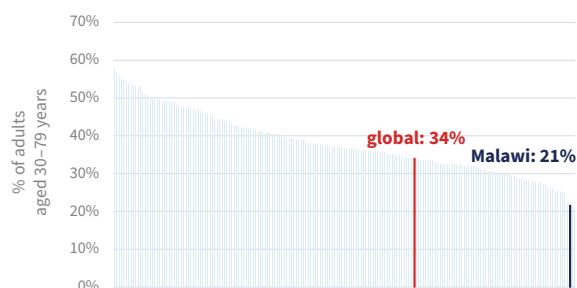
Hypertension profile

Total population (2024): 21 660 000

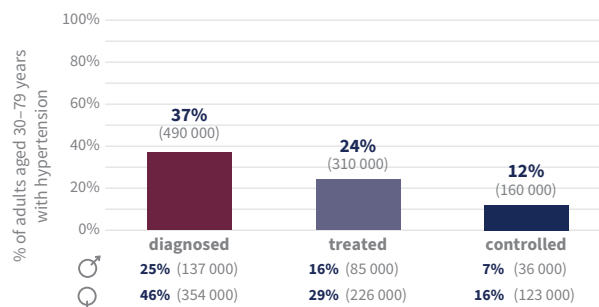
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 21% ♂ 19% ♀ 24%

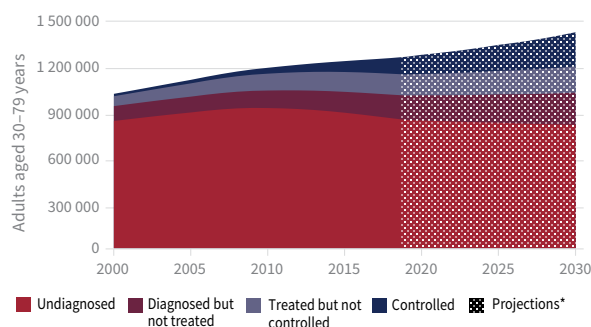
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.3 million adults aged 30–79 years with hypertension, approximately 1.2 million do not have the condition controlled^b

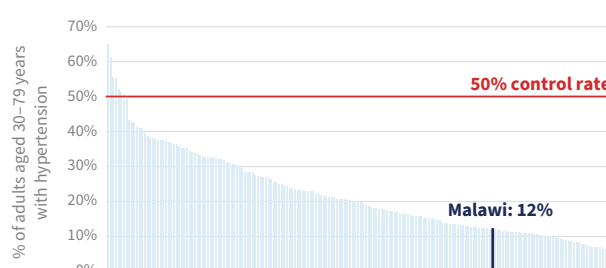


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	142 400	75 560	66 880	2021
Cardiovascular disease deaths	19 870	9670	10 200	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	60	56	65	2021
Risk of premature death from NCDs (%) ^c	25	27	23	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	10	16	3	2022
Obesity, adults aged 18+ years (%)	6	2	10	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	3	2	3	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Malaysia

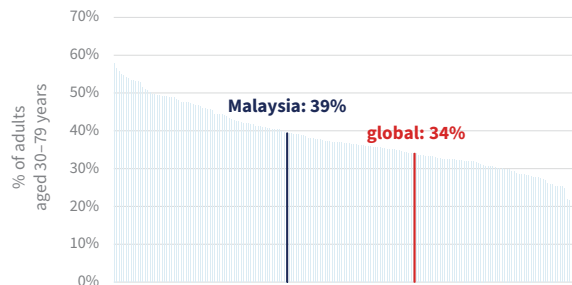
Hypertension profile

Total population (2024): 35 560 000

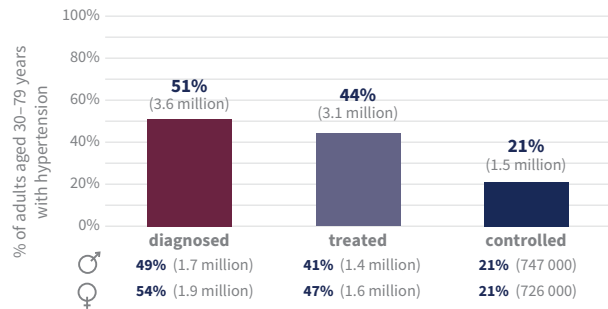
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 39% ♀ 40%

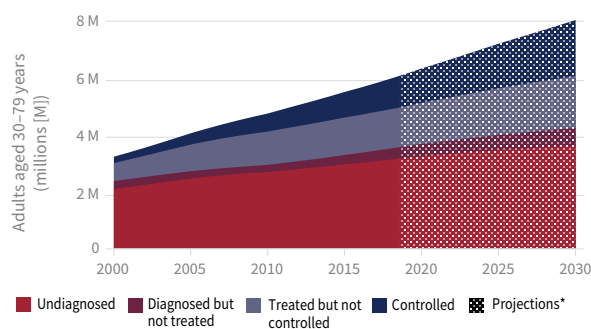
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 6.9 million adults aged 30–79 years with hypertension, approximately 5.5 million do not have the condition controlled^b

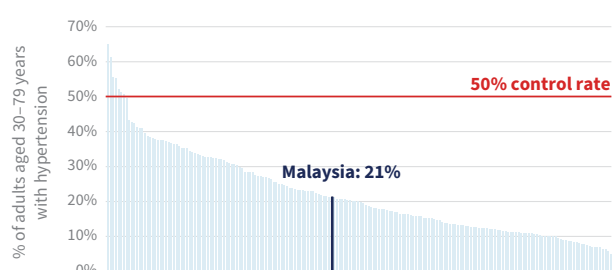


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	235 400	132 800	102 600	2021
Cardiovascular disease deaths	73 370	40 650	32 720	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	62	61	64	2021
Risk of premature death from NCDs (%) ^c	20	24	16	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	10	2021
Current tobacco use, adults aged 15+ years (%)	22	43	1	2022
Obesity, adults aged 18+ years (%)	22	18	27	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	40	37	42	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Maldives

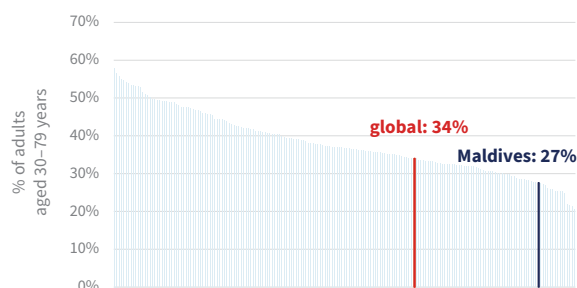
Hypertension profile

Total population (2024): 527 800

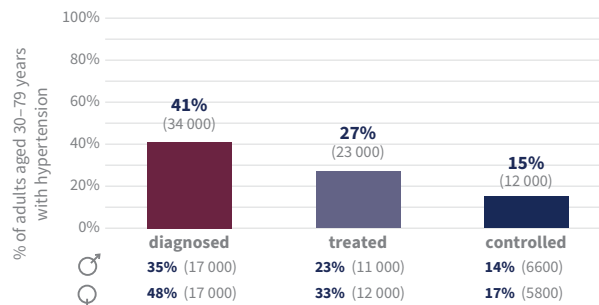
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 27% ♀ 32%

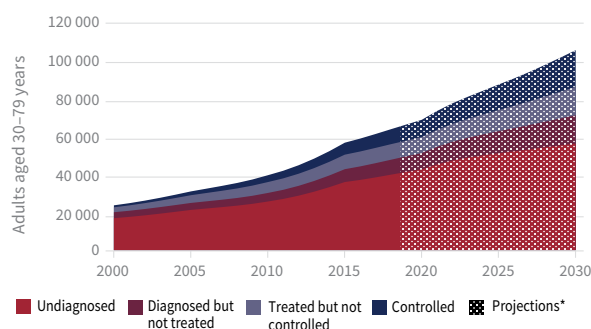
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 83 000 adults aged 30–79 years with hypertension, approximately 71 000 do not have the condition controlled^b

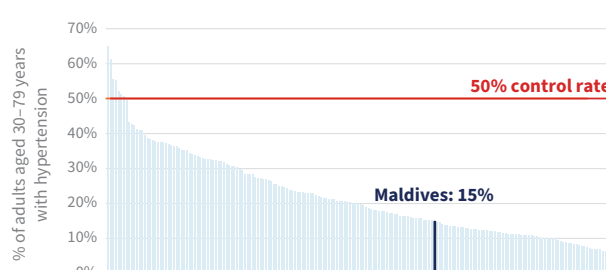


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	2800	1640	1160	2021
Cardiovascular disease deaths	1070	630	440	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	55	54	57	2021
Risk of premature death from NCDs (%) ^c	9	11	7	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	11	11	10	2021
Current tobacco use, adults aged 15+ years (%)	26	42	10	2022
Obesity, adults aged 18+ years (%)	18	13	24	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	25	25	24	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature death from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Mali

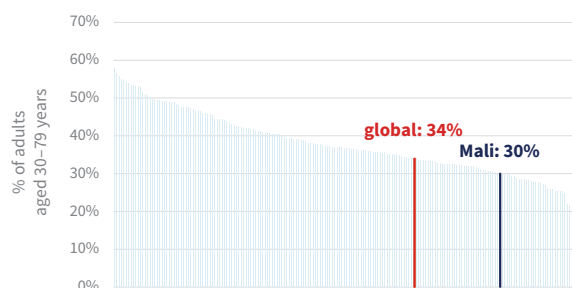
Hypertension profile

Total population (2024): 24 480 000

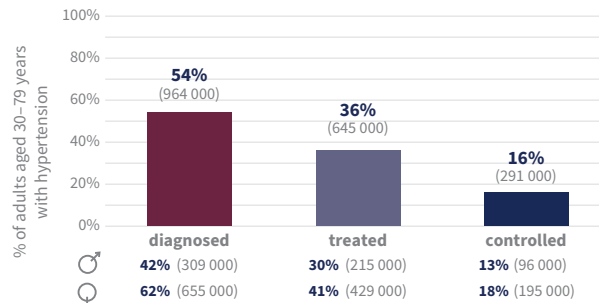
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 30% ♂ 25% ♀ 35%

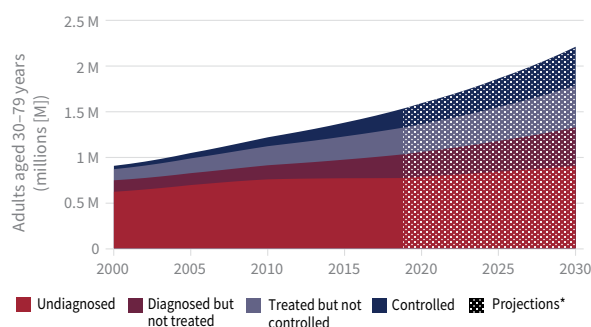
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.8 million adults aged 30–79 years with hypertension, approximately 1.5 million do not have the condition controlled^b

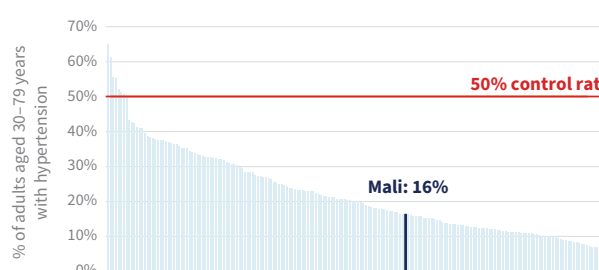


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	182 200	93 460	88 760	2021
Cardiovascular disease deaths	16 380	6520	9850	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	53	48	56	2021
Risk of premature death from NCDs (%) ^c	23	20	25	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	8	15	1	2022
Obesity, adults aged 18+ years (%)	10	9	11	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	30	26	34	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Malta

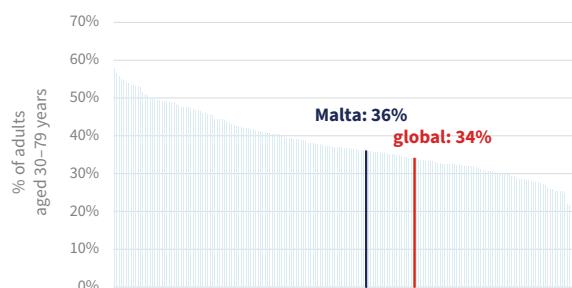
Hypertension profile

Total population (2024): 539 600

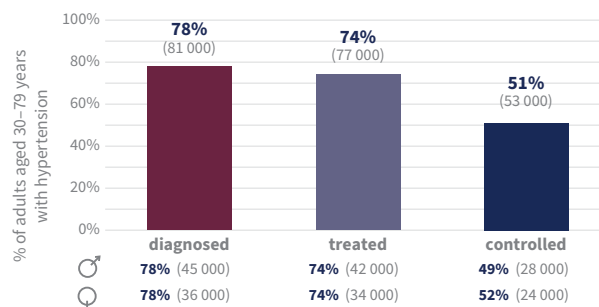
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 36% ♂ 39% ♀ 32%

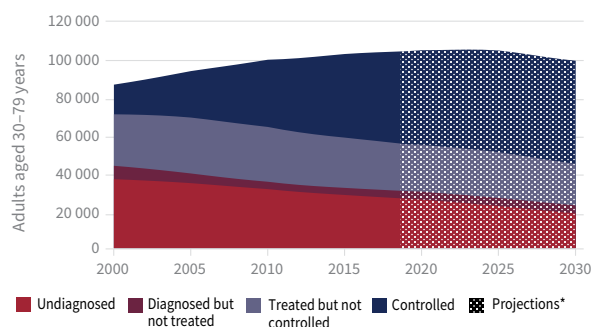
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 104 000 adults aged 30–79 years with hypertension, approximately 51 000 do not have the condition controlled^b

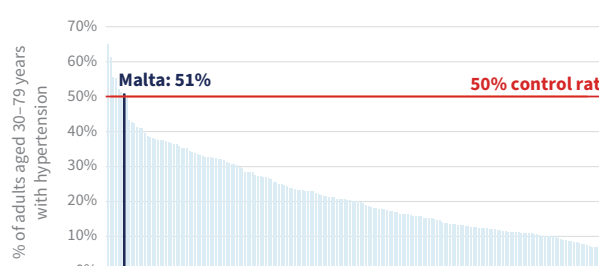


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	4210	2160	2050	2021
Cardiovascular disease deaths	1240	600	640	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	50	50	51	2021
Risk of premature death from NCDs (%) ^c	10	12	8	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	9	2021
Current tobacco use, adults aged 15+ years (%) ^d	25	26	23	2022
Obesity, adults aged 18+ years (%)	35	37	32	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	41	38	44	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Marshall Islands

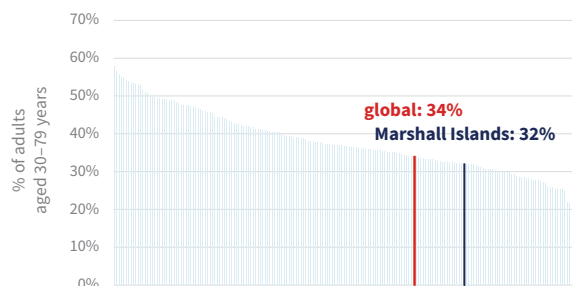
Hypertension profile

Total population (2024): 37 550

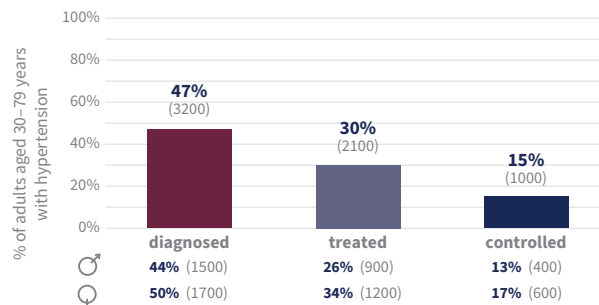
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 32% ♂ 31% ♀ 33%

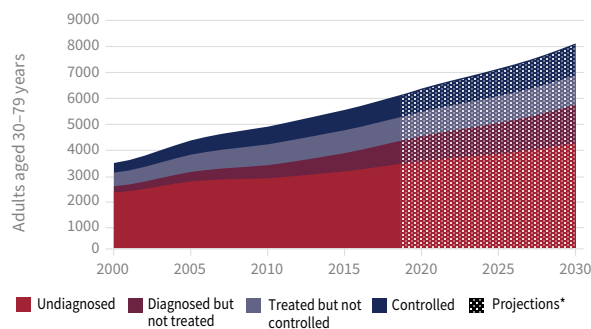
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 6800 adults aged 30–79 years with hypertension, approximately 5800 do not have the condition controlled^b

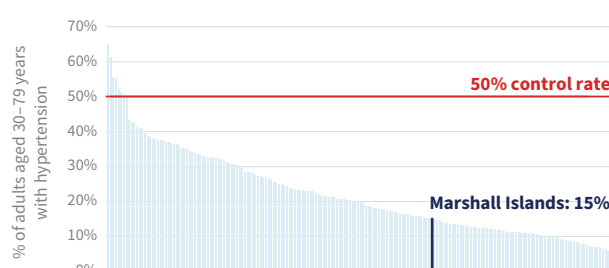


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	no data	no data	no data	2021
Cardiovascular disease deaths	no data	no data	no data	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	44	44	44	2021
Risk of premature death from NCDs (%) ^c	no data	no data	no data	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%)	30	51	9	2022
Obesity, adults aged 18+ years (%)	47	38	56	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	no data	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	24	17	32	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No response

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Mauritania

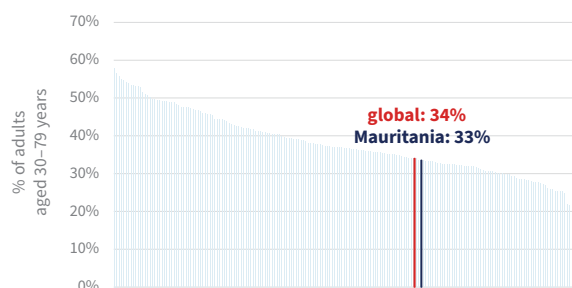
Hypertension profile

Total population (2024): 5 169 000

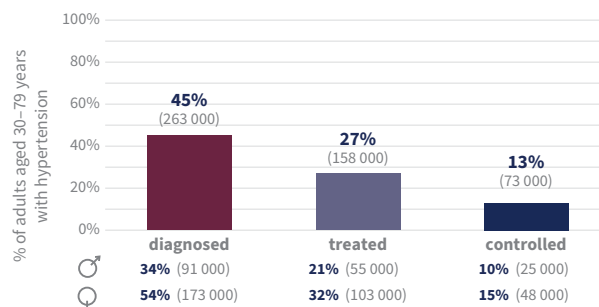
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 33% ♂ 30% ♀ 36%

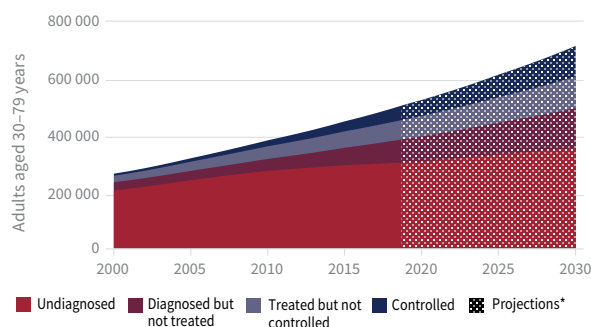
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 584 000 adults aged 30–79 years with hypertension, approximately 511 000 do not have the condition controlled^b

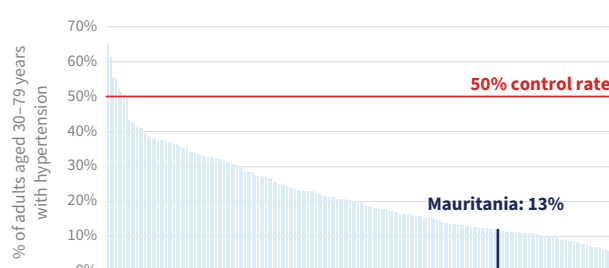


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	25 750	12 750	13 000	2021
Cardiovascular disease deaths	4990	1930	3060	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	55	62	2021
Risk of premature death from NCDs (%) ^c	19	16	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	10	17	2	2022
Obesity, adults aged 18+ years (%)	21	8	33	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	39	30	46	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP $\geq$ 140 mmHg or DBP $\geq$ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 y

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Mauritius

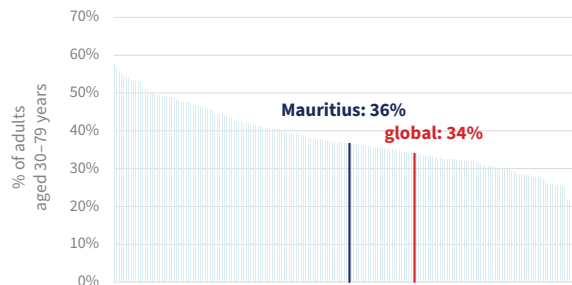
Hypertension profile

Total population (2024): 1 271 000

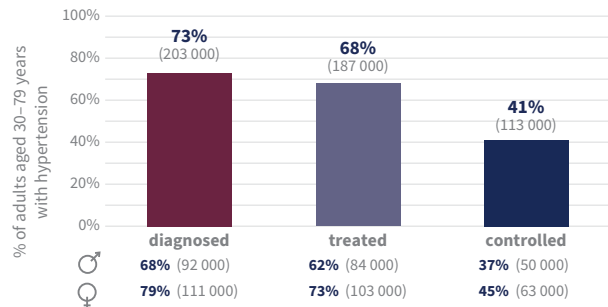
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 36% ♀ 36%

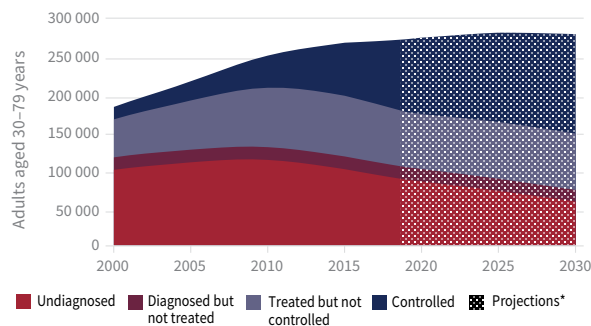
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 276 000 adults aged 30–79 years with hypertension, approximately 163 000 do not have the condition controlled^b

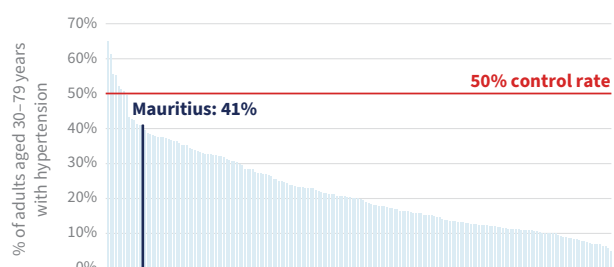


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	12 050	6910	5140	2021
Cardiovascular disease deaths	3990	2240	1750	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	56	63	2021
Risk of premature death from NCDs (%) ^c	22	27	16	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	21	39	3	2022
Obesity, adults aged 18+ years (%)	19	13	26	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	8	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	30	25	35	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Mexico

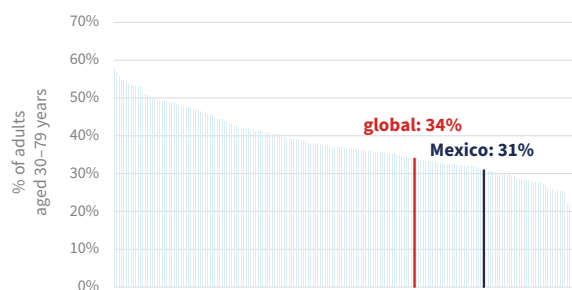
Hypertension profile

Total population (2024): 130 900 000

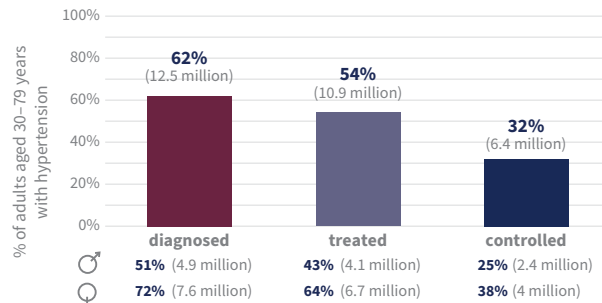
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 31% ♀ 30%

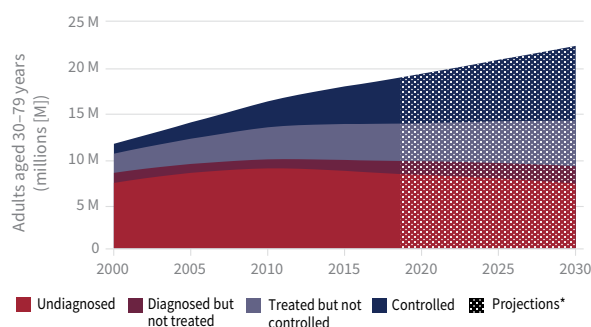
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 20.2 million adults aged 30–79 years with hypertension, approximately 13.8 million do not have the condition controlled^b

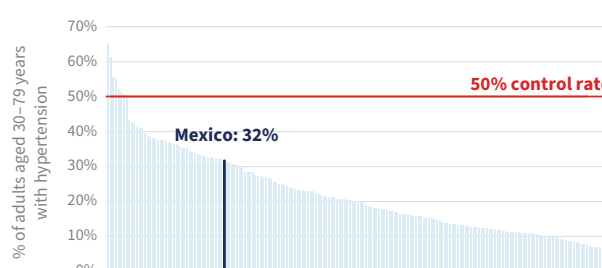


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	1 036 000	602 400	433 500	2021
Cardiovascular disease deaths	200 300	109 400	90 870	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	50	49	52	2021
Risk of premature death from NCDs (%) ^c	16	19	14	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	9	8	2021
Current tobacco use, adults aged 15+ years (%)	15	23	7	2022
Obesity, adults aged 18+ years (%)	36	32	40	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	28	25	31	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Micronesia (Federated States of)

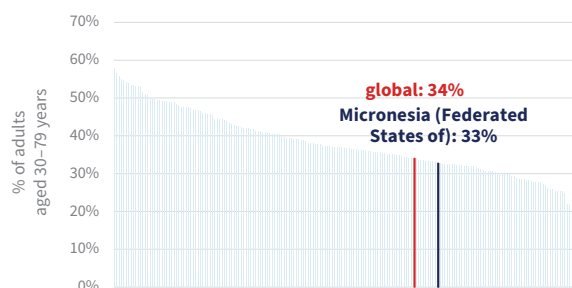
Hypertension profile

Total population (2024): 113 200

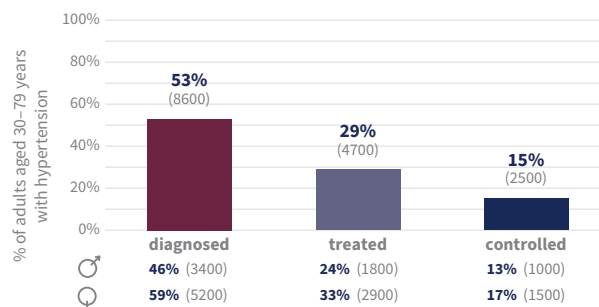
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 33% ♂ 30% ♀ 35%

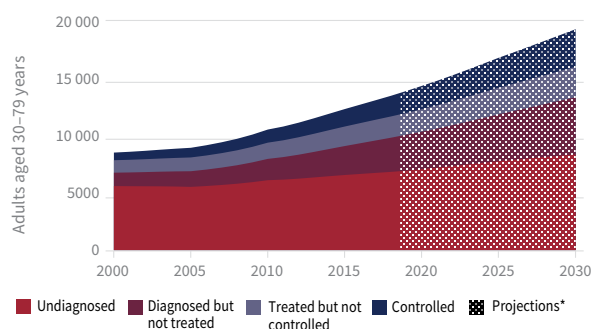
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 16 000 adults aged 30–79 years with hypertension, approximately 14 000 do not have the condition controlled^b

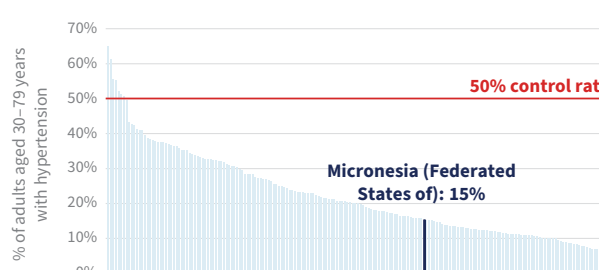


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	910	490	420	2021
Cardiovascular disease deaths	350	190	160	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	43	44	43	2021
Risk of premature death from NCDs (%) ^c	41	46	35	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	46	37	54	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	29	23	36	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Monaco

Hypertension profile

Total population (2024): 38 630

Prevalence of hypertension among adults aged 30–79 years (2024)^a

no data no data no data

Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a

Data not available

Of the no data adults aged 30–79 years with hypertension, approximately no data do not have the condition controlled^b

Data not available

Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)

Data not available

Hypertension control rates – country comparison (both sexes)^b

Data not available

Mortality

	both sexes	males	females	year
Total deaths	no data	no data	no data	2021
Cardiovascular disease deaths	no data	no data	no data	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	49	47	50	2021
Risk of premature death from NCDs (%) ^c	no data	no data	no data	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	10	7	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	no data	no data	no data	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	no data	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	no data	no data	no data	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Mongolia

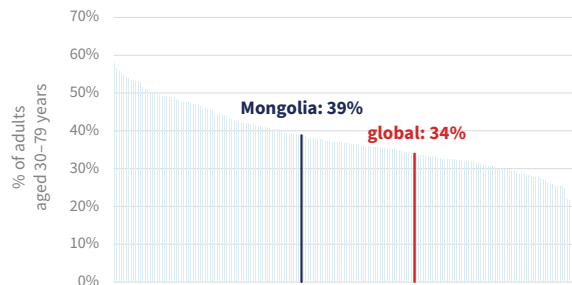
Hypertension profile

Total population (2024): 3 476 000

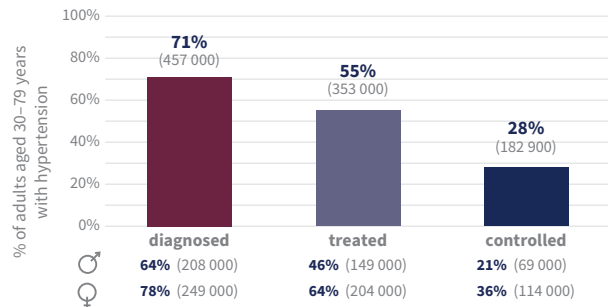
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 39% ♂ 41% ♀ 37%

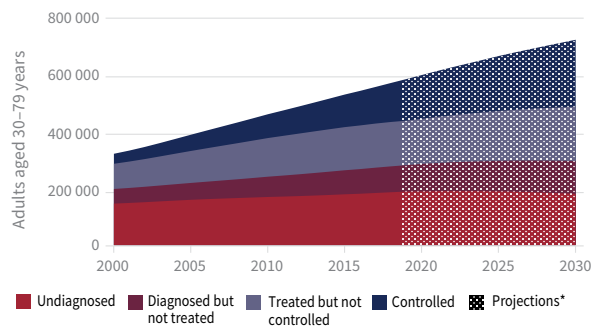
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 645 000 adults aged 30–79 years with hypertension, approximately 462 000 do not have the condition controlled^b

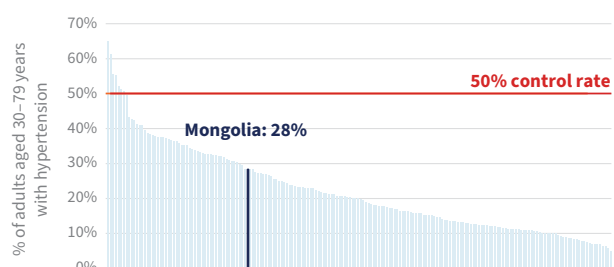


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	21 890	12 390	9500	2021
Cardiovascular disease deaths	7270	3780	3490	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	56	57	2021
Risk of premature death from NCDs (%) ^c	26	34	20	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	7	2021
Current tobacco use, adults aged 15+ years (%)	30	52	7	2022
Obesity, adults aged 18+ years (%)	24	21	26	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	8	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	27	26	29	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Montenegro

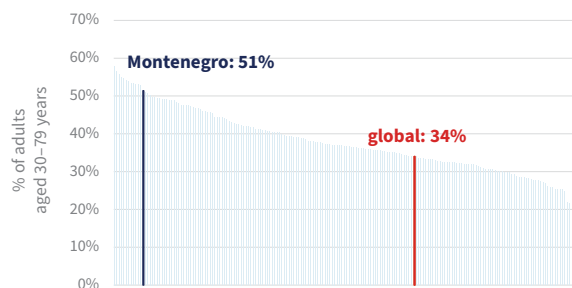
Hypertension profile

Total population (2024): 638 500

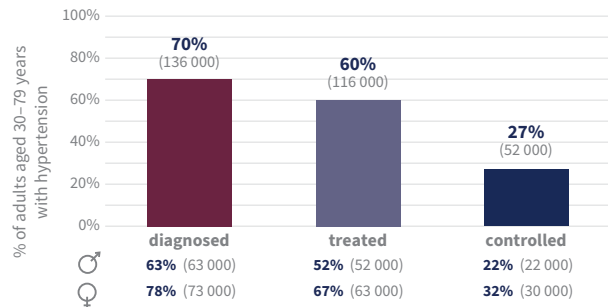
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 51% ♀ 54% 49%

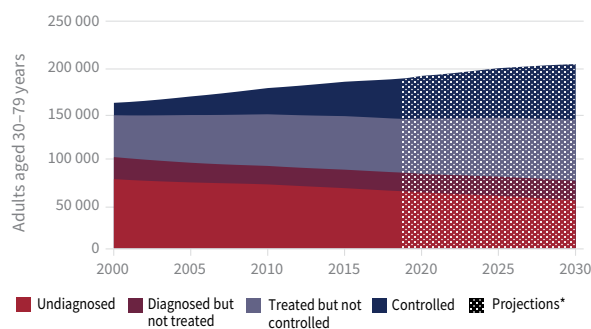
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 194 000 adults aged 30–79 years with hypertension, approximately 142 000 do not have the condition controlled^b

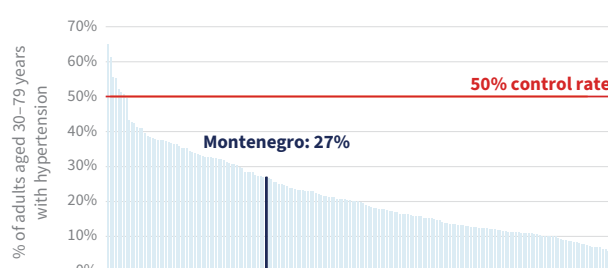


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	8660	4280	4380	2021
Cardiovascular disease deaths	3380	1300	2070	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	55	58	2021
Risk of premature death from NCDs (%) ^c	18	23	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	13	15	10	2021
Current tobacco use, adults aged 15+ years (%)	32	31	33	2022
Obesity, adults aged 18+ years (%)	21	23	20	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	8	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	23	22	24	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Morocco

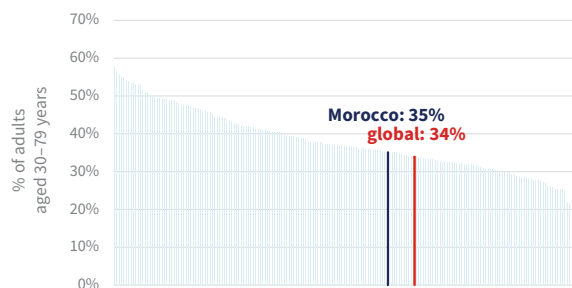
Hypertension profile

Total population (2024): 38 080 000

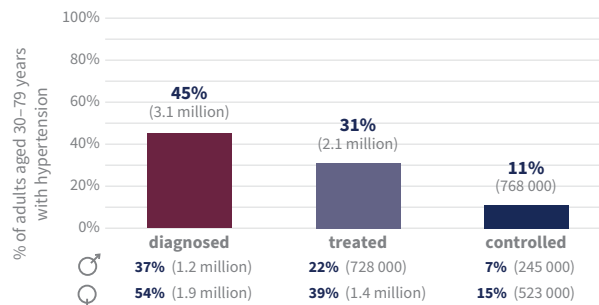
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 35% ♀ 35%

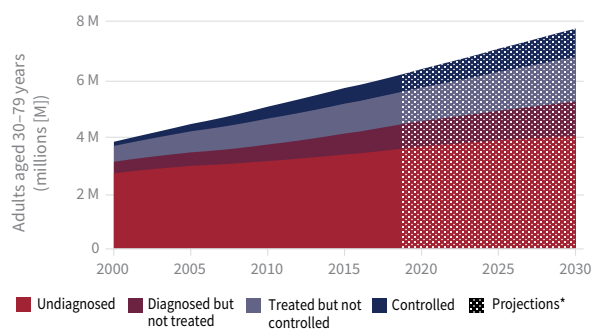
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 6.8 million adults aged 30–79 years with hypertension, approximately 6 million do not have the condition controlled^b

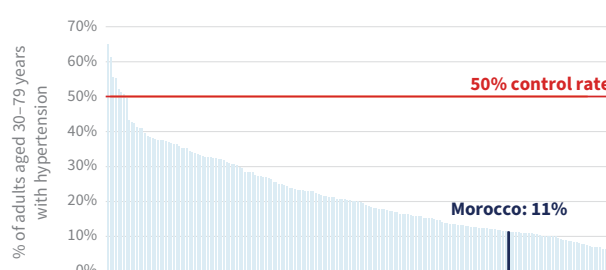


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	252 200	129 100	123 100	2021
Cardiovascular disease deaths	110 500	50 510	60 000	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	62	58	65	2021
Risk of premature death from NCDs (%) ^c	22	23	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%) ^d	13	25	1	2022
Obesity, adults aged 18+ years (%)	22	13	31	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	25	20	29	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Mozambique

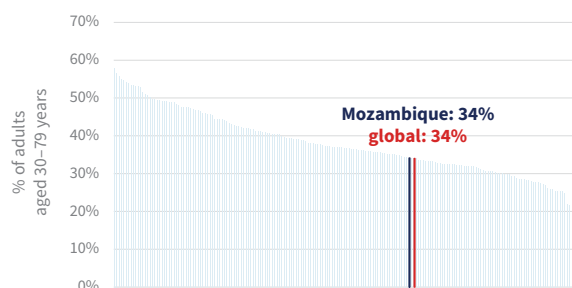
Hypertension profile

Total population (2024): 34 630 000

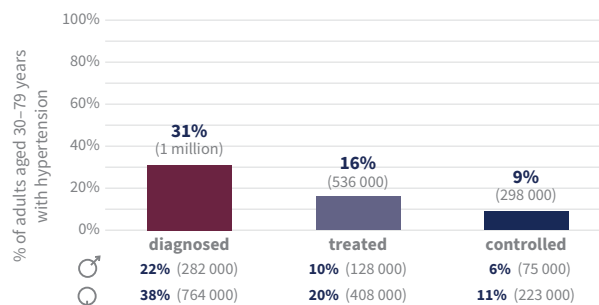
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 34% ♀ 29% ♀ 38%

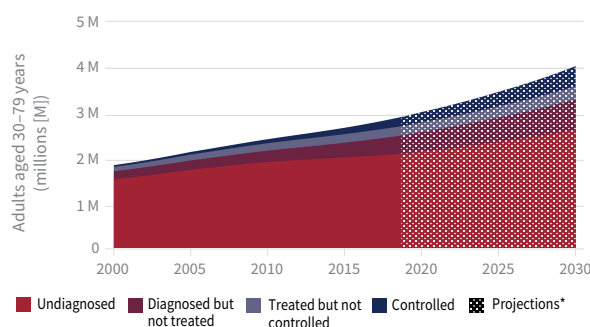
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 3.3 million adults aged 30–79 years with hypertension, approximately 3 million do not have the condition controlled^b

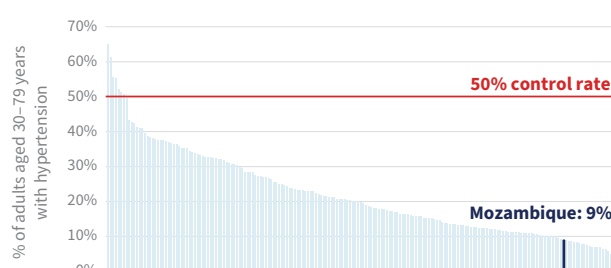


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	296 400	154 400	142 000	2021
Cardiovascular disease deaths	37 950	18 450	19 490	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	64	61	67	2021
Risk of premature death from NCDs (%) ^c	27	34	22	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	9	5	12	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	10	8	11	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Myanmar

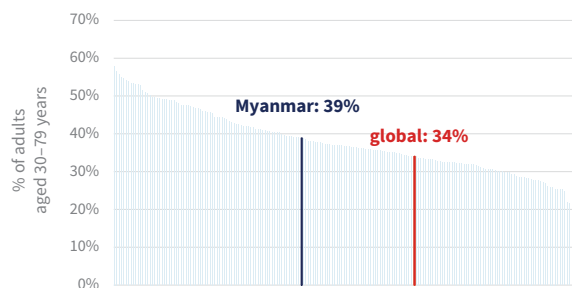
Hypertension profile

Total population (2024): 54 500 000

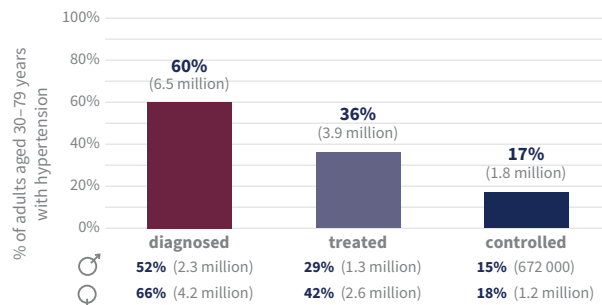
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 39% ♂ 35% ♀ 43%

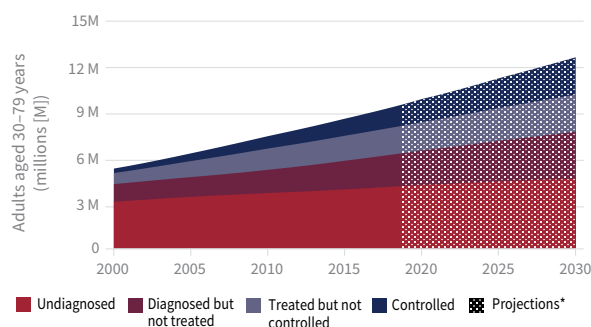
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 10.8 million adults aged 30–79 years with hypertension, approximately 8.9 million do not have the condition controlled^b

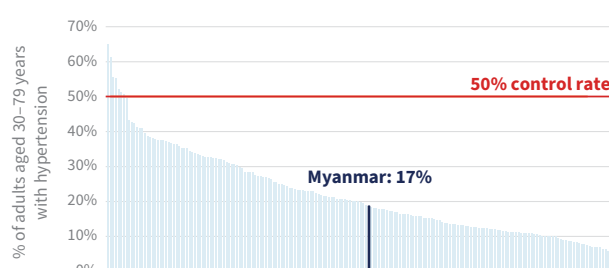


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	449 600	253 900	195 700	2021
Cardiovascular disease deaths	117 000	58 500	58 480	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	58	58	58	2021
Risk of premature death from NCDs (%) ^c	24	28	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	10	2021
Current tobacco use, adults aged 15+ years (%)	44	70	19	2022
Obesity, adults aged 18+ years (%)	8	5	10	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	22	20	24	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Namibia

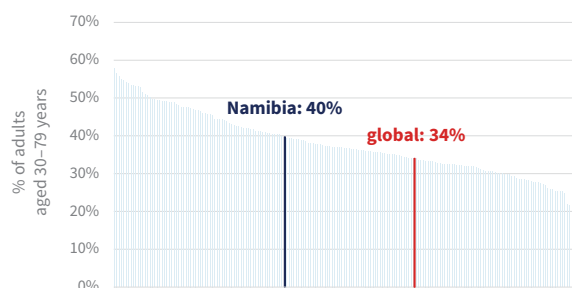
Hypertension profile

Total population (2024): 3 030 000

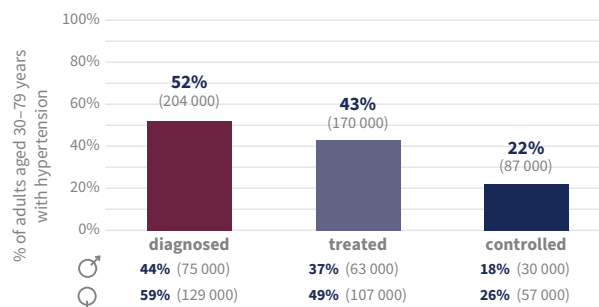
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 40% ♀ 42%

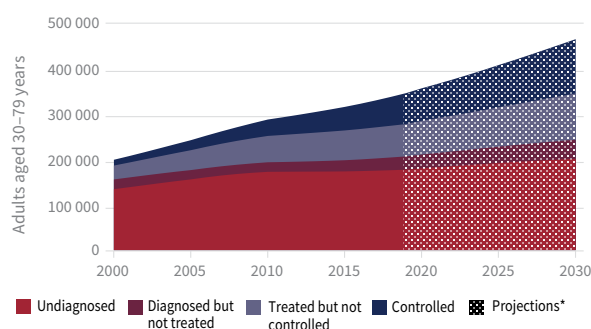
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 391 000 adults aged 30–79 years with hypertension, approximately 304 000 do not have the condition controlled^b

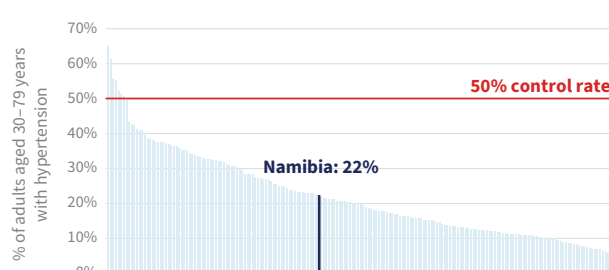


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	27 310	14 490	12 820	2021
Cardiovascular disease deaths	3020	1200	1820	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	58	56	60	2021
Risk of premature death from NCDs (%) ^c	23	25	22	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	14	23	5	2022
Obesity, adults aged 18+ years (%)	15	9	21	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	12	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	25	21	29	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Nauru

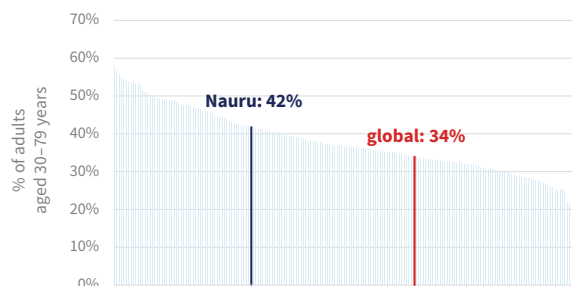
Hypertension profile

Total population (2024): 11 950

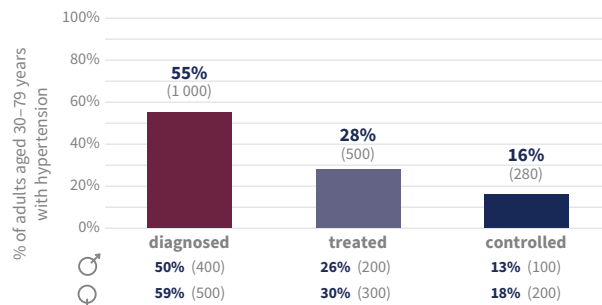
Prevalence of hypertension among adults aged 30–79 years (2024)^a

42% 43% 41%

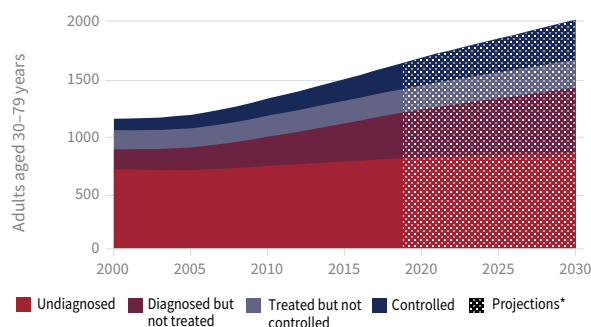
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1800 adults aged 30–79 years with hypertension, approximately 1500 do not have the condition controlled^b

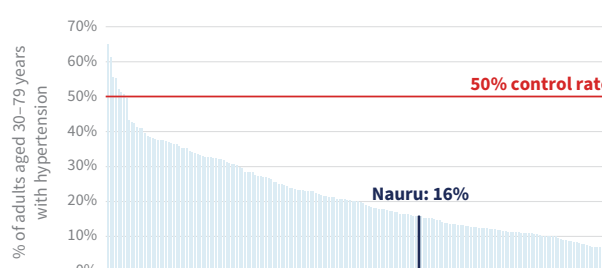


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	no data	no data	no data	2021
Cardiovascular disease deaths	no data	no data	no data	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	56	56	2021
Risk of premature death from NCDs (%) ^c	no data	no data	no data	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%)	48	49	48	2022
Obesity, adults aged 18+ years (%)	70	69	71	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	35	28	43	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Nepal

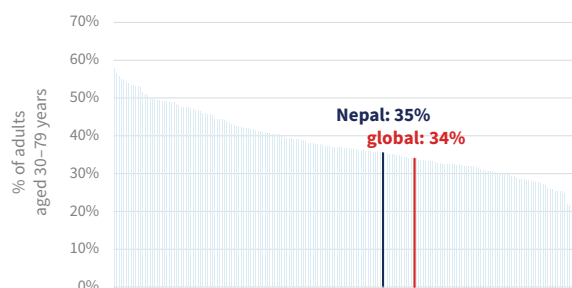
Hypertension profile

Total population (2024): 29 650 000

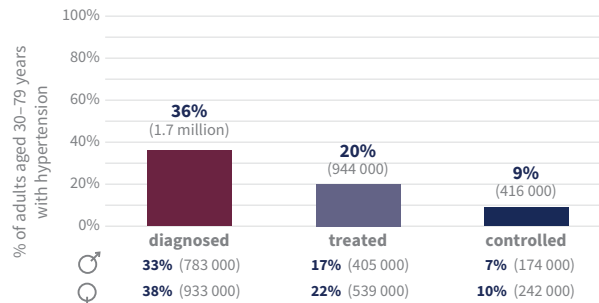
Prevalence of hypertension among adults aged 30–79 years (2024)^a

35% 39% 32%

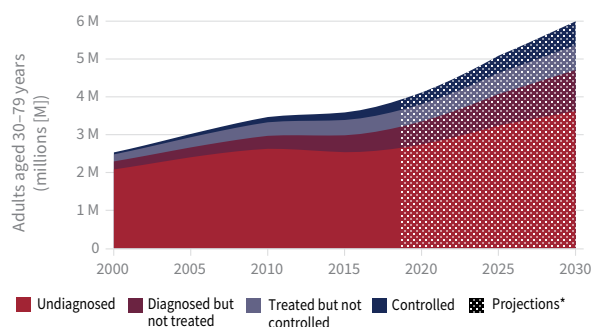
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 4.8 million adults aged 30–79 years with hypertension, approximately 4.4 million do not have the condition controlled^b

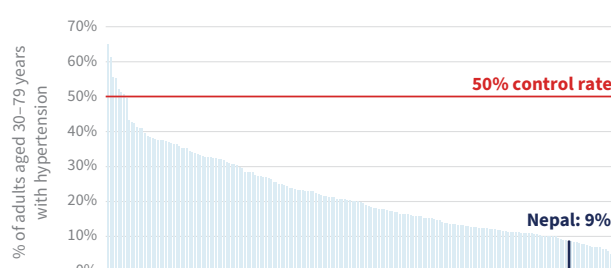


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	198 900	104 500	94 370	2021
Cardiovascular disease deaths	43 340	20 900	22 450	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	40	44	34	2021
Risk of premature death from NCDs (%) ^c	19	20	19	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	9	8	2021
Current tobacco use, adults aged 15+ years (%)	28	46	11	2022
Obesity, adults aged 18+ years (%)	7	5	8	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	8	10	6	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Netherlands (Kingdom of the)

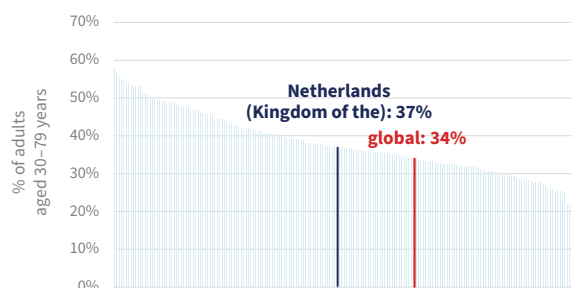
Hypertension profile

Total population (2024): 18 230 000

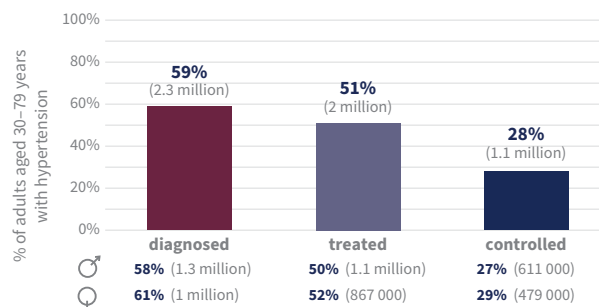
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 37% ♀ 43% 31%

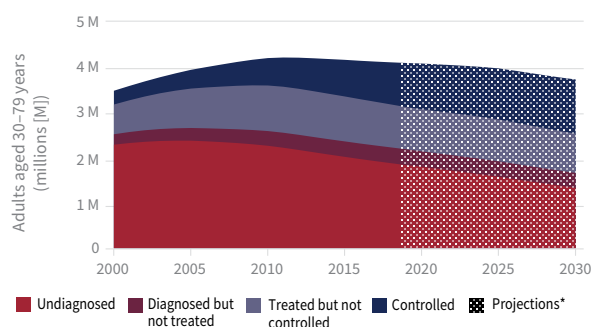
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 3.9 million adults aged 30–79 years with hypertension, approximately 2.8 million do not have the condition controlled^b

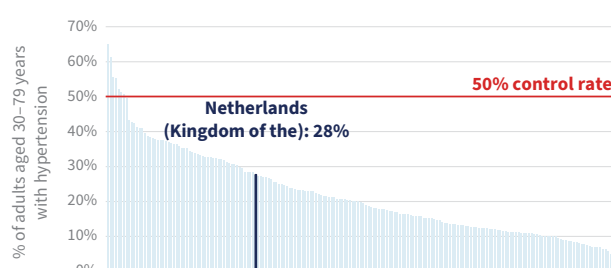


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	171 200	85 530	85 620	2021
Cardiovascular disease deaths	36 450	17 770	18 680	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	43	45	42	2021
Risk of premature death from NCDs (%) ^c	10	11	9	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	10	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	21	24	19	2022
Obesity, adults aged 18+ years (%)	17	17	17	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	9	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	9	8	11	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

New Zealand

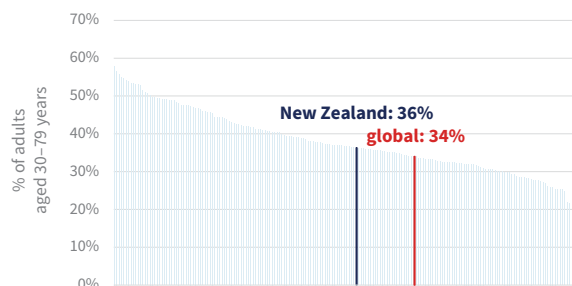
Hypertension profile

Total population (2024): 5 214 000

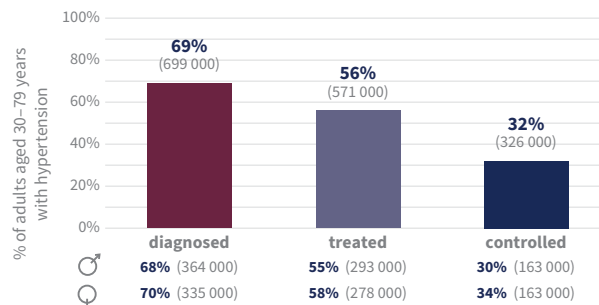
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 36% ♂ 39% ♀ 33%

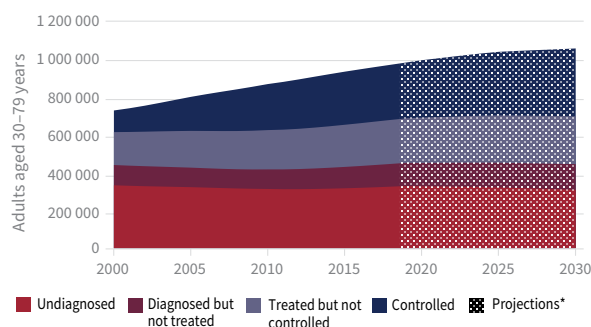
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1 million adults aged 30–79 years with hypertension, approximately 691 000 do not have the condition controlled^b

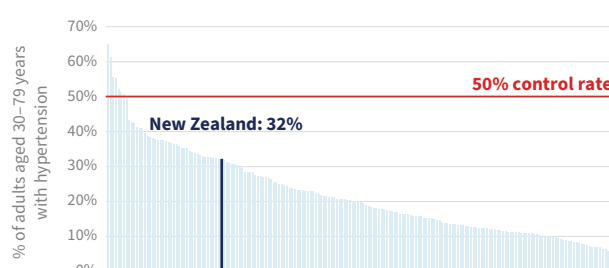


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	34 600	18 360	16 240	2021
Cardiovascular disease deaths	9670	5230	4440	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	43	43	43	2021
Risk of premature death from NCDs (%) ^c	10	12	8	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	9	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	12	13	11	2022
Obesity, adults aged 18+ years (%)	34	33	35	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	9	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	19	18	20	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Nicaragua

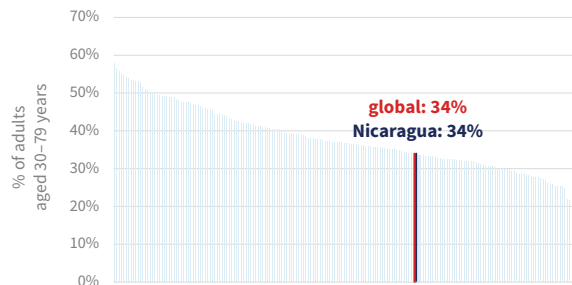
Hypertension profile

Total population (2024): 6 916 000

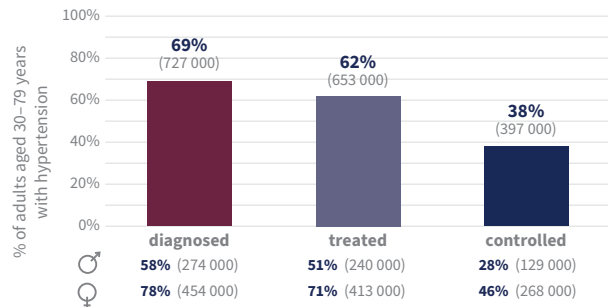
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 34% ♂ 32% ♀ 35%

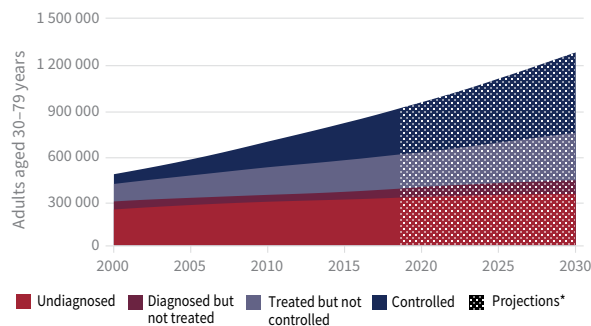
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.1 million adults aged 30–79 years with hypertension, approximately 655 000 do not have the condition controlled^b

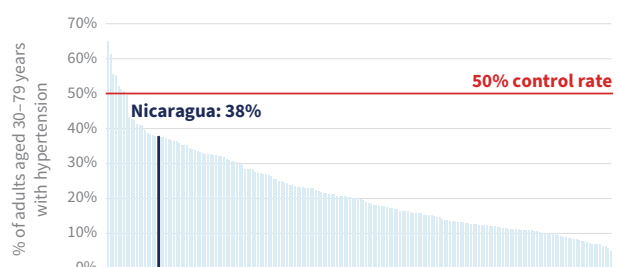


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	29 100	15 840	13 260	2021
Cardiovascular disease deaths	5600	2440	3150	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	55	57	2021
Risk of premature death from NCDs (%) ^c	13	13	12	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	9	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	32	27	37	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	39	33	44	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Don't know

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Niger

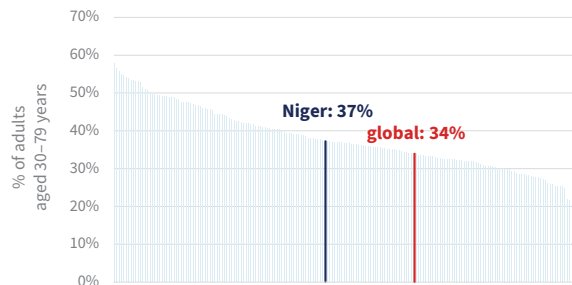
Hypertension profile

Total population (2024): 27 030 000

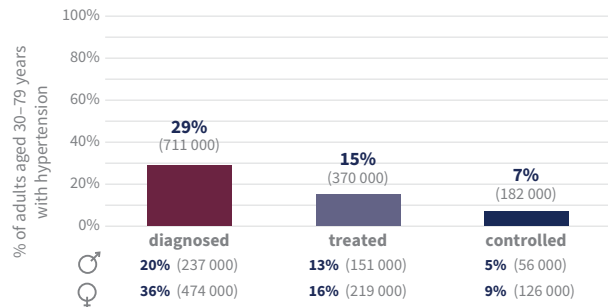
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 37% ♀ 36% ♀ 39%

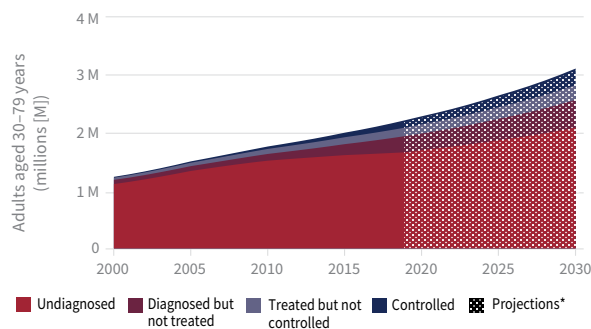
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.5 million adults aged 30–79 years with hypertension, approximately 2.3 million do not have the condition controlled^b

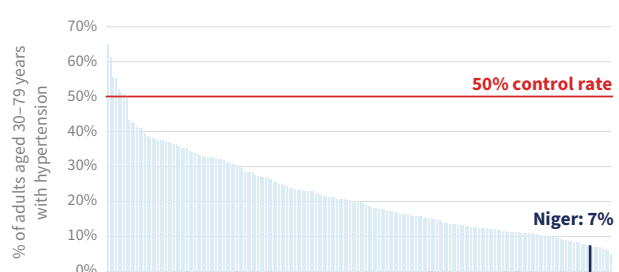


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	230 500	119 400	111 100	2021
Cardiovascular disease deaths	21 220	8 850	12 370	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	49	58	2021
Risk of premature death from NCDs (%) ^c	20	19	22	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	8	14	1	2022
Obesity, adults aged 18+ years (%)	5	4	7	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	16	13	19	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Nigeria

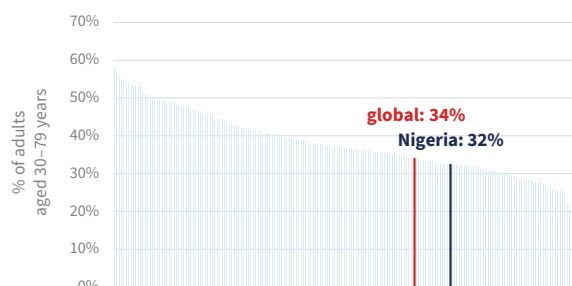
Hypertension profile

Total population (2024): 232 700 000

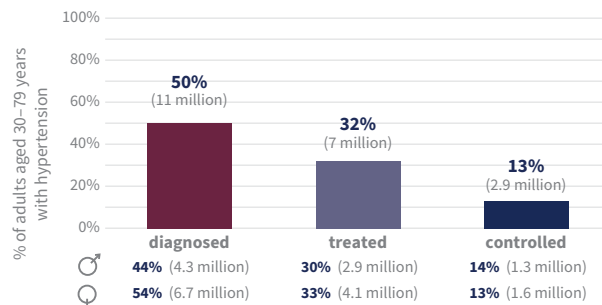
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 32% ♀ 36%

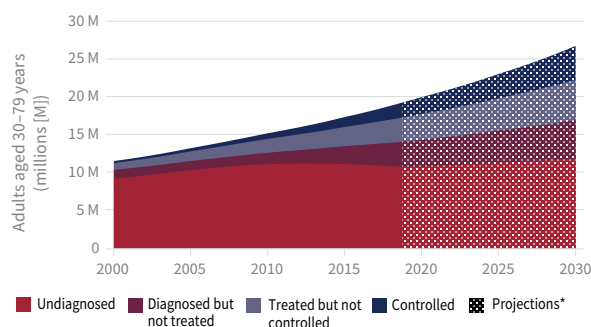
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 22 million adults aged 30–79 years with hypertension, approximately 19.1 million do not have the condition controlled^b

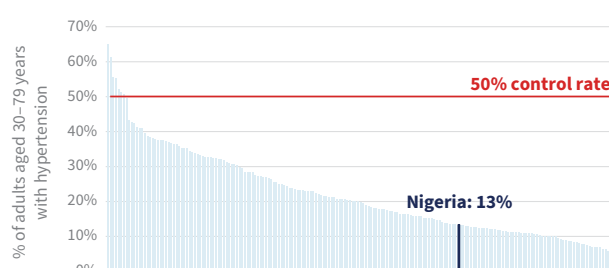


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	1 689 000	898 400	790 300	2021
Cardiovascular disease deaths	185 200	99 760	85 480	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	56	59	2021
Risk of premature death from NCDs (%) ^c	18	19	17	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	6	2021
Current tobacco use, adults aged 15+ years (%)	3	6	1	2022
Obesity, adults aged 18+ years (%)	11	7	15	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	18	16	21	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Niue

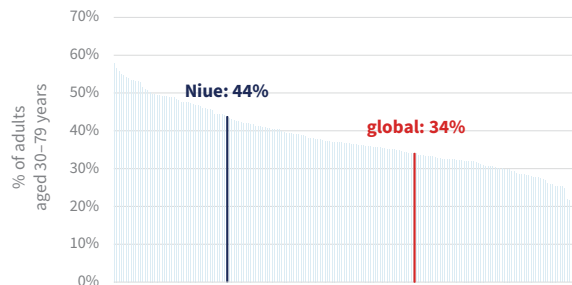
Hypertension profile

Total population (2024): 1820

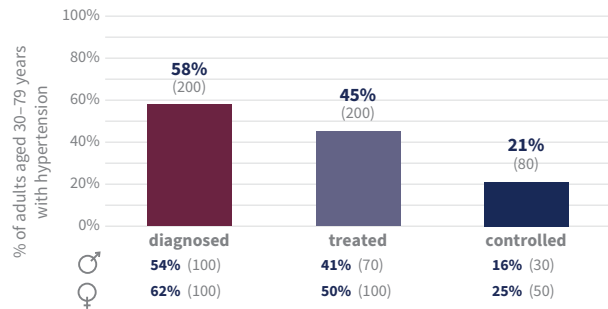
Prevalence of hypertension among adults aged 30–79 years (2024)^a

44% 41% 46%

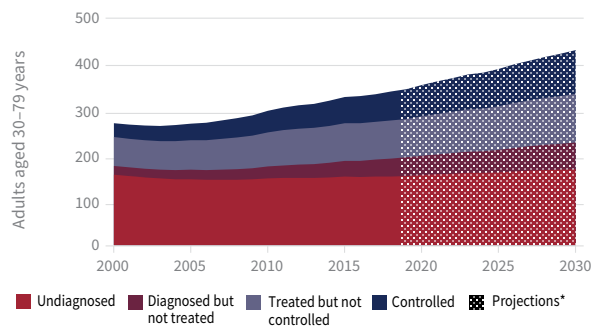
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 370 adults aged 30–79 years with hypertension, approximately 300 do not have the condition controlled^b

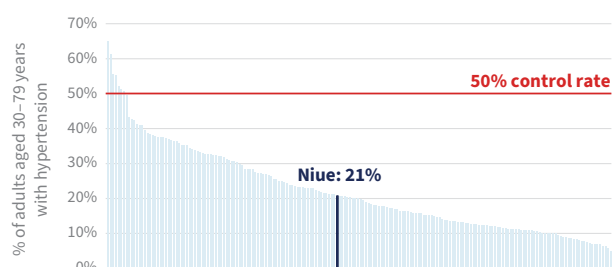


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	no data	no data	no data	2021
Cardiovascular disease deaths	no data	no data	no data	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	56	58	2021
Risk of premature death from NCDs (%) ^c	no data	no data	no data	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	66	64	69	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	7	6	8	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

North Macedonia

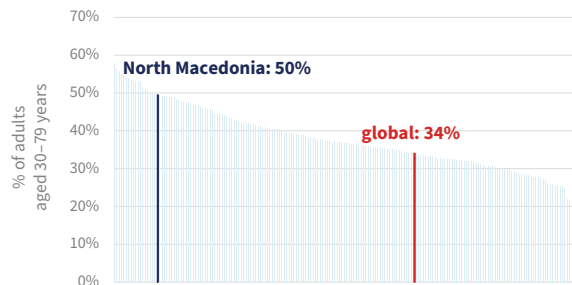
Hypertension profile

Total population (2024): 1 823 000

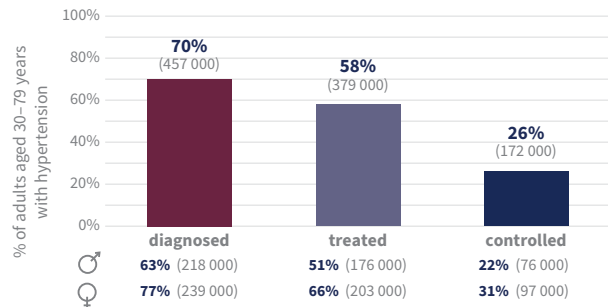
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 50% ♀ 53% ♀ 46%

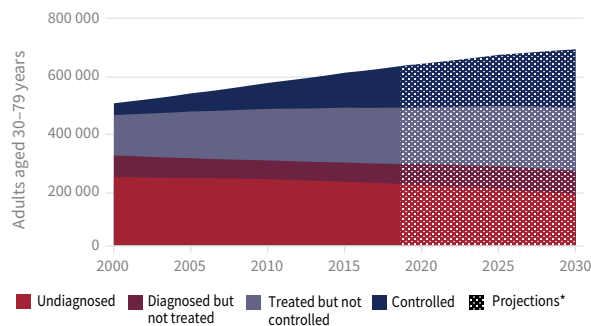
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 655 000 adults aged 30–79 years with hypertension, approximately 483 000 do not have the condition controlled^b

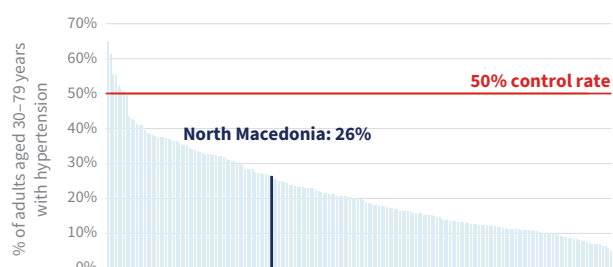


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	28 220	13 850	14 380	2021
Cardiovascular disease deaths	10 040	4310	5730	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	60	59	61	2021
Risk of premature death from NCDs (%) ^c	20	24	15	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	13	15	10	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	31	30	31	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	26	21	32	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Norway

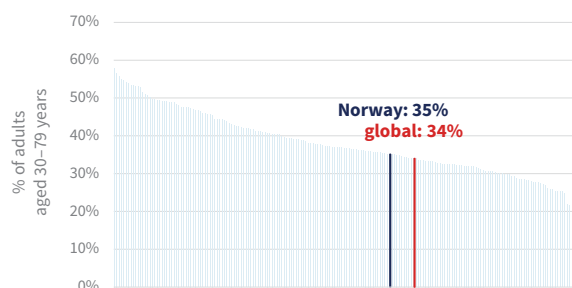
Hypertension profile

Total population (2024): 5 577 000

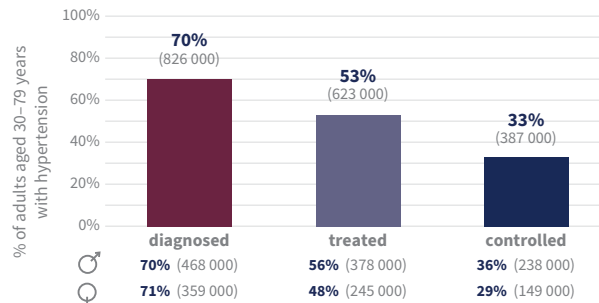
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 35% ♂ 39% ♀ 31%

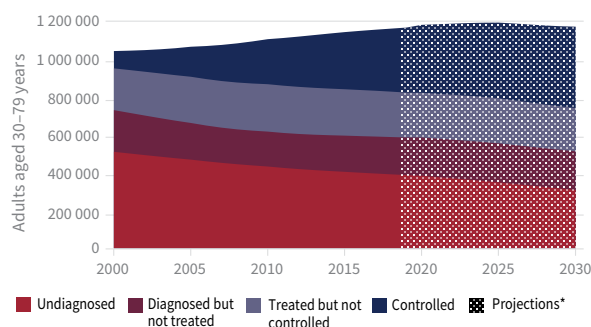
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.2 million adults aged 30–79 years with hypertension, approximately 789 000 do not have the condition controlled^b

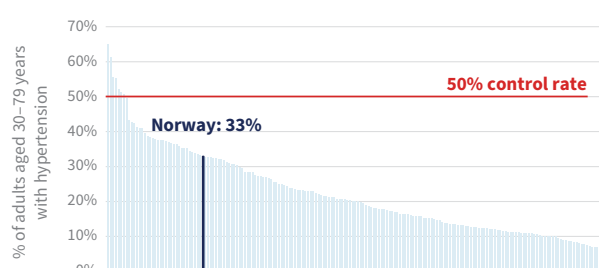


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	41 650	20 380	21 270	2021
Cardiovascular disease deaths	10 430	5100	5330	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	45	45	45	2021
Risk of premature death from NCDs (%) ^c	8	9	7	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	9	6	2021
Current tobacco use, adults aged 15+ years (%) ^d	14	15	14	2022
Obesity, adults aged 18+ years (%)	20	21	18	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	7	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	35	32	38	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Oman

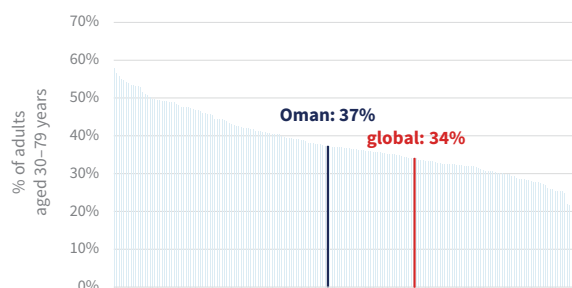
Hypertension profile

Total population (2024): 5 282 000

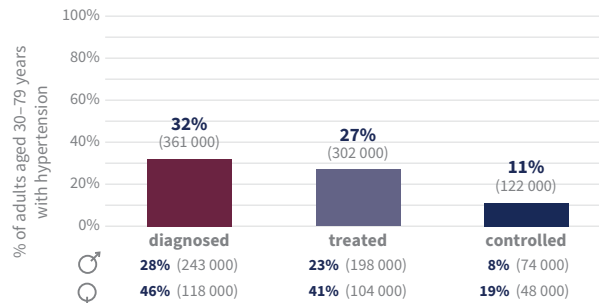
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 37% ♀ 40% ♀ 30%

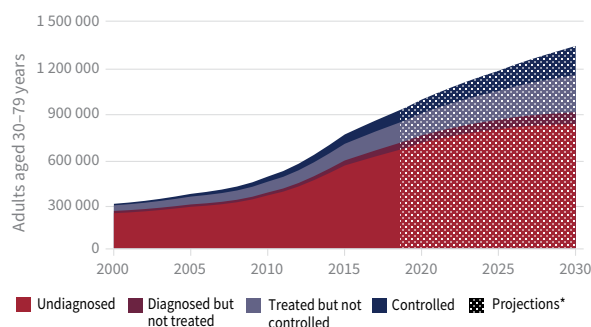
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.1 million adults aged 30–79 years with hypertension, approximately 1 million do not have the condition controlled^b

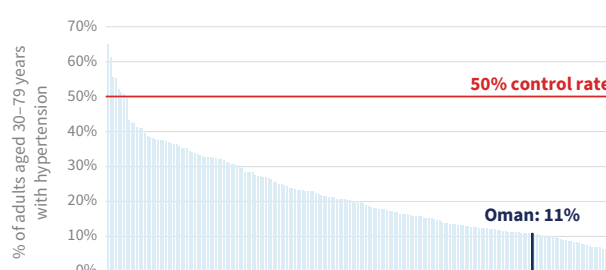


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	17 430	11 140	6290	2021
Cardiovascular disease deaths	4510	2580	1930	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	55	58	2021
Risk of premature death from NCDs (%) ^c	15	15	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%)	8	17	0	2022
Obesity, adults aged 18+ years (%)	30	26	39	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	41	35	50	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Pakistan

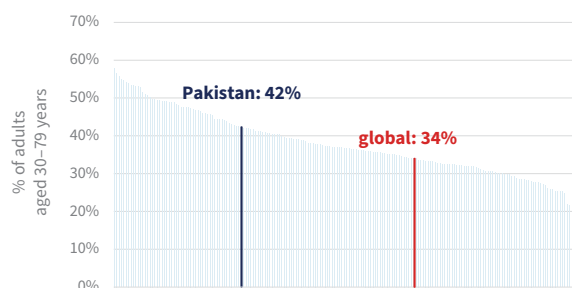
Hypertension profile

Total population (2024): 251 300 000

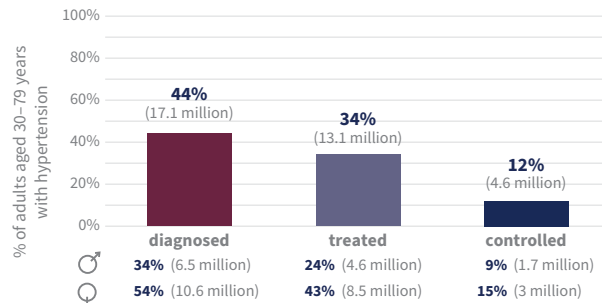
Prevalence of hypertension among adults aged 30–79 years (2024)^a

42% 41% 44%

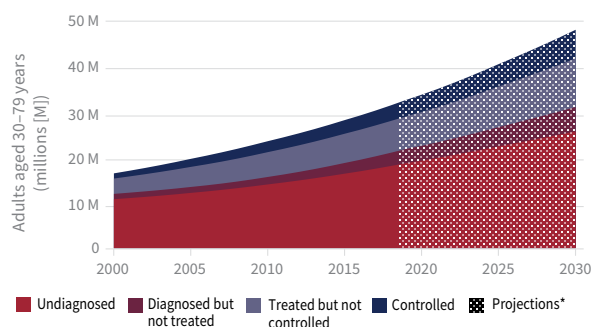
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 38.6 million adults aged 30–79 years with hypertension, approximately 33.9 million do not have the condition controlled^b

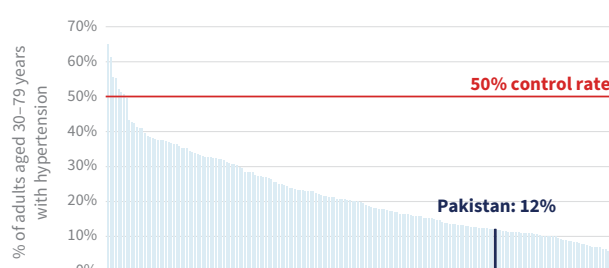


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	1 675 000	867 600	807 600	2021
Cardiovascular disease deaths	402 000	188 500	213 500	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	51	50	52	2021
Risk of premature death from NCDs (%) ^c	26	26	25	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	9	8	2021
Current tobacco use, adults aged 15+ years (%)	19	31	7	2022
Obesity, adults aged 18+ years (%)	22	19	25	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	46	34	57	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Palau

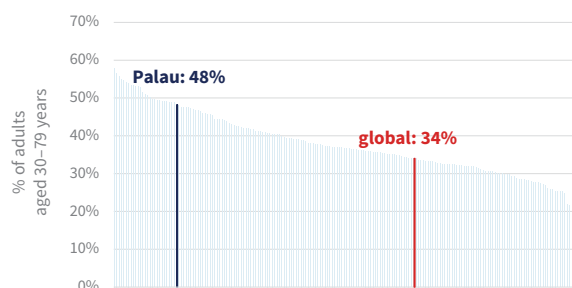
Hypertension profile

Total population (2024): 17 700

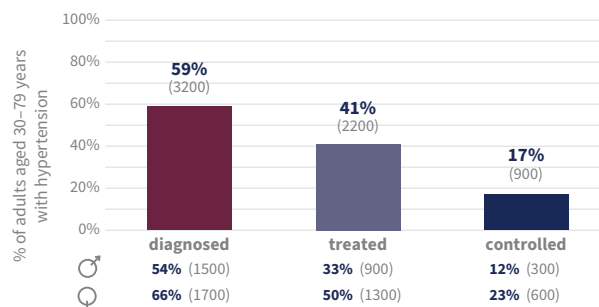
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 48% ♂ 47% ♀ 49%

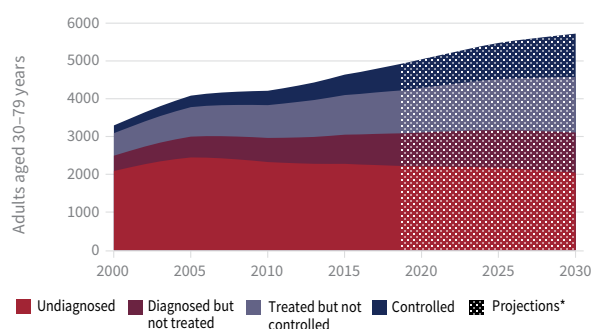
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



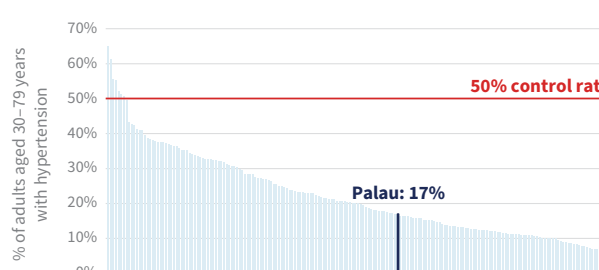
Of the 5300 adults aged 30–79 years with hypertension, approximately 4400 do not have the condition controlled^b



Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



Hypertension control rates – country comparison (both sexes)^b



*Projections assume a continuation of past trends.

Mortality

	both sexes	males	females	year
Total deaths	no data	no data	no data	2021
Cardiovascular disease deaths	no data	no data	no data	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	52	51	54	2021
Risk of premature death from NCDs (%) ^c	no data	no data	no data	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	17	27	8	2022
Obesity, adults aged 18+ years (%)	42	40	45	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	no data	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	26	17	36	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Panama

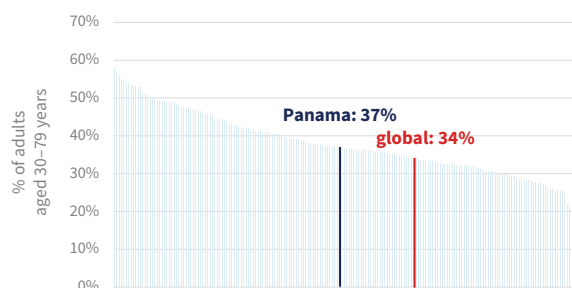
Hypertension profile

Total population (2024): 4 516 000

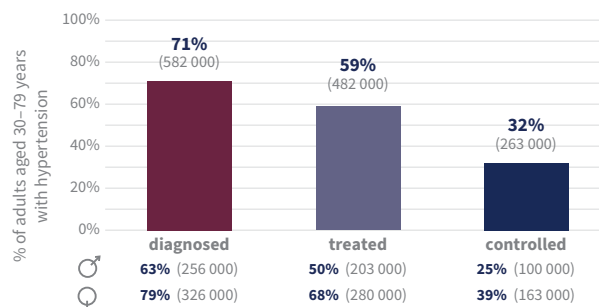
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 37% ♀ 37%

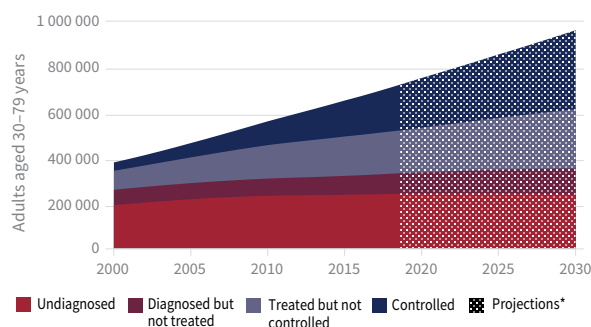
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 821 000 adults aged 30–79 years with hypertension, approximately 558 000 do not have the condition controlled^b

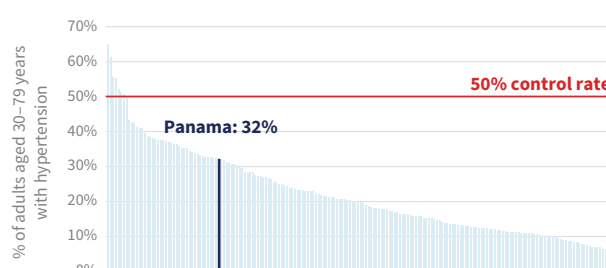


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	23 920	13 470	10 450	2021
Cardiovascular disease deaths	6230	3380	2850	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	52	55	2021
Risk of premature death from NCDs (%) ^c	11	13	9	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	9	2021
Current tobacco use, adults aged 15+ years (%)	5	8	2	2022
Obesity, adults aged 18+ years (%)	36	29	43	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	58	48	67	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Papua New Guinea

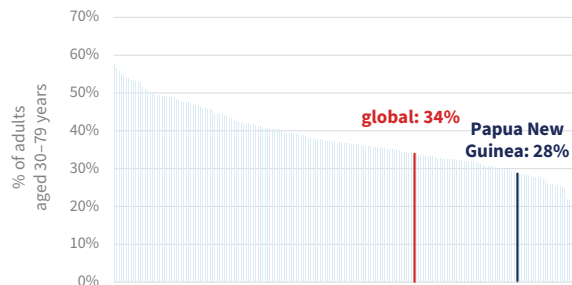
Hypertension profile

Total population (2024): 10 580 000

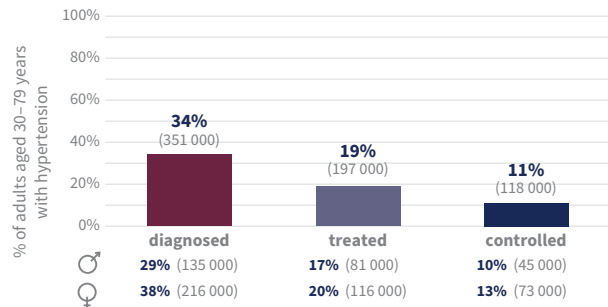
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 28% ♀ 31%

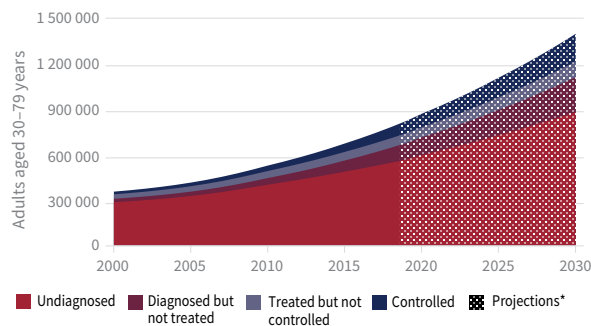
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1 million adults aged 30–79 years with hypertension, approximately 921 000 do not have the condition controlled^b

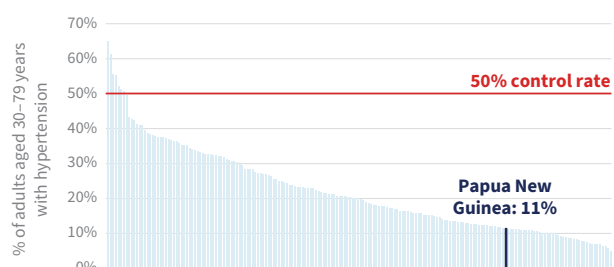


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	66 840	37 510	29 330	2021
Cardiovascular disease deaths	12 240	6420	5820	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	37	36	38	2021
Risk of premature death from NCDs (%) ^c	29	28	29	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	40	54	25	2022
Obesity, adults aged 18+ years (%)	20	15	25	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	12	8	17	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Paraguay

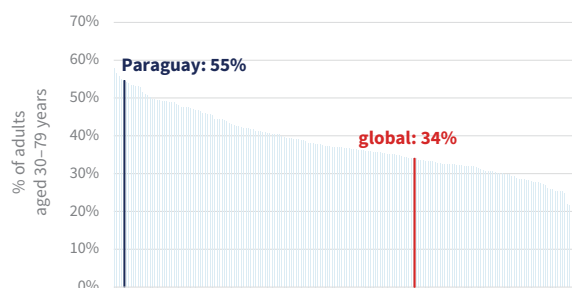
Hypertension profile

Total population (2024): 6 929 000

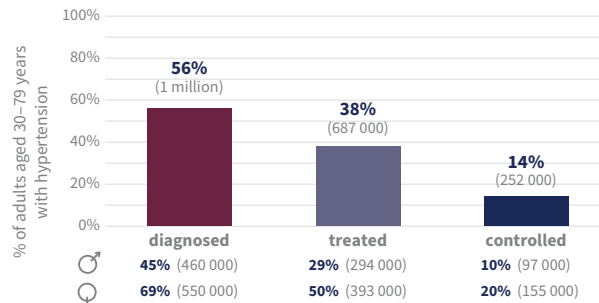
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 55% ♀ 61% 48%

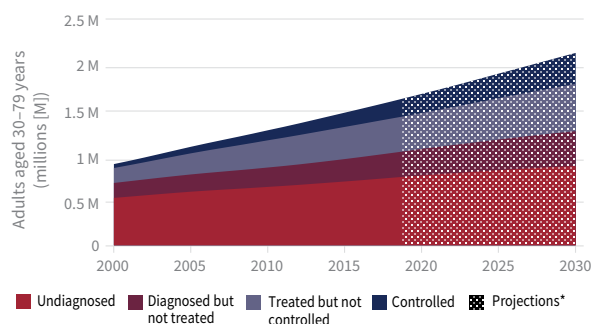
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.8 million adults aged 30–79 years with hypertension, approximately 1.6 million do not have the condition controlled^b

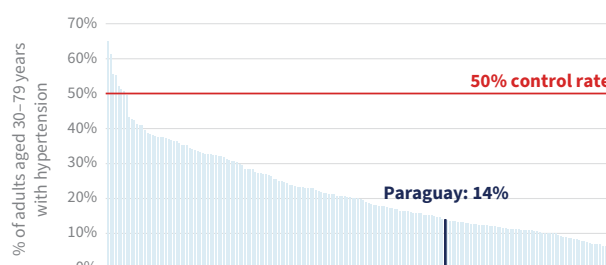


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	49 200	27 500	21 700	2021
Cardiovascular disease deaths	9510	5070	4440	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	52	58	2021
Risk of premature death from NCDs (%) ^c	16	19	14	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	8	2021
Current tobacco use, adults aged 15+ years (%) ^d	11	18	4	2022
Obesity, adults aged 18+ years (%)	32	29	35	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	7	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	36	32	40	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Peru

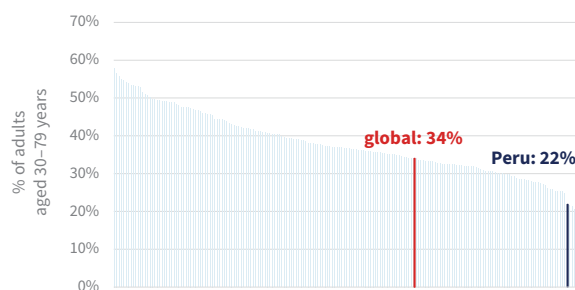
Hypertension profile

Total population (2024): 34 220 000

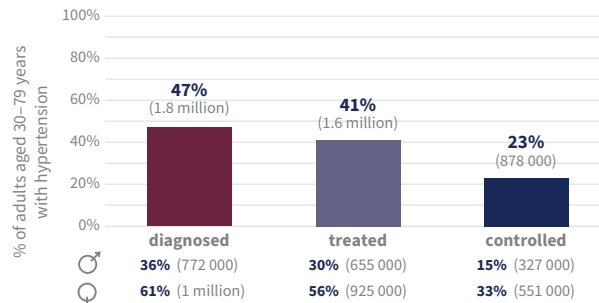
Prevalence of hypertension among adults aged 30–79 years (2024)^a

22% 24% 19%

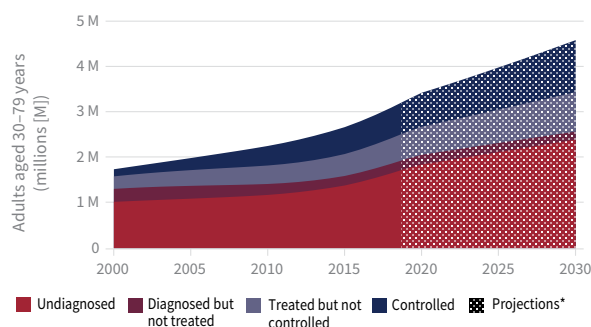
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 3.8 million adults aged 30–79 years with hypertension, approximately 2.9 million do not have the condition controlled^b

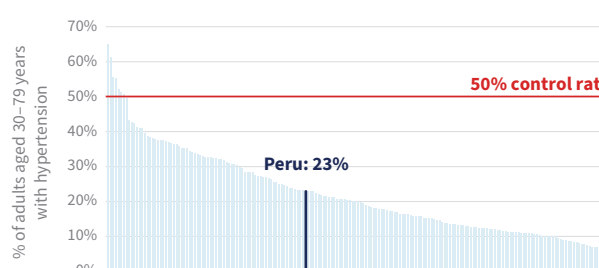


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	290 900	165 900	125 100	2021
Cardiovascular disease deaths	31 490	15 050	16 440	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	50	48	52	2021
Risk of premature death from NCDs (%) ^c	12	12	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	8	2021
Current tobacco use, adults aged 15+ years (%) ^d	7	12	3	2022
Obesity, adults aged 18+ years (%)	27	23	31	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	7	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	34	32	37	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Philippines

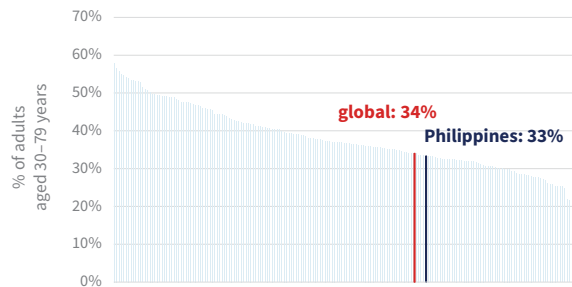
Hypertension profile

Total population (2024): 115 800 000

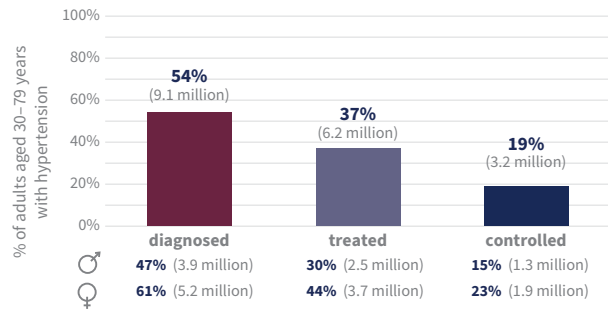
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 33% ♀ 34% 33%

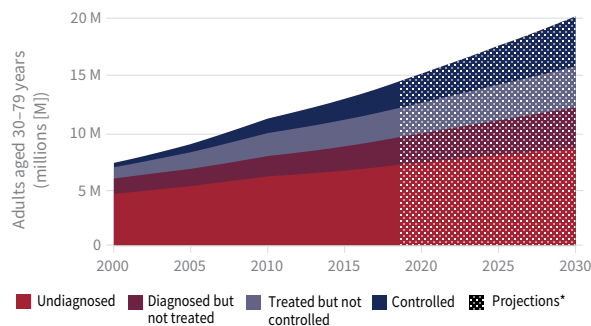
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 16.8 million adults aged 30–79 years with hypertension, approximately 13.6 million do not have the condition controlled^b

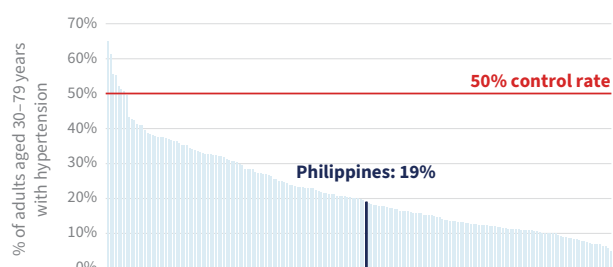


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	908 900	506 300	402 600	2021
Cardiovascular disease deaths	304 600	171 400	133 200	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	51	50	52	2021
Risk of premature death from NCDs (%) ^c	32	39	25	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	20	36	5	2022
Obesity, adults aged 18+ years (%)	9	7	10	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	45	36	55	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No response

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Poland

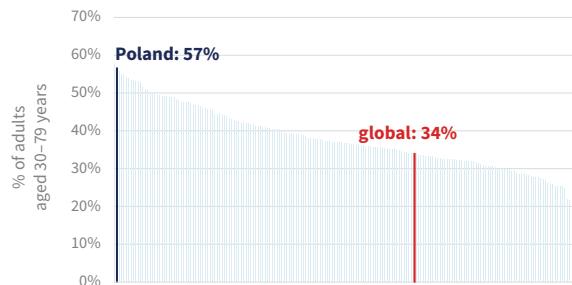
Hypertension profile

Total population (2024): 38 540 000

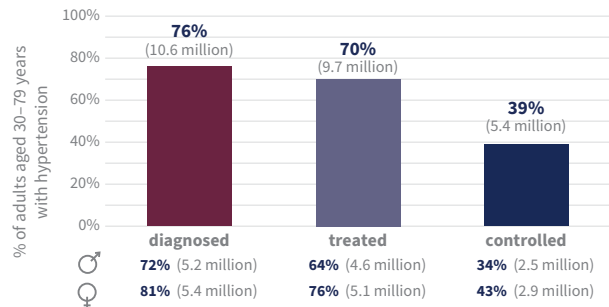
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 57% ♀ 61% 53%

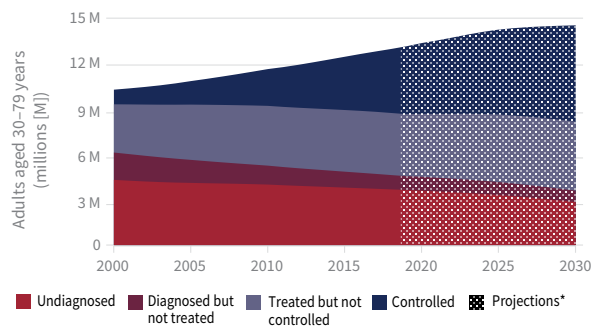
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 13.9 million adults aged 30–79 years with hypertension, approximately 8.6 million do not have the condition controlled^b

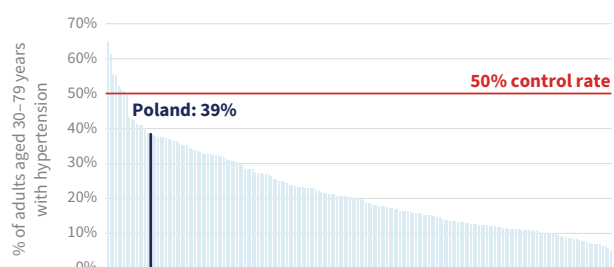


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	513 400	266 000	247 500	2021
Cardiovascular disease deaths	189 200	86 620	102 600	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	48	48	48	2021
Risk of premature death from NCDs (%) ^c	17	23	11	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	11	13	9	2021
Current tobacco use, adults aged 15+ years (%)	24	27	20	2022
Obesity, adults aged 18+ years (%)	31	34	29	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	12	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	37	36	38	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Portugal

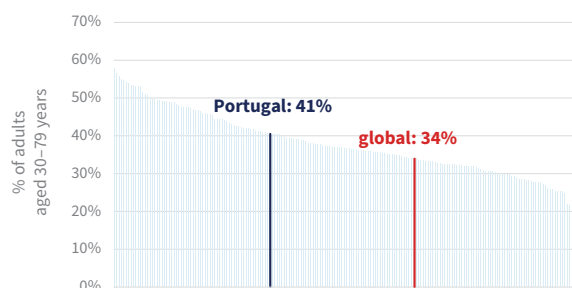
Hypertension profile

Total population (2024): 10 430 000

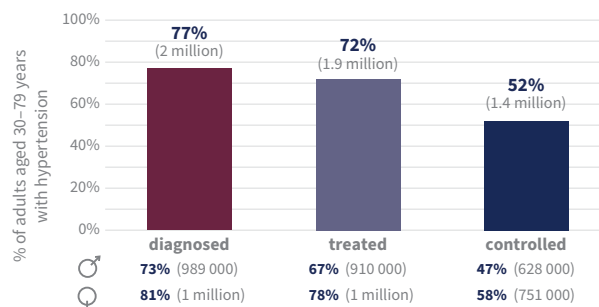
Prevalence of hypertension among adults aged 30–79 years (2024)^a

41% 44% 37%

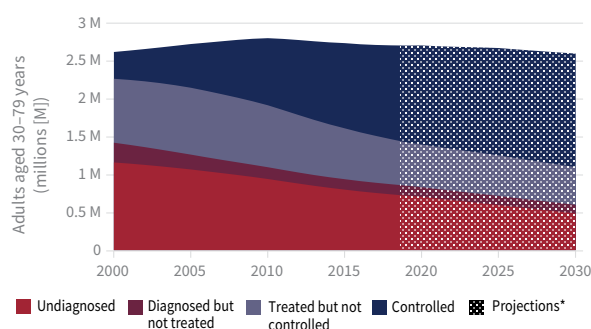
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.6 million adults aged 30–79 years with hypertension, approximately 1.3 million do not have the condition controlled^b

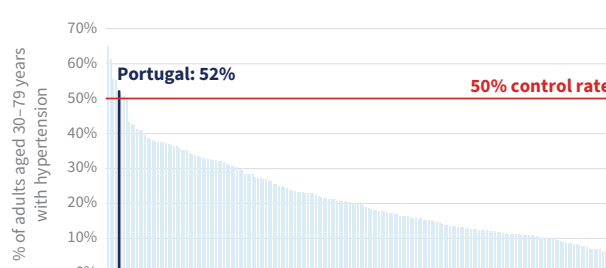


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	123 000	61 650	61 360	2021
Cardiovascular disease deaths	32 850	14 850	18 000	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	46	47	46	2021
Risk of premature death from NCDs (%) ^c	11	15	7	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	11	8	2021
Current tobacco use, adults aged 15+ years (%) ^d	26	31	21	2022
Obesity, adults aged 18+ years (%)	27	25	29	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	52	46	57	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

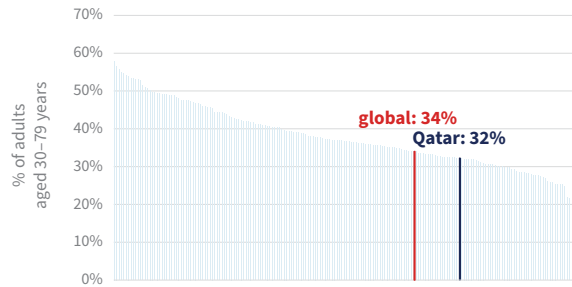
World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

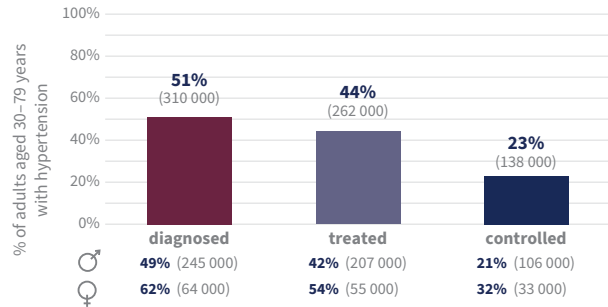
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 32% ♀ 34% ♀ 26%

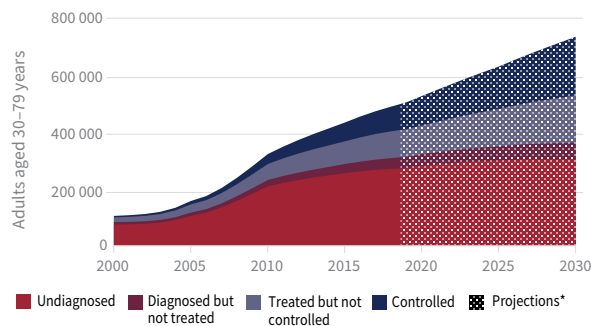
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 602 000 adults aged 30–79 years with hypertension, approximately 464 000 do not have the condition controlled^b

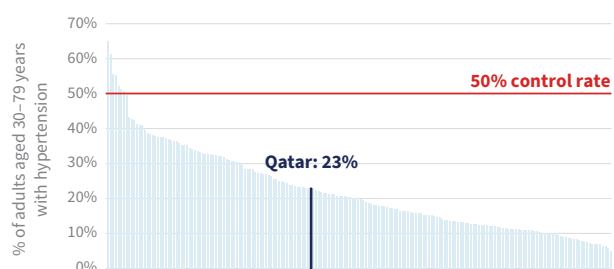


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	4810	3490	1320	2021
Cardiovascular disease deaths	1160	850	300	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	51	51	53	2021
Risk of premature death from NCDs (%) ^c	12	12	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	5	2021
Current tobacco use, adults aged 15+ years (%)	13	23	2	2022
Obesity, adults aged 18+ years (%)	44	42	51	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	53	50	63	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

Republic of Korea

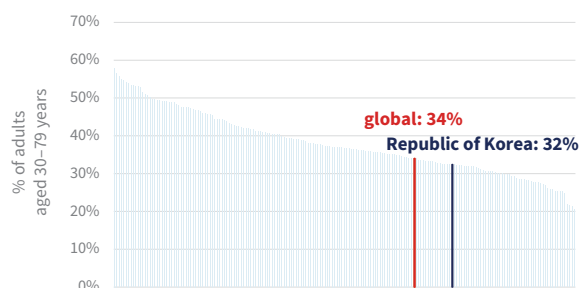
Hypertension profile

Total population (2024): 51 720 000

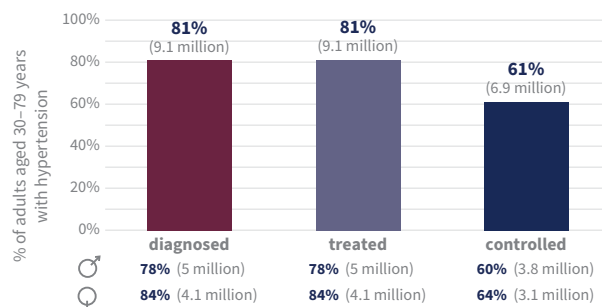
Prevalence of hypertension among adults aged 30–79 years (2024)^a

32% 37% 28%

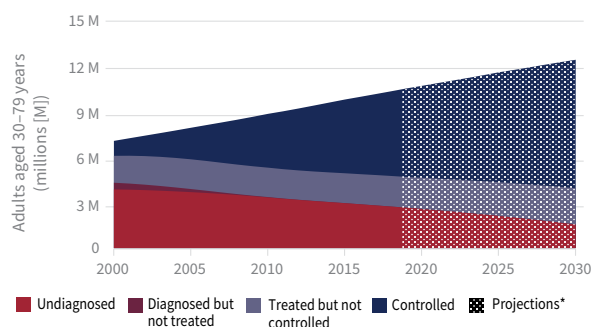
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 11.3 million adults aged 30–79 years with hypertension, approximately 4.4 million do not have the condition controlled^b

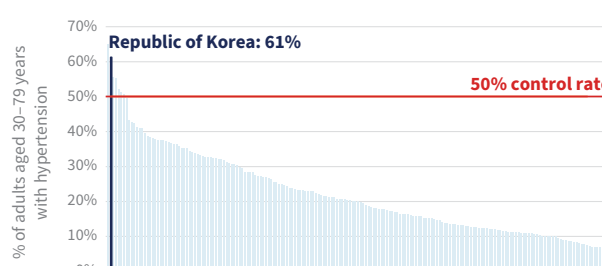


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	318 500	173 000	145 500	2021
Cardiovascular disease deaths	70 330	32 730	37 600	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	43	40	45	2021
Risk of premature death from NCDs (%) ^c	7	10	4	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	12	13	11	2021
Current tobacco use, adults aged 15+ years (%) ^d	20	34	6	2022
Obesity, adults aged 18+ years (%)	7	8	6	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	8	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	58	56	60	2022

National response

Targets

National target for blood pressure	Don't know
National target for salt consumption	Don't know

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Don't know

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Republic of Moldova

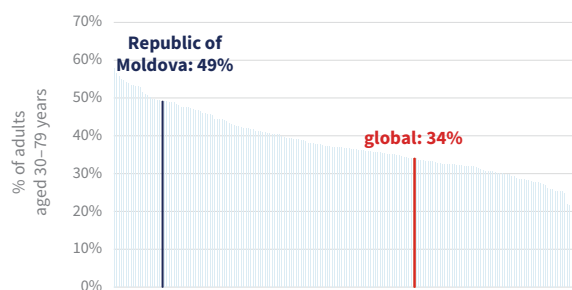
Hypertension profile

Total population (2024): 3 035 000

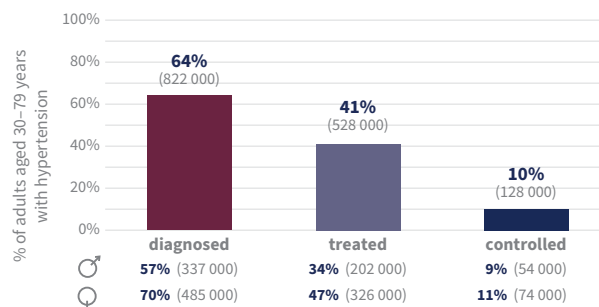
Prevalence of hypertension among adults aged 30–79 years (2024)^a

49% 48% 50%

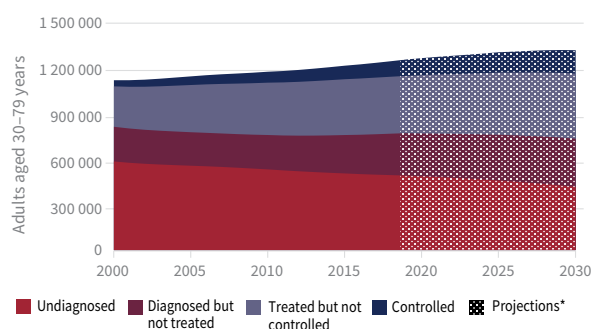
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.3 million adults aged 30–79 years with hypertension, approximately 1.2 million do not have the condition controlled^b

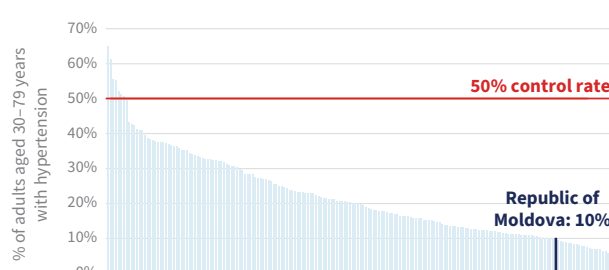


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	48 690	24 230	24 460	2021
Cardiovascular disease deaths	24 420	11 050	13 370	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	65	63	67	2021
Risk of premature death from NCDs (%) ^c	25	34	17	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	30	52	7	2022
Obesity, adults aged 18+ years (%)	26	22	29	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	14	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	11	12	10	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Romania

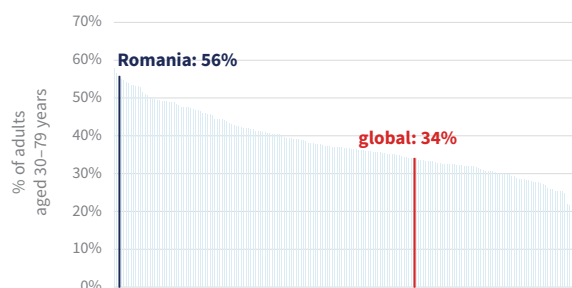
Hypertension profile

Total population (2024): 19 020 000

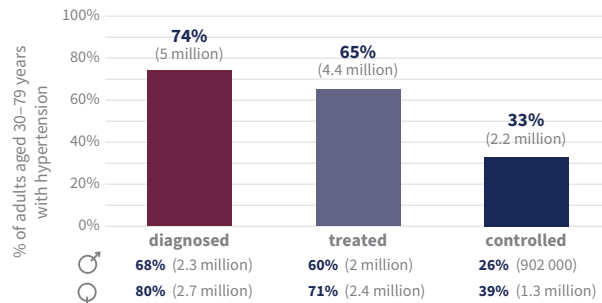
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 56% ♀ 58% ♀ 53%

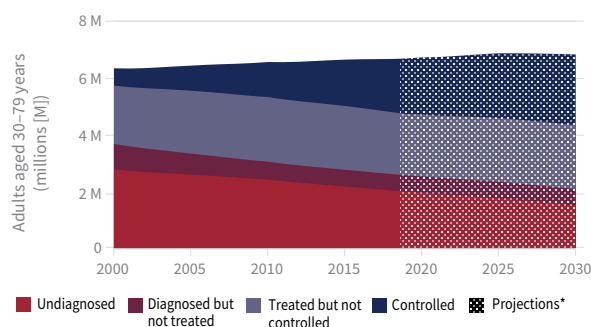
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 6.7 million adults aged 30–79 years with hypertension, approximately 4.6 million do not have the condition controlled^b

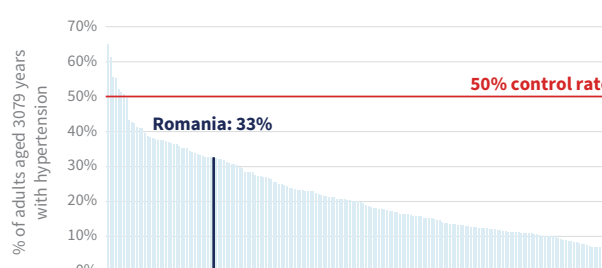


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	327 900	169 800	158 100	2021
Cardiovascular disease deaths	143 800	65 440	78 390	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	61	58	64	2021
Risk of premature death from NCDs (%) ^c	22	29	15	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	13	15	10	2021
Current tobacco use, adults aged 15+ years (%)	30	39	22	2022
Obesity, adults aged 18+ years (%)	38	40	37	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	17	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	37	37	37	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Russian Federation

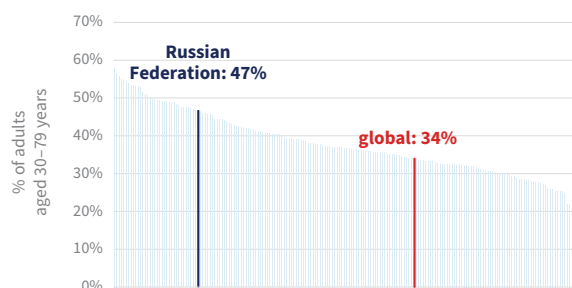
Hypertension profile

Total population (2024): 144 800 000

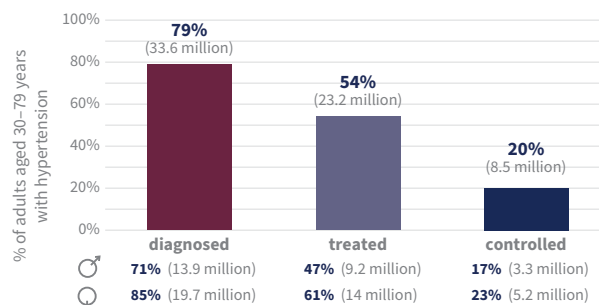
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 47% ♀ 46%

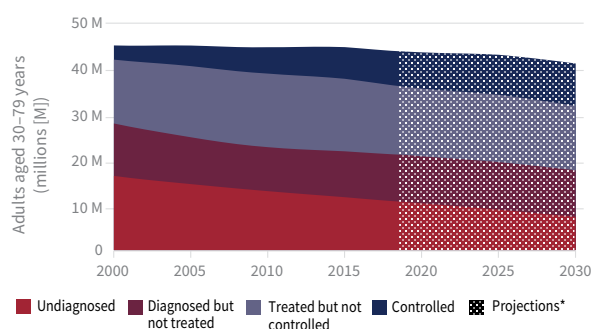
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 42.6 million adults aged 30–79 years with hypertension, approximately 34.1 million do not have the condition controlled^b

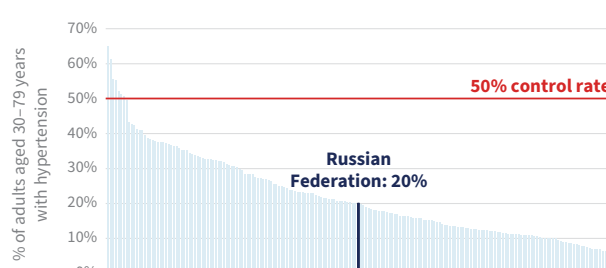


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	2 453 000	1 171 000	1 282 000	2021
Cardiovascular disease deaths	910 100	390 600	519 500	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	51	56	2021
Risk of premature death from NCDs (%) ^c	22	32	15	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	9	2021
Current tobacco use, adults aged 15+ years (%)	29	41	17	2022
Obesity, adults aged 18+ years (%)	28	25	30	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	18	18	18	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Rwanda

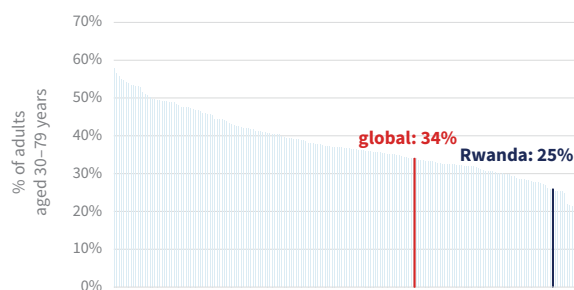
Hypertension profile

Total population (2024): 14 260 000

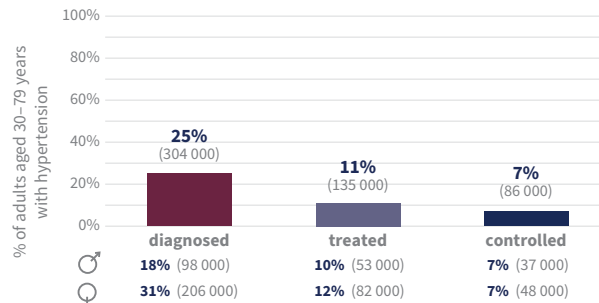
Prevalence of hypertension among adults aged 30–79 years (2024)^a

25% 24% 27%

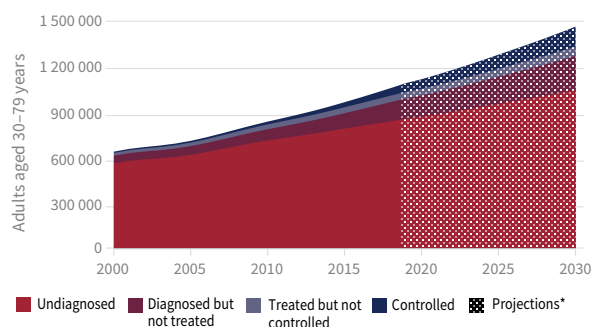
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.2 million adults aged 30–79 years with hypertension, approximately 1.1 million do not have the condition controlled^b

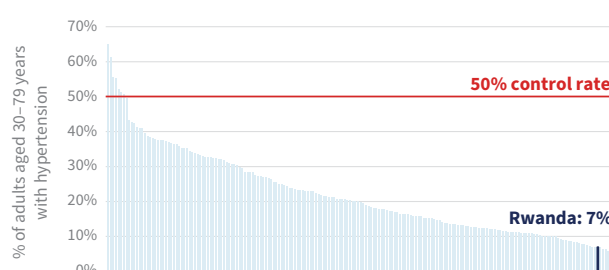


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	79 490	40 530	38 970	2021
Cardiovascular disease deaths	14 570	6240	8330	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	55	48	61	2021
Risk of premature death from NCDs (%) ^c	20	22	19	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	14	21	8	2022
Obesity, adults aged 18+ years (%)	5	1	7	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	9	8	10	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature death from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Saint Kitts and Nevis

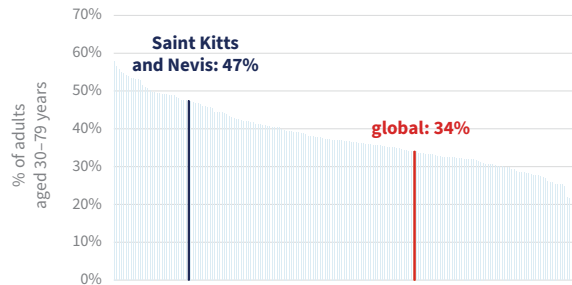
Hypertension profile

Total population (2024): 46 840

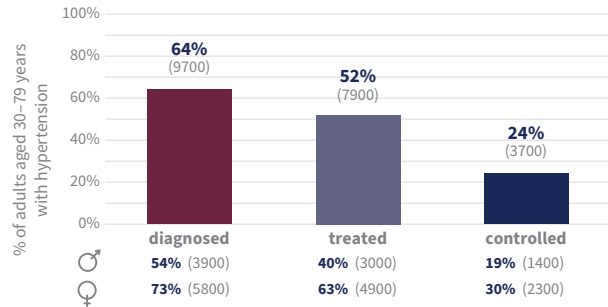
Prevalence of hypertension among adults aged 30–79 years (2024)^a

47% 46% 49%

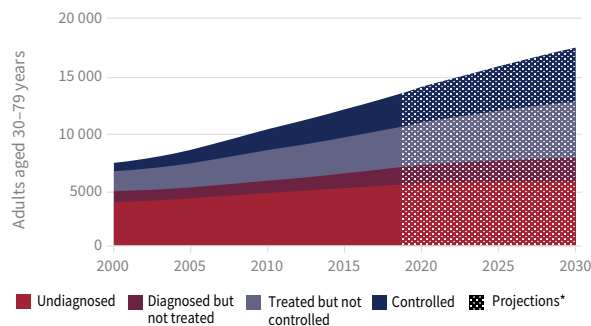
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 15 000 adults aged 30–79 years with hypertension, approximately 11 000 do not have the condition controlled^b

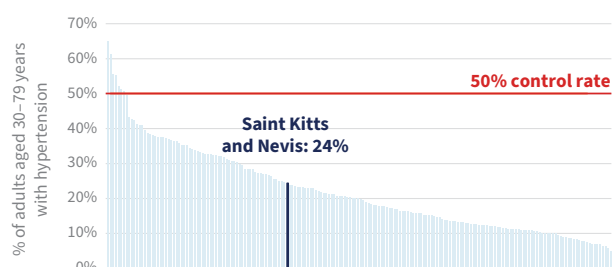


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	no data	no data	no data	2021
Cardiovascular disease deaths	no data	no data	no data	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	55	57	52	2021
Risk of premature death from NCDs (%) ^c	no data	no data	no data	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	47	37	55	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	7	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	42	34	49	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Saint Lucia

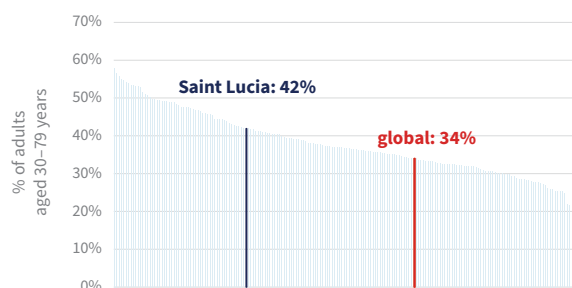
Hypertension profile

Total population (2024): 179 700

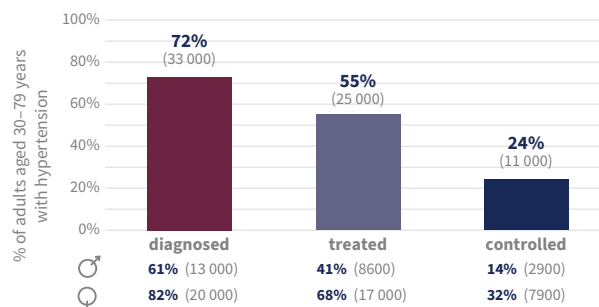
Prevalence of hypertension among adults aged 30–79 years (2024)^a

42% 40% 44%

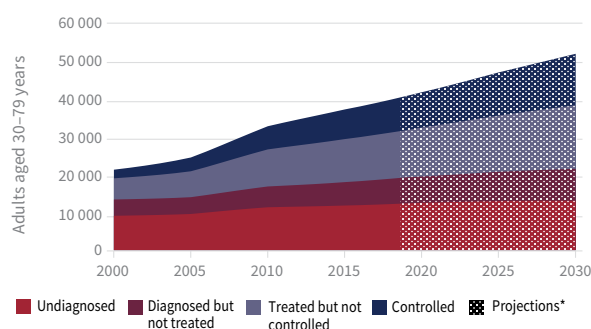
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 45 000 adults aged 30–79 years with hypertension, approximately 34 000 do not have the condition controlled^b

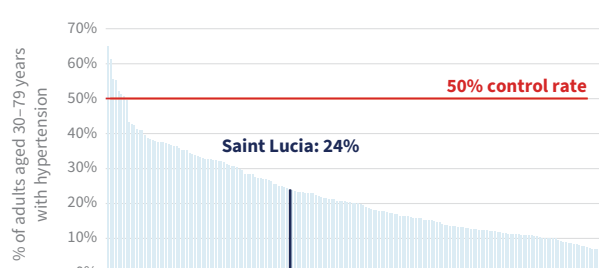


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	1 710	950	750	2021
Cardiovascular disease deaths	340	140	200	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	52	51	54	2021
Risk of premature death from NCDs (%) ^c	16	15	16	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	14	25	3	2022
Obesity, adults aged 18+ years (%)	34	21	47	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	21	18	24	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Saint Vincent and the Grenadines

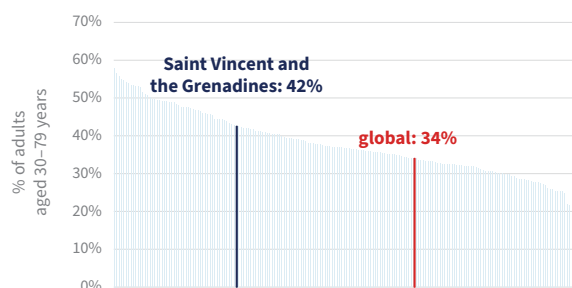
Hypertension profile

Total population (2024): 100 600

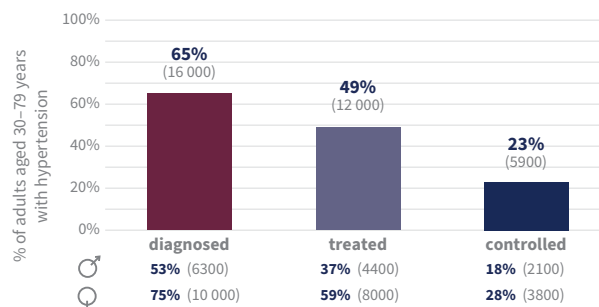
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 42% ♂ 40% ♀ 46%

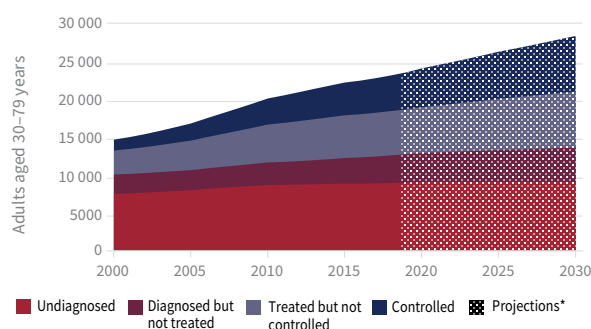
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 25 000 adults aged 30–79 years with hypertension, approximately 20 000 do not have the condition controlled^b

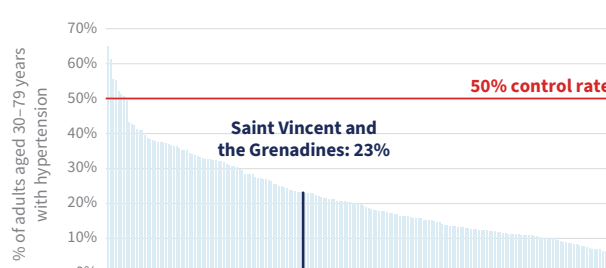


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	1010	560	440	2021
Cardiovascular disease deaths	370	190	180	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	56	56	2021
Risk of premature death from NCDs (%) ^c	24	26	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	34	19	49	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	7	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	30	21	40	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Samoa

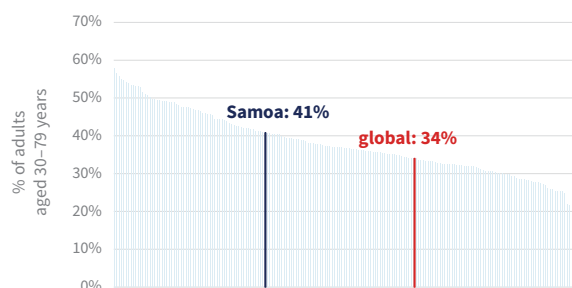
Hypertension profile

Total population (2024): 218 000

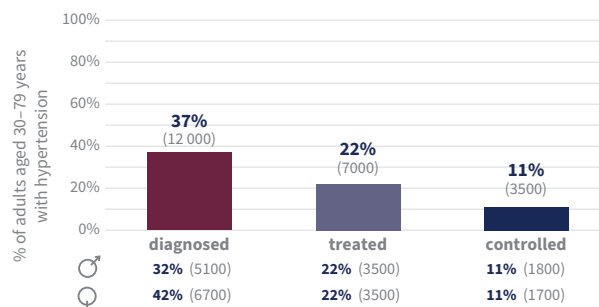
Prevalence of hypertension among adults aged 30–79 years (2024)^a

41% 40% 42%

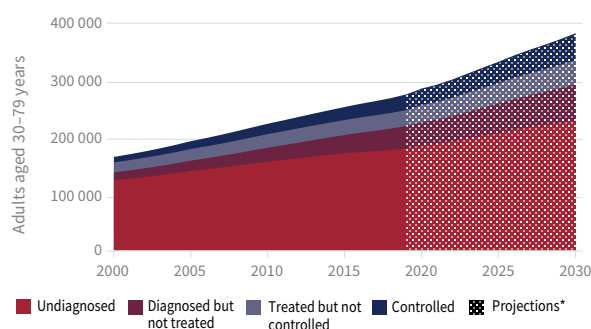
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 32 000 adults aged 30–79 years with hypertension, approximately 28 000 do not have the condition controlled^b

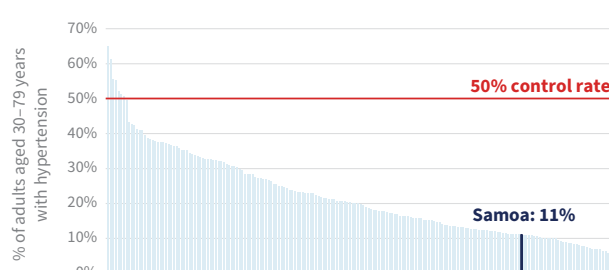


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	1430	710	720	2021
Cardiovascular disease deaths	540	270	270	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	51	52	51	2021
Risk of premature death from NCDs (%) ^c	32	34	30	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	5	5	5	2021
Current tobacco use, adults aged 15+ years (%)	23	32	13	2022
Obesity, adults aged 18+ years (%)	61	50	73	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	13	9	18	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

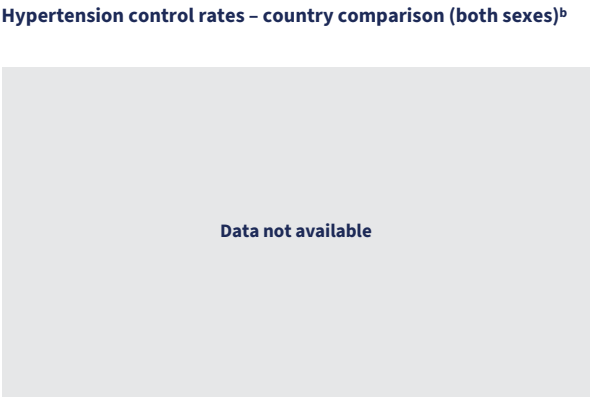
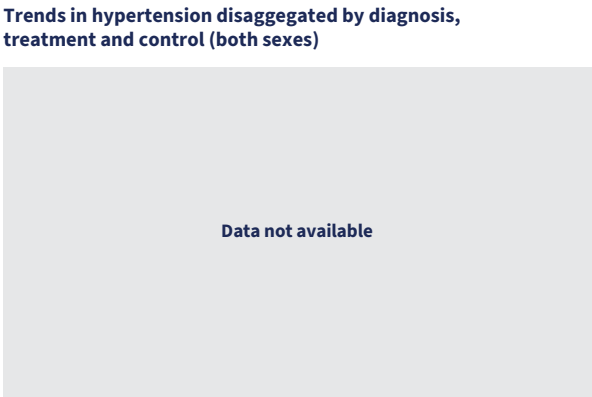
b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Prevalence of hypertension among adults aged 30–79 years (2024)^a



Mortality

	both sexes	males	females	year
Total deaths	no data	no data	no data	2021
Cardiovascular disease deaths	no data	no data	no data	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	47	45	48	2021
Risk of premature death from NCDs (%) ^c	no data	no data	no data	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	10	7	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	no data	no data	no data	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	no data	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	26	23	28	2022

National response

Targets		Policies	
National target for blood pressure	No	Operational cardiovascular disease policy	Yes
National target for salt consumption	No	Operational salt reduction policy	No
Treatment			
Guidelines for management of hypertension	No		
Surveillance			
Conducted recent, national survey measuring raised blood pressure/hypertension		No	
Conducted recent, national survey on salt/sodium intake		No	
Functioning system for generating reliable cause-specific mortality data on a routine basis		Yes	
Standardized patient information system broadly available at the primary health carelevel that captures CVD-related patient data		Yes	

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.
b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.
c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

Sao Tome and Principe

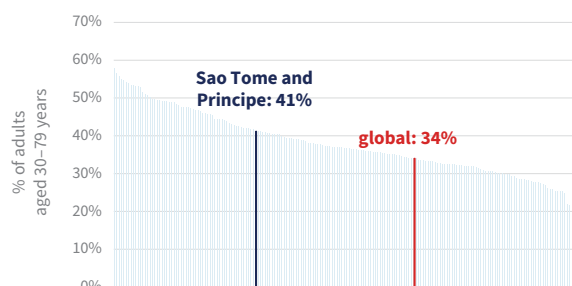
Hypertension profile

Total population (2024): 235 500

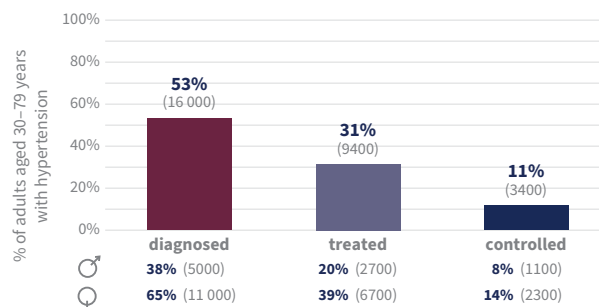
Prevalence of hypertension among adults aged 30–79 years (2024)^a

41% 37% 46%

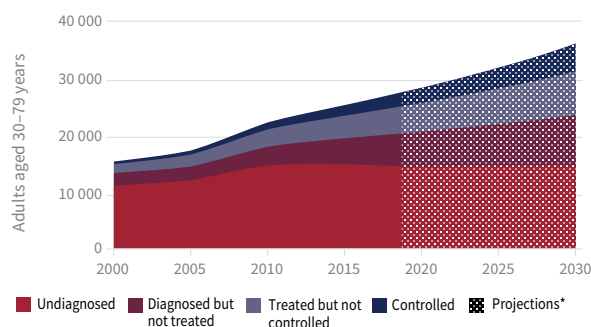
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 31 000 adults aged 30–79 years with hypertension, approximately 27 000 do not have the condition controlled^b

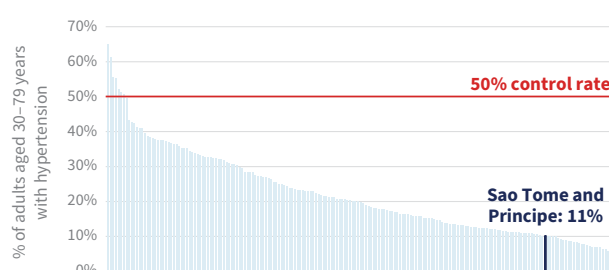


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	1120	580	540	2021
Cardiovascular disease deaths	260	100	160	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	57	56	2021
Risk of premature death from NCDs (%) ^c	20	20	19	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	8	14	2	2022
Obesity, adults aged 18+ years (%)	15	9	21	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	18	14	22	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Don't know

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Don't know

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Saudi Arabia

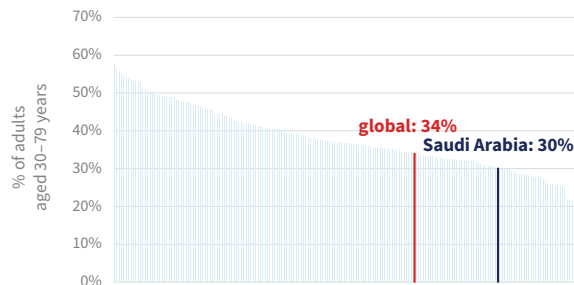
Hypertension profile

Total population (2024): 33 960 000

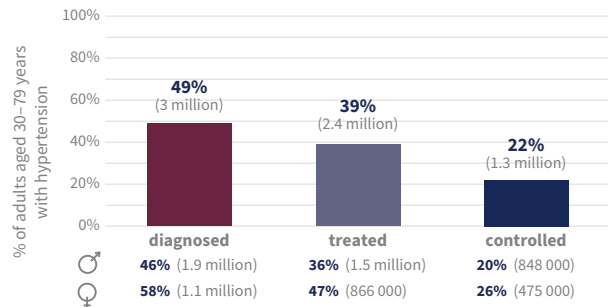
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 30% ♀ 34% 24%

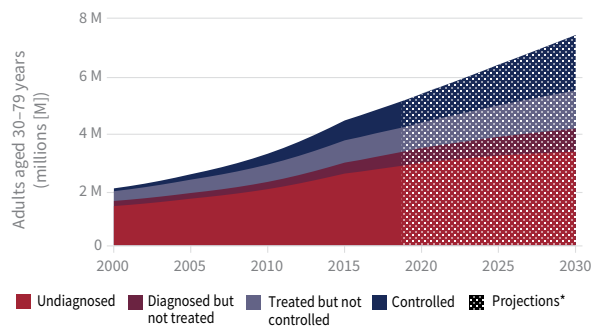
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 6.1 million adults aged 30–79 years with hypertension, approximately 4.7 million do not have the condition controlled^b

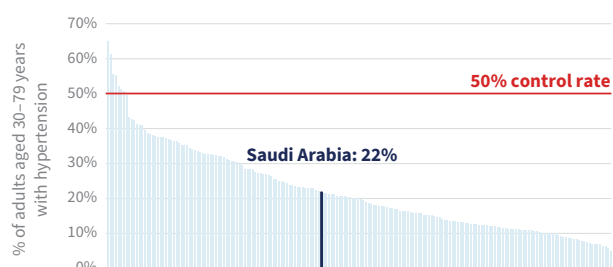


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	85 470	53 010	32 450	2021
Cardiovascular disease deaths	26 220	15 850	10 370	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	52	54	47	2021
Risk of premature death from NCDs (%) ^c	14	14	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%)	15	28	2	2022
Obesity, adults aged 18+ years (%)	41	39	44	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	no data	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	52	47	58	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Senegal

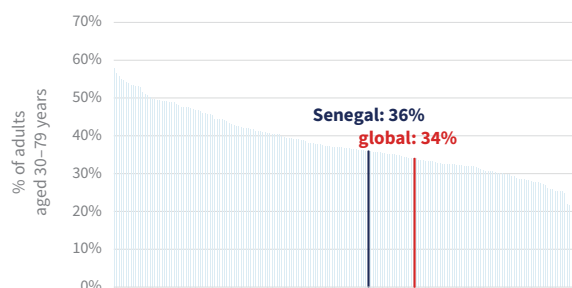
Hypertension profile

Total population (2024): 18 500 000

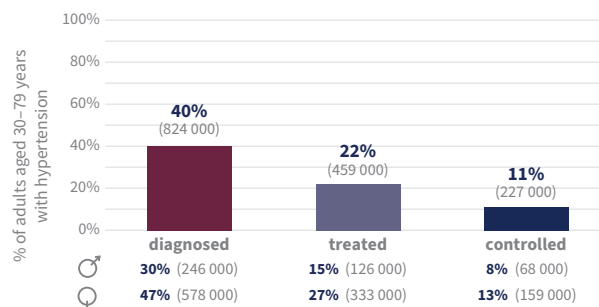
Prevalence of hypertension among adults aged 30–79 years (2024)^a

36% 32% 40%

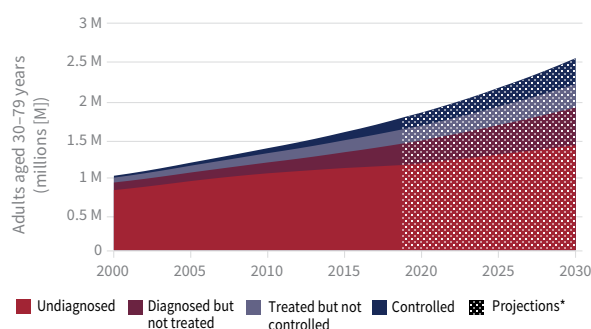
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2 million adults aged 30–79 years with hypertension, approximately 1.8 million do not have the condition controlled^b

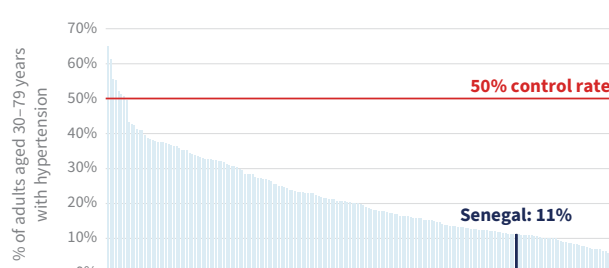


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	100 500	55 930	44 530	2021
Cardiovascular disease deaths	21 180	10 800	10 390	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	60	56	64	2021
Risk of premature death from NCDs (%) ^c	21	21	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	7	12	1	2022
Obesity, adults aged 18+ years (%)	9	3	14	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	17	11	22	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Serbia

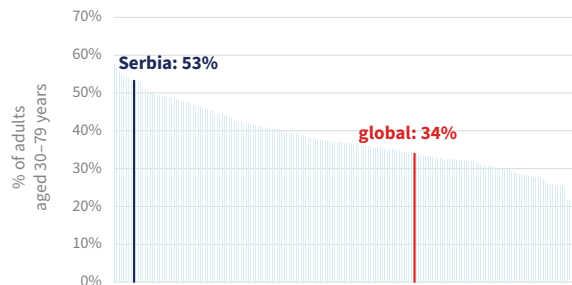
Hypertension profile

Total population (2024): 6 736 000

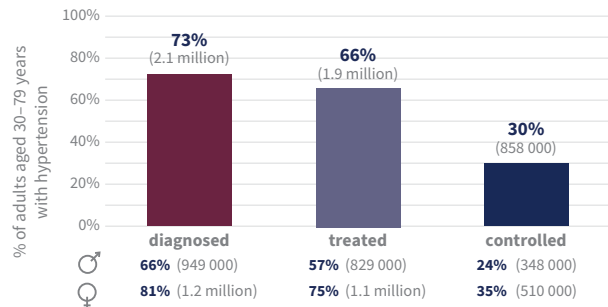
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 53% ♀ 55% 52%

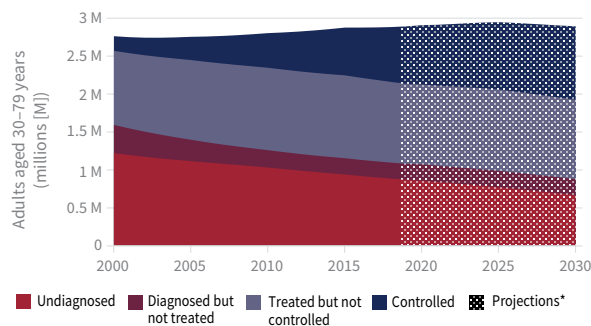
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.9 million adults aged 30–79 years with hypertension, approximately 2 million do not have the condition controlled^b

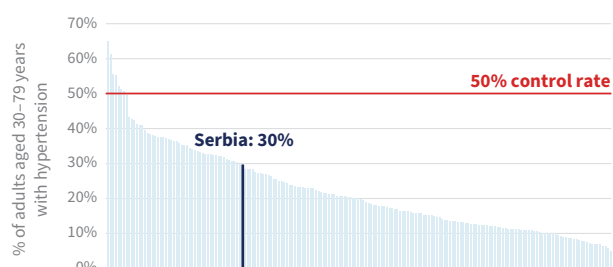


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	137 800	69 320	68 510	2021
Cardiovascular disease deaths	56 150	24 470	31 680	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	60	59	62	2021
Risk of premature death from NCDs (%) ^c	21	26	15	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	13	15	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	40	40	39	2022
Obesity, adults aged 18+ years (%)	26	28	24	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	9	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	45	42	48	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Seychelles

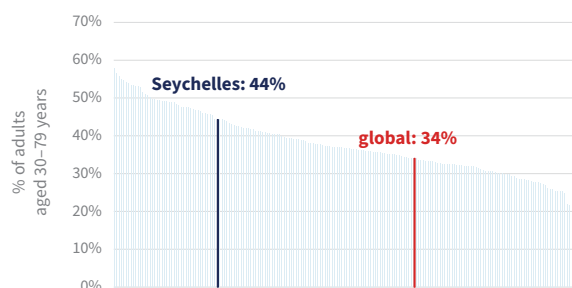
Hypertension profile

Total population (2024): 130 400

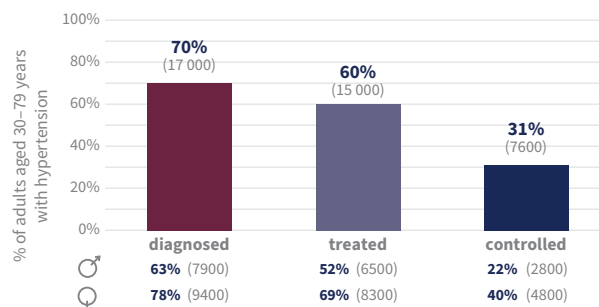
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 44% ♀ 44% 45%

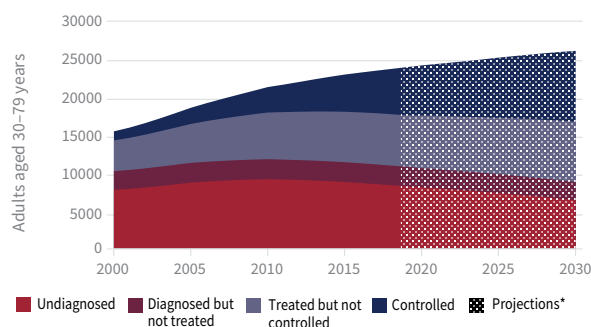
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 25 000 adults aged 30–79 years with hypertension, approximately 17 000 do not have the condition controlled^b

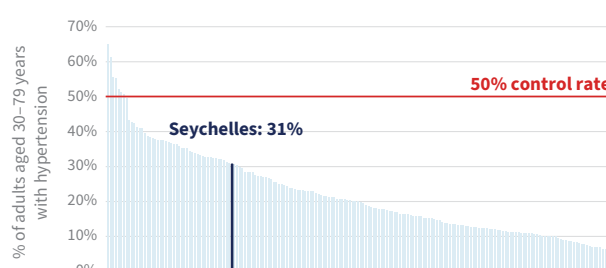


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	930	460	470	2021
Cardiovascular disease deaths	260	110	150	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	64	63	66	2021
Risk of premature death from NCDs (%) ^c	16	18	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%)	20	35	6	2022
Obesity, adults aged 18+ years (%)	30	21	41	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	20	20	21	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Sierra Leone

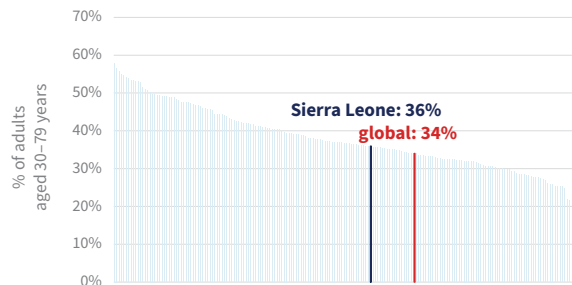
Hypertension profile

Total population (2024): 8 642 000

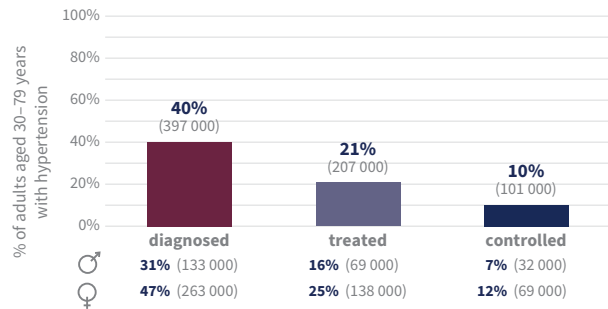
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 36% ♂ 32% ♀ 40%

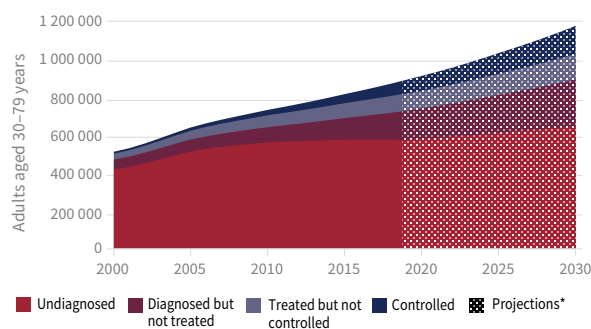
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 991 000 adults aged 30–79 years with hypertension, approximately 890 000 do not have the condition controlled^b

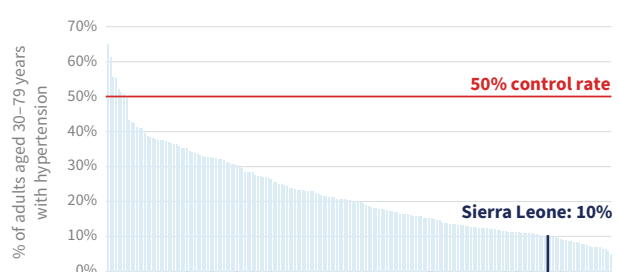


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	69 560	35 230	34 330	2021
Cardiovascular disease deaths	11 840	5200	6640	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	61	58	63	2021
Risk of premature death from NCDs (%) ^c	24	23	25	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	13	20	6	2022
Obesity, adults aged 18+ years (%)	6	2	11	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	13	9	17	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Singapore

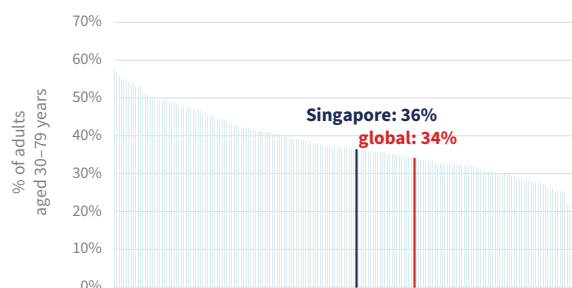
Hypertension profile

Total population (2024): 5 832 000

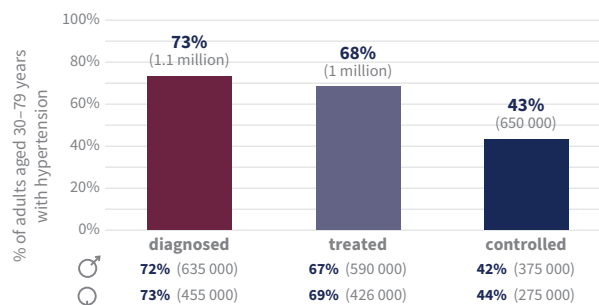
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 36% ♀ 40% ♀ 32%

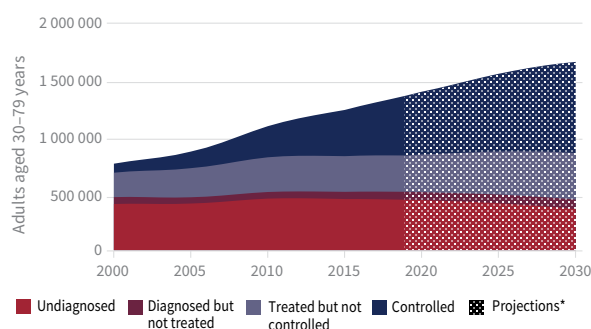
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.5 million adults aged 30–79 years with hypertension, approximately 854 000 do not have the condition controlled^b

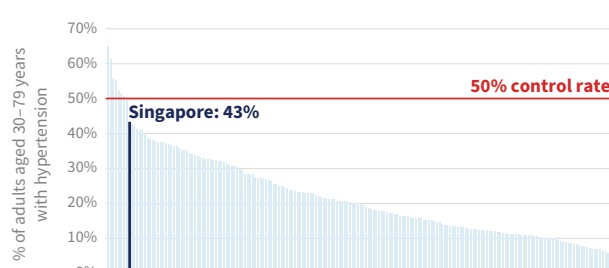


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	24 100	13 510	10 590	2021
Cardiovascular disease deaths	8060	4810	3250	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	41	41	42	2021
Risk of premature death from NCDs (%) ^c	10	13	7	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	11	12	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	16	28	5	2022
Obesity, adults aged 18+ years (%)	14	15	12	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	23	24	22	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Slovakia

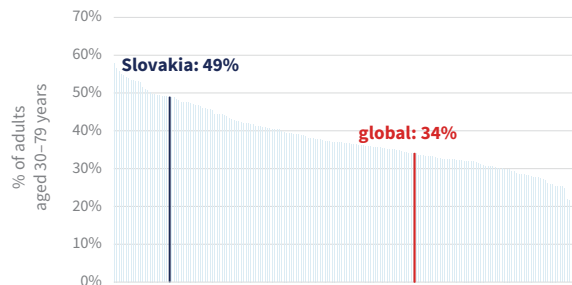
Hypertension profile

Total population (2024): 5 507 000

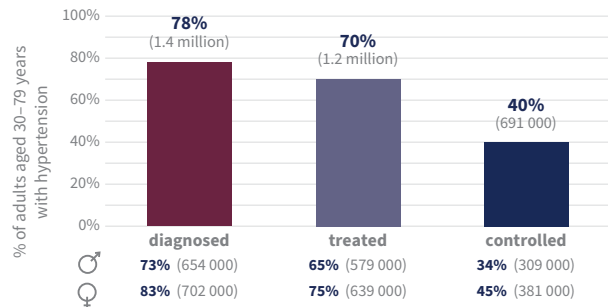
Prevalence of hypertension among adults aged 30–79 years (2024)^a

49% 52% 46%

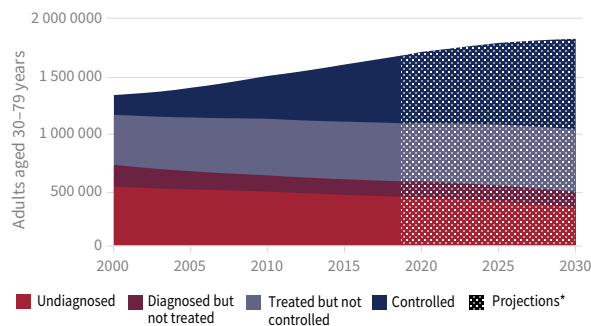
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.7 million adults aged 30–79 years with hypertension, approximately 1.1 million do not have the condition controlled^b

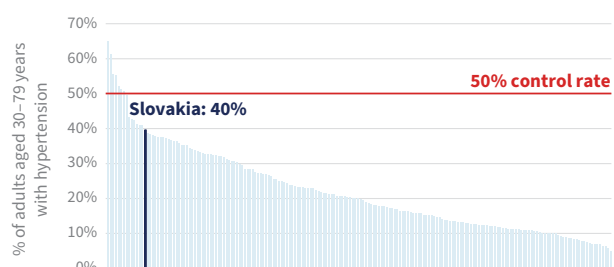


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	73 360	37 710	35 660	2021
Cardiovascular disease deaths	26 700	12 470	14 230	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	58	57	59	2021
Risk of premature death from NCDs (%) ^c	17	23	11	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	12	15	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	32	36	29	2022
Obesity, adults aged 18+ years (%)	30	33	28	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	23	22	24	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Don't know

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature death from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Slovenia

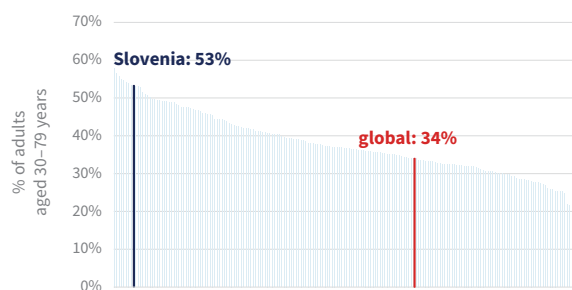
Hypertension profile

Total population (2024): 2 119 000

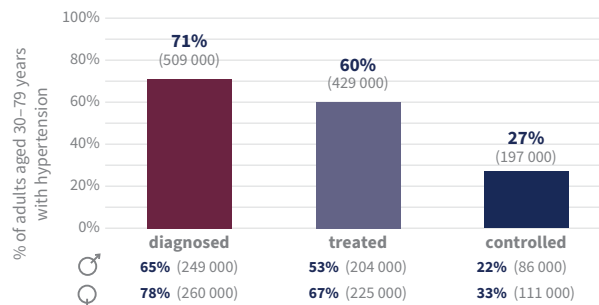
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 53% ♀ 56% 50%

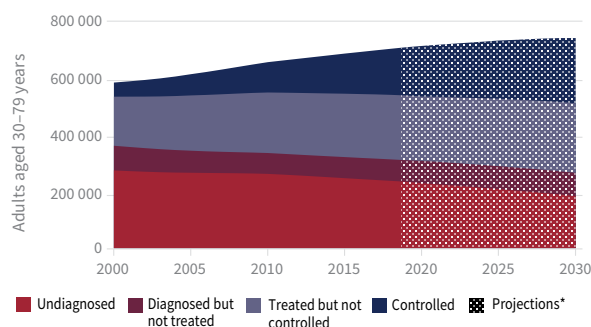
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 718 000 adults aged 30–79 years with hypertension, approximately 521 000 do not have the condition controlled^b

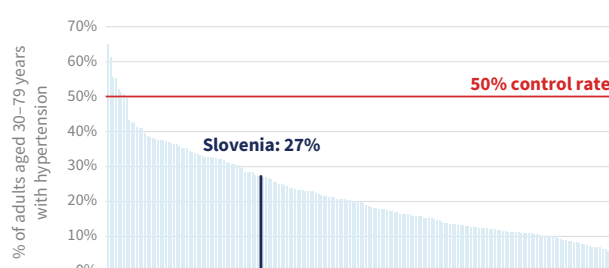


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	22 650	11 490	11 160	2021
Cardiovascular disease deaths	7040	3090	3950	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	51	50	52	2021
Risk of premature death from NCDs (%) ^c	12	15	8	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	13	15	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	20	22	19	2022
Obesity, adults aged 18+ years (%)	22	28	17	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	19	18	20	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Solomon Islands

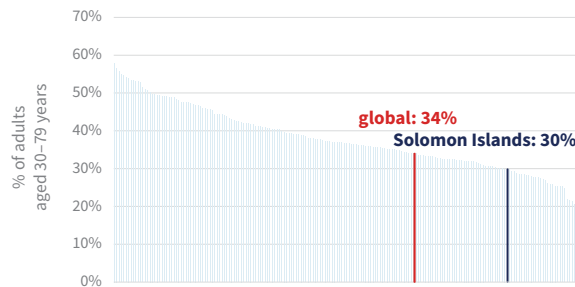
Hypertension profile

Total population (2024): 819 200

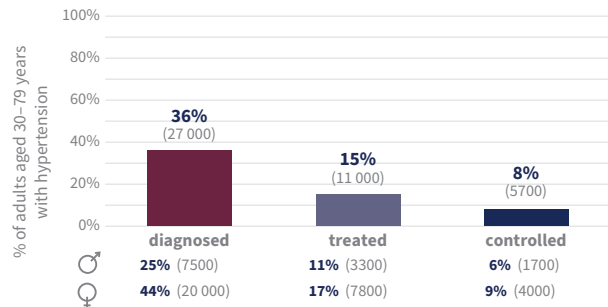
Prevalence of hypertension among adults aged 30–79 years (2024)^a

30% 24% 35%

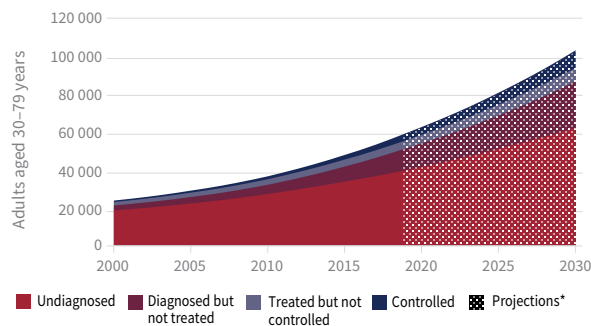
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 76 000 adults aged 30–79 years with hypertension, approximately 70 000 do not have the condition controlled^b

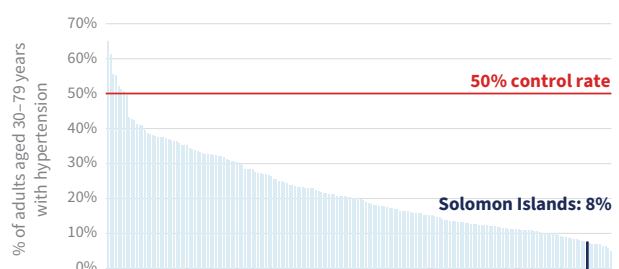


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	5810	3360	2460	2021
Cardiovascular disease deaths	2200	1260	930	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	41	37	45	2021
Risk of premature death from NCDs (%) ^c	41	45	36	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	37	54	19	2022
Obesity, adults aged 18+ years (%)	22	16	27	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	17	13	22	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Somalia

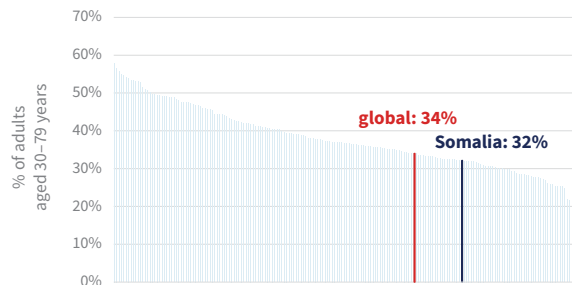
Hypertension profile

Total population (2024): 19 010 000

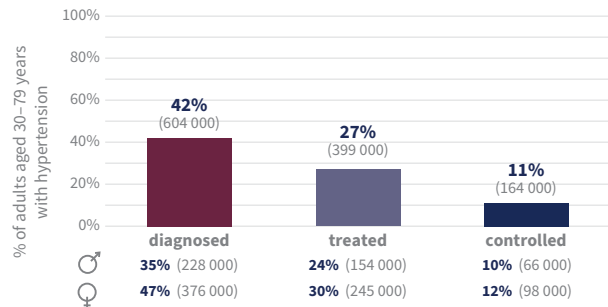
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 32% ♀ 29% 35%

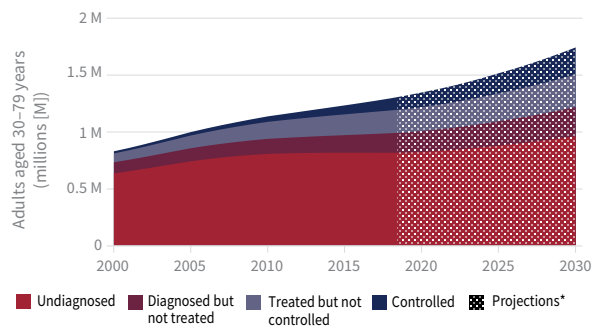
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.5 million adults aged 30–79 years with hypertension, approximately 1.3 million do not have the condition controlled^b

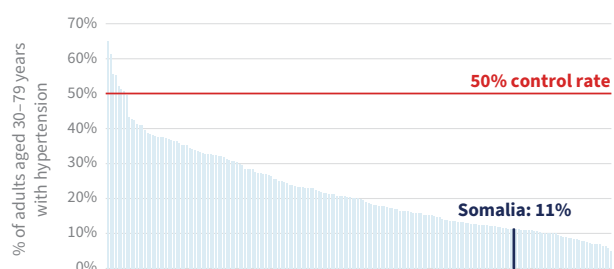


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	209 700	113 400	96 270	2021
Cardiovascular disease deaths	17 800	8300	9500	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	48	59	2021
Risk of premature death from NCDs (%) ^c	28	28	27	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	13	5	20	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	18	14	22	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

South Africa

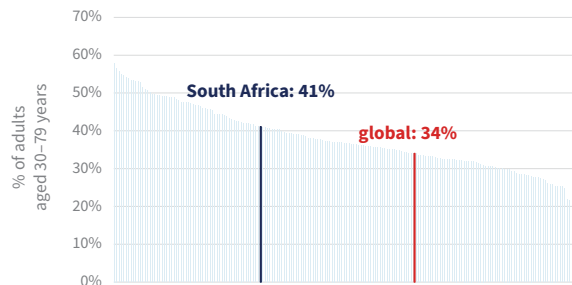
Hypertension profile

Total population (2024): 64 010 000

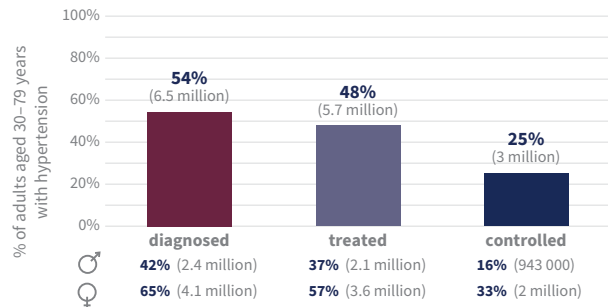
Prevalence of hypertension among adults aged 30–79 years (2024)^a

41% 41% 41%

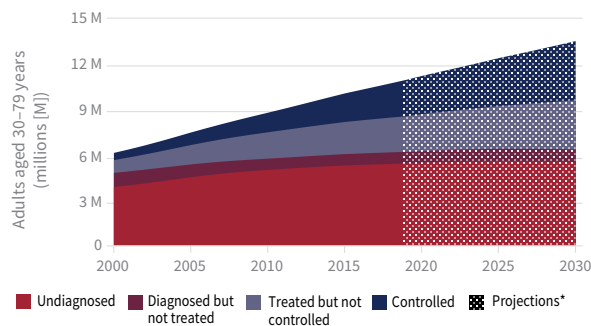
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 12 million adults aged 30–79 years with hypertension, approximately 9 million do not have the condition controlled^b

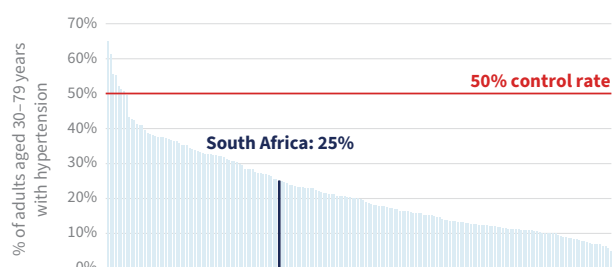


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	778 900	380 500	398 400	2021
Cardiovascular disease deaths	101 700	30 140	71 540	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	62	58	65	2021
Risk of premature death from NCDs (%) ^c	23	20	25	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	6	2021
Current tobacco use, adults aged 15+ years (%) ^d	21	35	7	2022
Obesity, adults aged 18+ years (%)	30	13	46	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	8	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	45	41	48	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

South Sudan

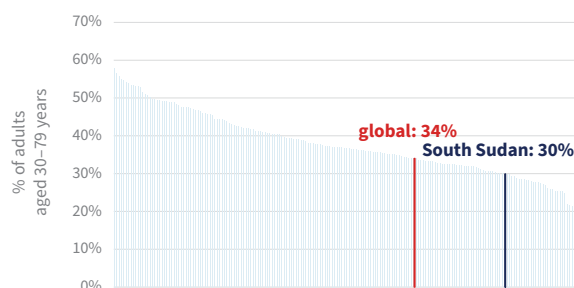
Hypertension profile

Total population (2024): 11 940 000

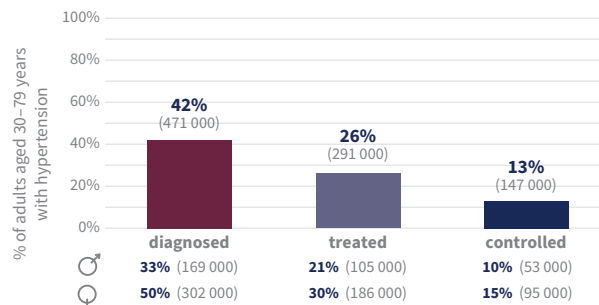
Prevalence of hypertension among adults aged 30–79 years (2024)^a

30% 28% 32%

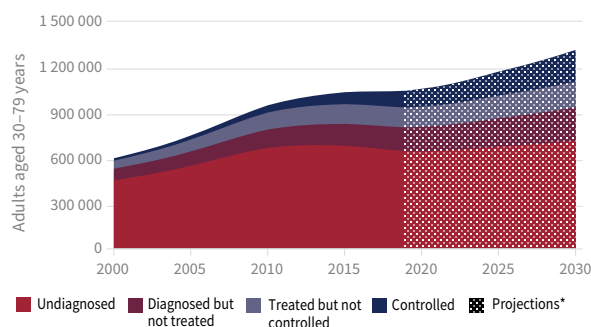
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.1 million adults aged 30–79 years with hypertension, approximately 977 000 do not have the condition controlled^b

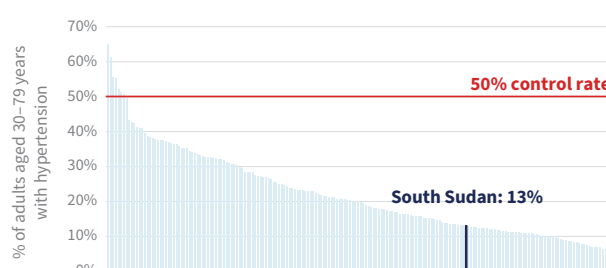


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	100 500	52 740	47 710	2021
Cardiovascular disease deaths	10 140	5160	4980	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	50	58	2021
Risk of premature death from NCDs (%) ^c	22	26	20	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	8	5	11	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	16	13	19	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature death from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Spain

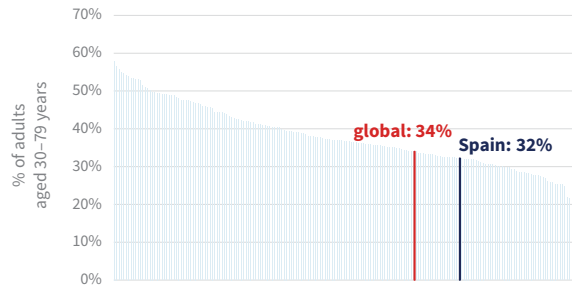
Hypertension profile

Total population (2024): 47 910 000

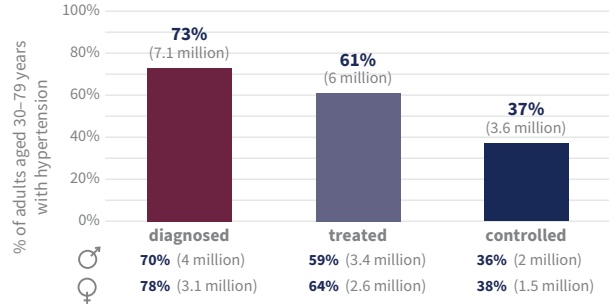
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 32% ♀ 38% ♀ 26%

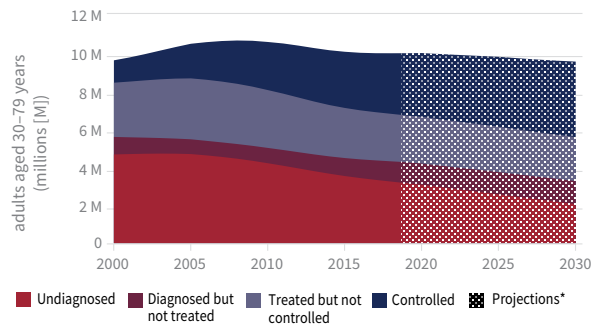
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 9.8 million adults aged 30–79 years with hypertension, approximately 6.2 million do not have the condition controlled^b

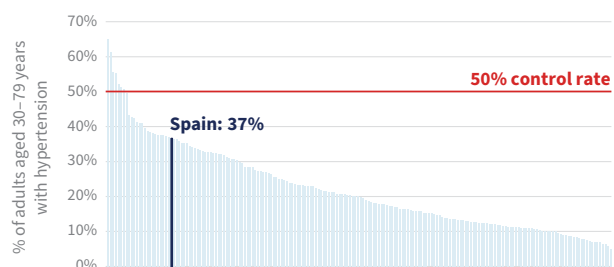


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	451 700	231 800	219 900	2021
Cardiovascular disease deaths	118 400	55 430	62 980	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	44	44	45	2021
Risk of premature death from NCDs (%) ^c	9	12	6	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	28	29	28	2022
Obesity, adults aged 18+ years (%)	19	22	17	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	22	19	24	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Sri Lanka

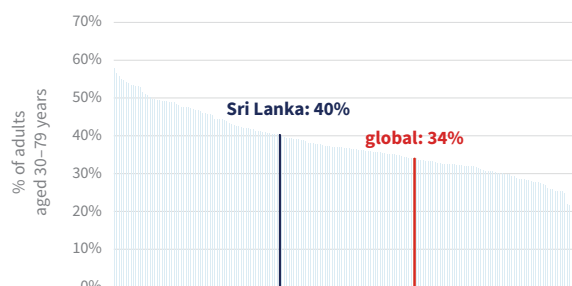
Hypertension profile

Total population (2024): 23 100 000

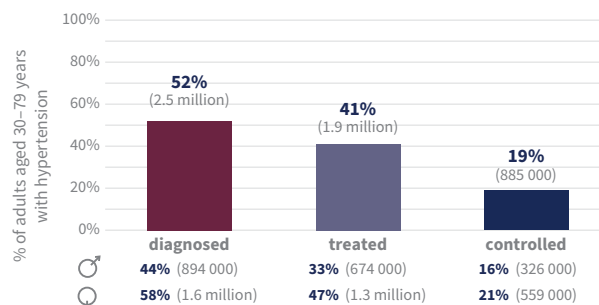
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 40% ♀ 43%

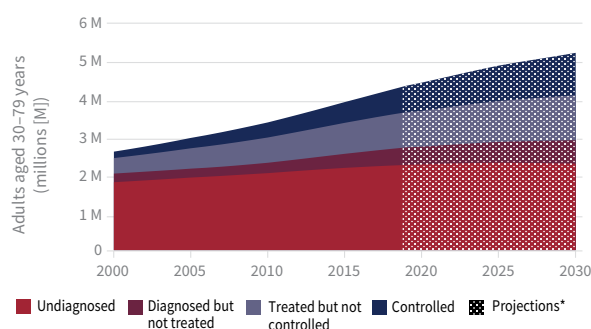
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 4.7 million adults aged 30–79 years with hypertension, approximately 3.8 million do not have the condition controlled^b

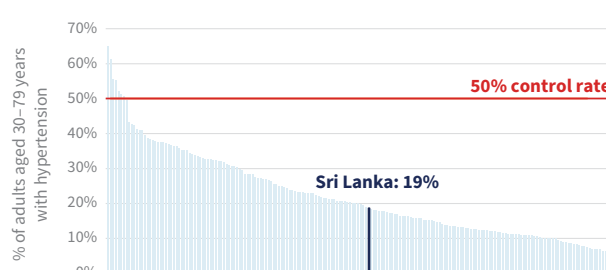


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	148 900	79 580	69 320	2021
Cardiovascular disease deaths	51 430	25 200	26 220	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	58	61	2021
Risk of premature death from NCDs (%) ^c	14	17	11	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	10	2021
Current tobacco use, adults aged 15+ years (%)	20	37	2	2022
Obesity, adults aged 18+ years (%)	11	7	14	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	37	29	45	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Sudan

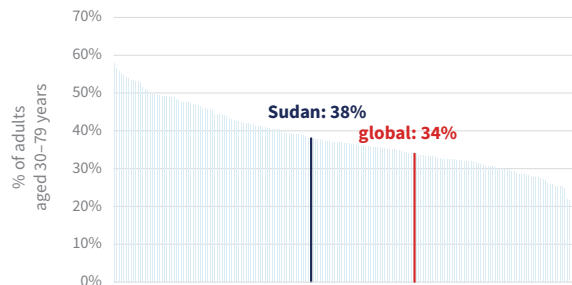
Hypertension profile

Total population (2024): 50 450 000

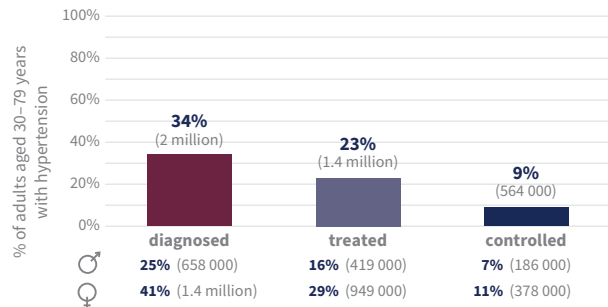
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 38% ♀ 41%

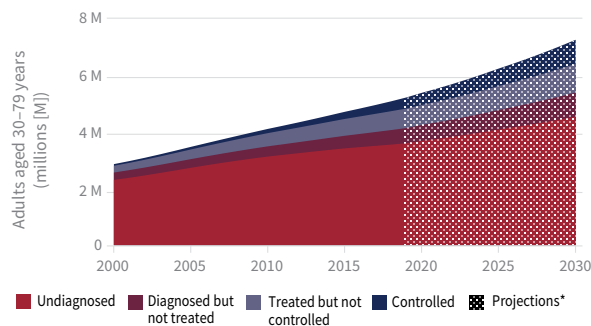
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 6 million adults aged 30–79 years with hypertension, approximately 5.4 million do not have the condition controlled^b

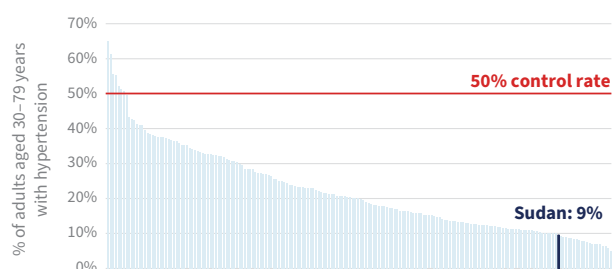


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	276 800	150 300	126 500	2021
Cardiovascular disease deaths	68 110	32 240	35 870	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	61	59	63	2021
Risk of premature death from NCDs (%) ^c	21	20	22	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	16	10	20	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	19	17	21	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Suriname

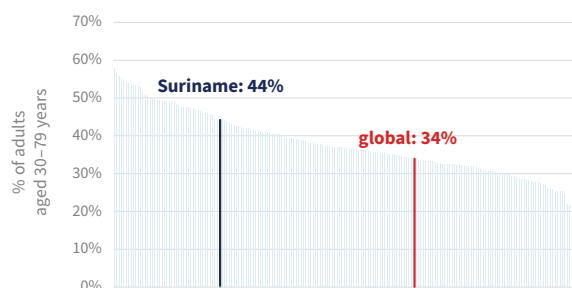
Hypertension profile

Total population (2024): 634 400

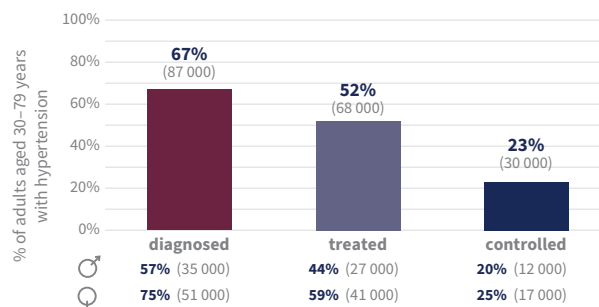
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 44% ♂ 43% ♀ 46%

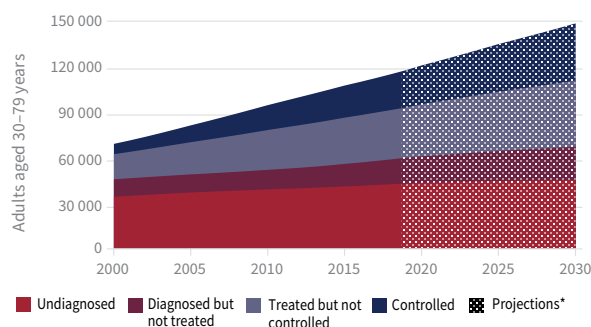
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 130 000 adults aged 30–79 years with hypertension, approximately 100 000 do not have the condition controlled^b

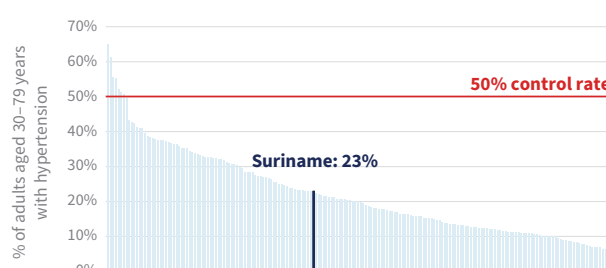


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	5190	2850	2340	2021
Cardiovascular disease deaths	990	430	560	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	48	48	48	2021
Risk of premature death from NCDs (%) ^c	19	19	19	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	29	19	39	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	49	42	55	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature death from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Sweden

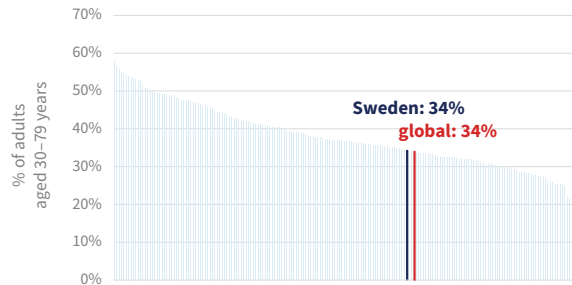
Hypertension profile

Total population (2024): 10 610 000

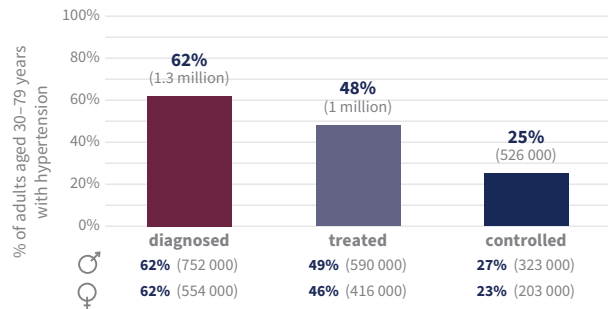
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 34% ♀ 29%

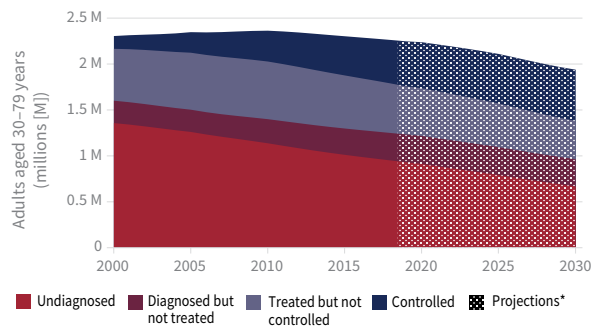
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.1 million adults aged 30–79 years with hypertension, approximately 1.6 million do not have the condition controlled^b

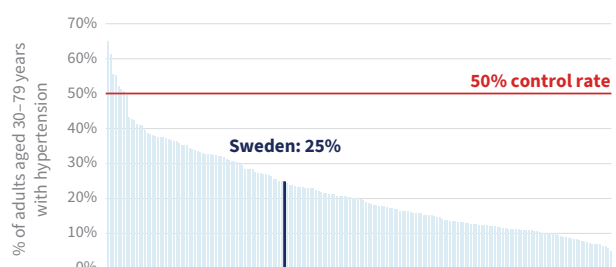


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	92 120	46 590	45 520	2021
Cardiovascular disease deaths	27 790	14 010	13 780	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	49	48	50	2021
Risk of premature death from NCDs (%) ^c	8	9	7	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	9	7	2021
Current tobacco use, adults aged 15+ years (%)	23	29	16	2022
Obesity, adults aged 18+ years (%)	16	18	15	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	10	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	9	9	8	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Don't know

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Switzerland

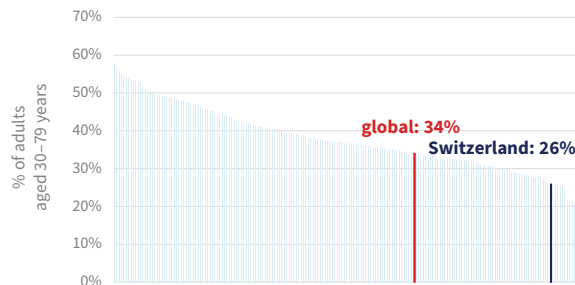
Hypertension profile

Total population (2024): 8 922 000

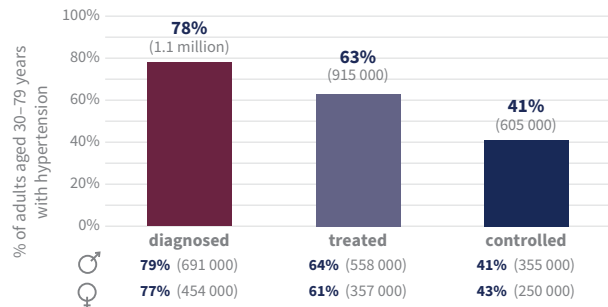
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 26% ♂ 31% ♀ 21%

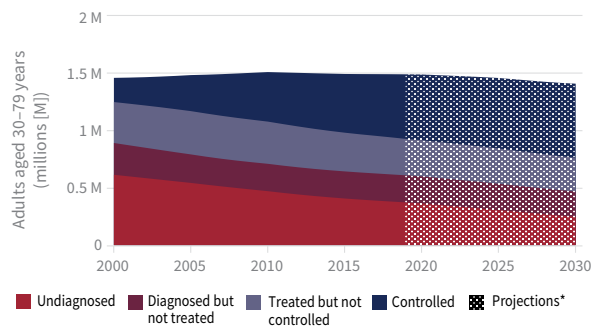
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.5 million adults aged 30–79 years with hypertension, approximately 855 000 do not have the condition controlled^b

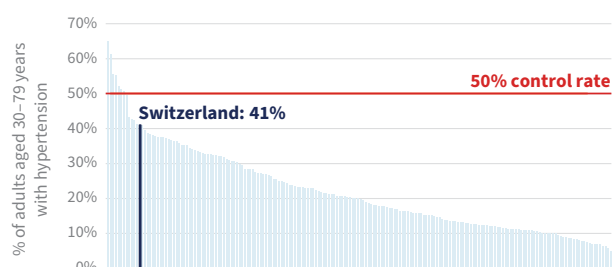


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	71 490	35 280	36 210	2021
Cardiovascular disease deaths	20 470	9530	10 940	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	46	45	47	2021
Risk of premature death from NCDs (%) ^c	8	9	6	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	10	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	26	28	23	2022
Obesity, adults aged 18+ years (%)	14	17	11	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	9	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	19	18	20	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Syrian Arab Republic

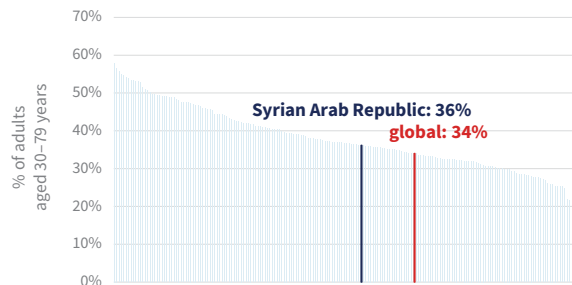
Hypertension profile

Total population (2024): 24 670 000

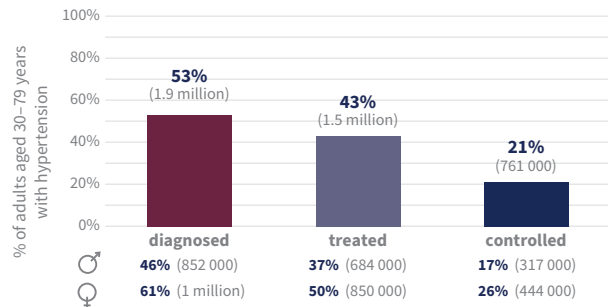
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 36% ♀ 39% ♀ 34%

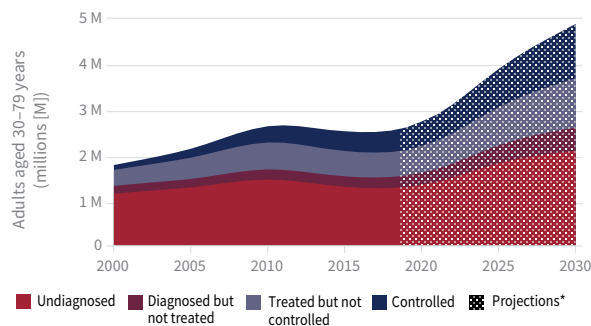
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 3.6 million adults aged 30–79 years with hypertension, approximately 2.8 million do not have the condition controlled^b

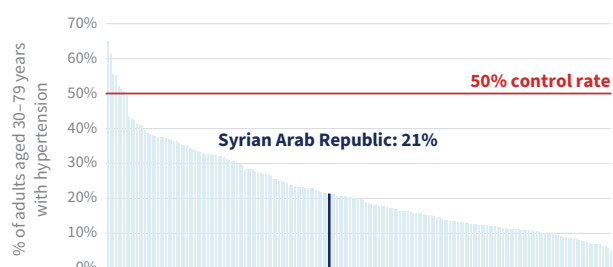


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	109 000	56 020	52 950	2021
Cardiovascular disease deaths	46 960	21 900	25 060	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	53	55	2021
Risk of premature death from NCDs (%) ^c	21	25	18	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	31	24	38	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	38	33	42	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Tajikistan

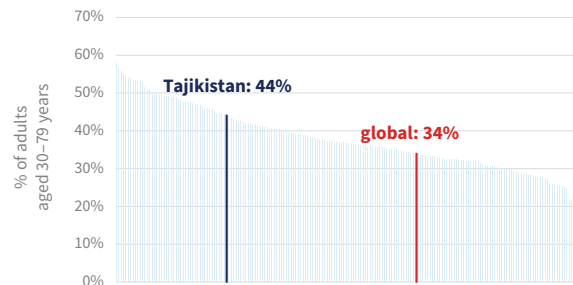
Hypertension profile

Total population (2024): 10 590 000

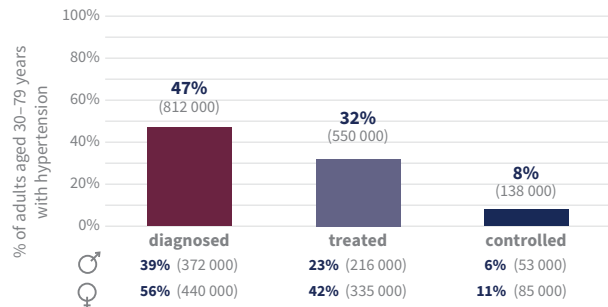
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 44% ♂ 49% ♀ 39%

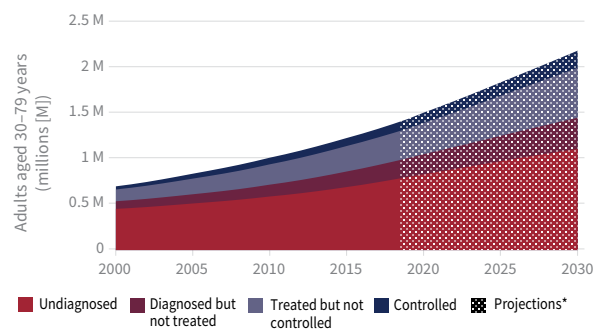
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.7 million adults aged 30–79 years with hypertension, approximately 1.6 million do not have the condition controlled^b

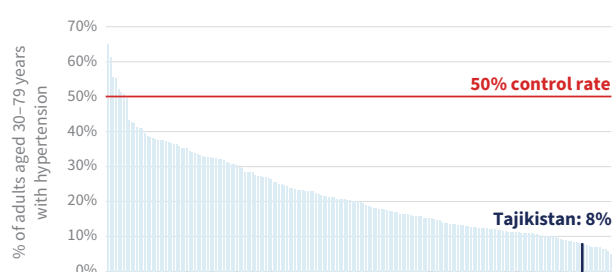


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	44 790	23 570	21 220	2021
Cardiovascular disease deaths	14 630	6530	8090	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	58	61	2021
Risk of premature death from NCDs (%) ^c	18	19	17	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	7	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	21	18	24	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	36	26	45	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature death from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Thailand

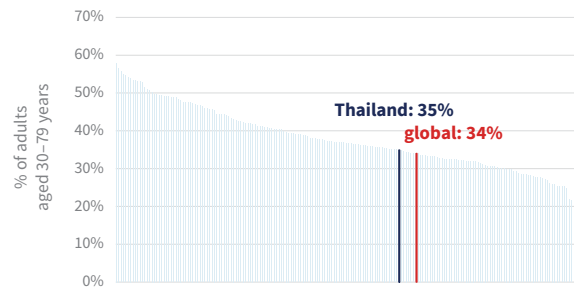
Hypertension profile

Total population (2024): 71 670 000

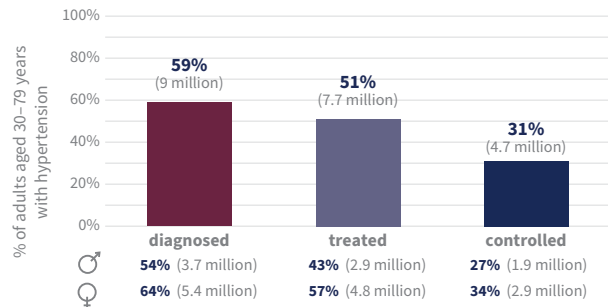
Prevalence of hypertension among adults aged 30–79 years (2024)^a

35% 33% 37%

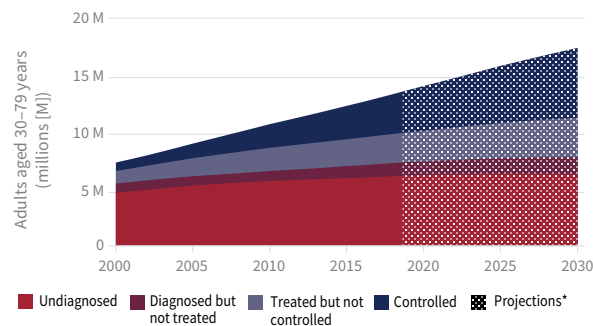
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 15.2 million adults aged 30–79 years with hypertension, approximately 10.5 million do not have the condition controlled^b

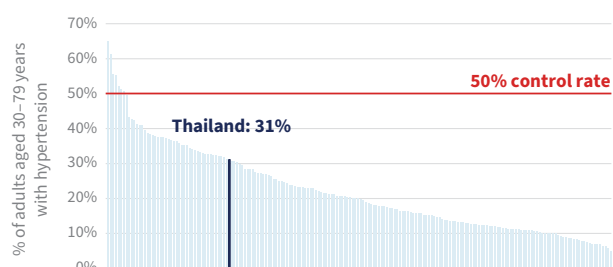


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	633 200	342 800	290 500	2021
Cardiovascular disease deaths	134 700	66 630	68 080	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	47	47	47	2021
Risk of premature death from NCDs (%) ^c	15	18	11	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	10	2021
Current tobacco use, adults aged 15+ years (%) ^d	19	37	2	2022
Obesity, adults aged 18+ years (%)	15	11	18	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	8	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	29	28	29	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Timor-Leste

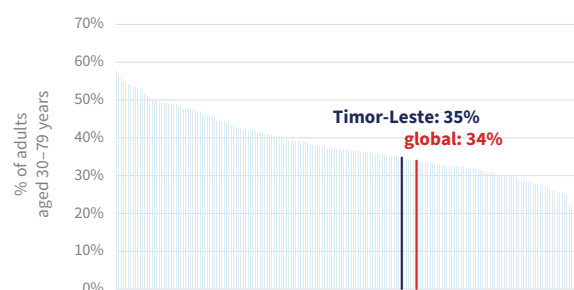
Hypertension profile

Total population (2024): 1 401 000

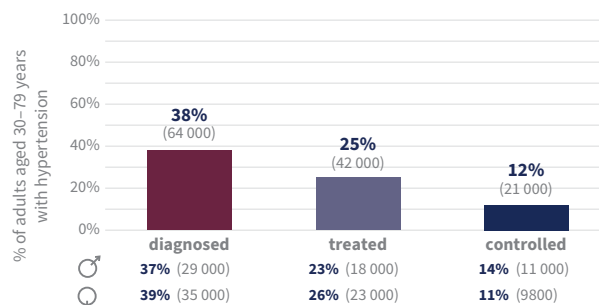
Prevalence of hypertension among adults aged 30–79 years (2024)^a

35% 33% 37%

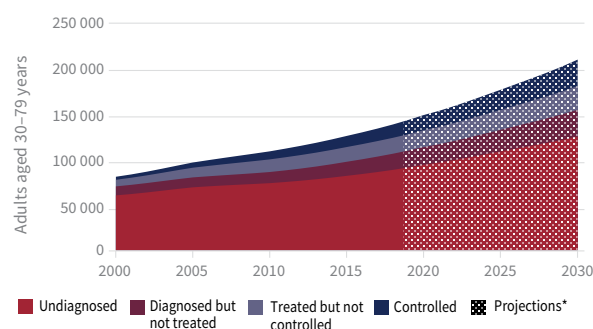
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 168 000 adults aged 30–79 years with hypertension, approximately 148 000 do not have the condition controlled^b

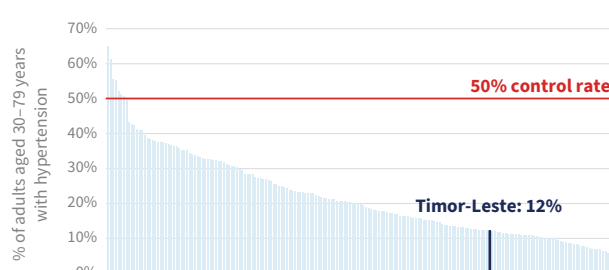


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	9330	4960	4370	2021
Cardiovascular disease deaths	2560	1230	1330	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	60	60	59	2021
Risk of premature death from NCDs (%) ^c	20	21	20	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	10	2021
Current tobacco use, adults aged 15+ years (%)	39	67	11	2022
Obesity, adults aged 18+ years (%)	2	2	3	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	27	21	33	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature death from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Togo

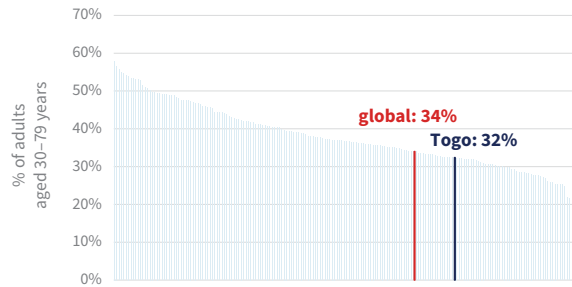
Hypertension profile

Total population (2024): 9 515 000

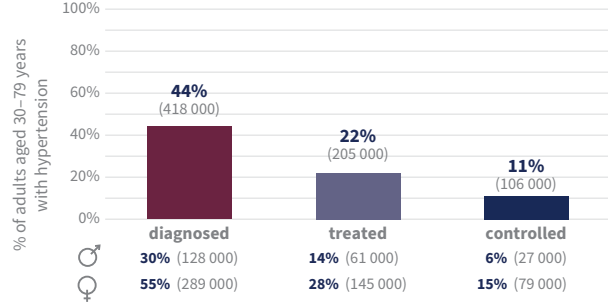
Prevalence of hypertension among adults aged 30–79 years (2024)^a

32% 30% 35%

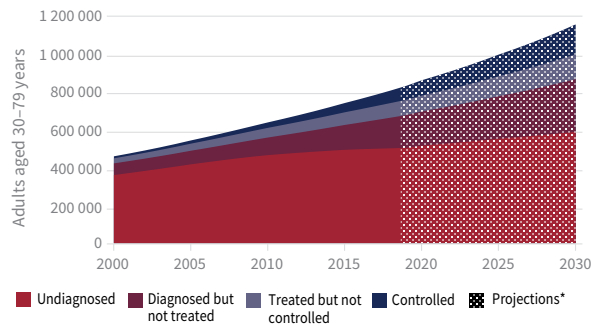
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 954 000 adults aged 30–79 years with hypertension, approximately 849 000 do not have the condition controlled^b

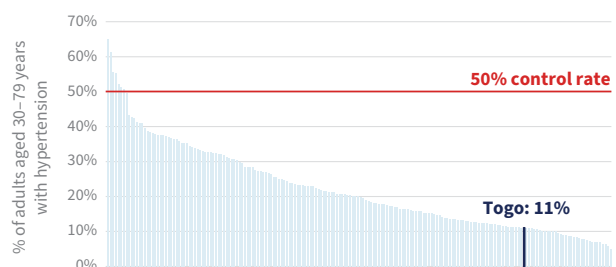


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	63 230	35 640	27 590	2021
Cardiovascular disease deaths	12 320	6660	5660	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	60	56	63	2021
Risk of premature death from NCDs (%) ^c	25	28	23	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	7	2021
Current tobacco use, adults aged 15+ years (%)	6	12	1	2022
Obesity, adults aged 18+ years (%)	10	5	16	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	15	12	17	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Tonga

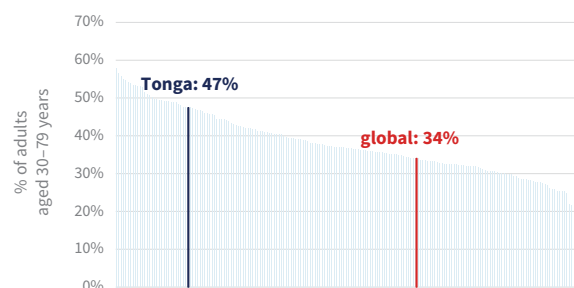
Hypertension profile

Total population (2024): 104 200

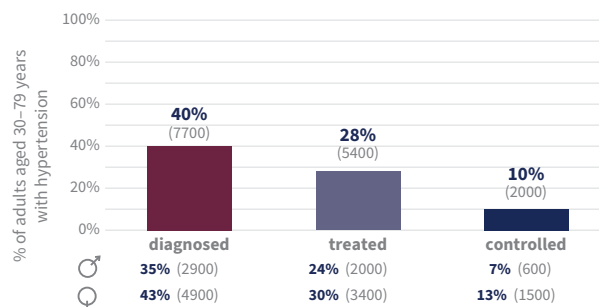
Prevalence of hypertension among adults aged 30–79 years (2024)^a

47% 42% 52%

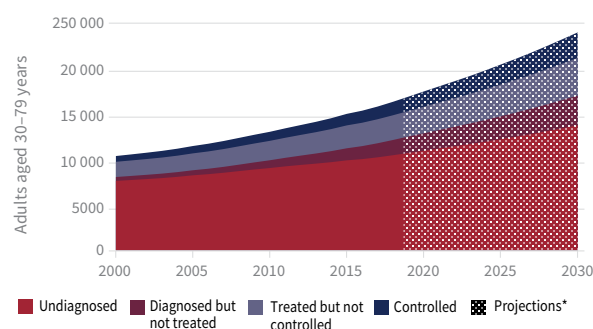
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 20 000 adults aged 30–79 years with hypertension, approximately 17 000 do not have the condition controlled^b

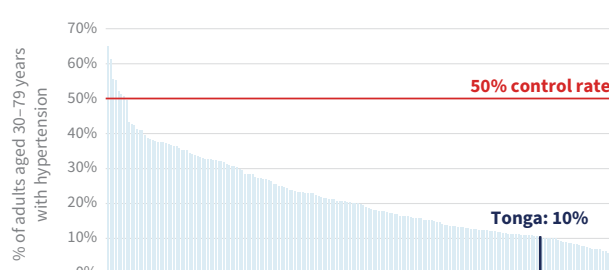


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	660	350	310	2021
Cardiovascular disease deaths	190	110	80	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	53	52	53	2021
Risk of premature death from NCDs (%) ^c	27	31	23	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	31	47	16	2022
Obesity, adults aged 18+ years (%)	71	61	79	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	31	23	38	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature death from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Trinidad and Tobago

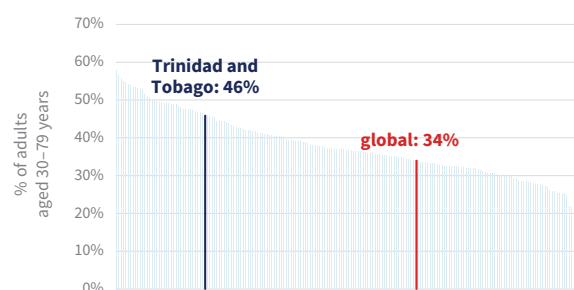
Hypertension profile

Total population (2024): 1 508 000

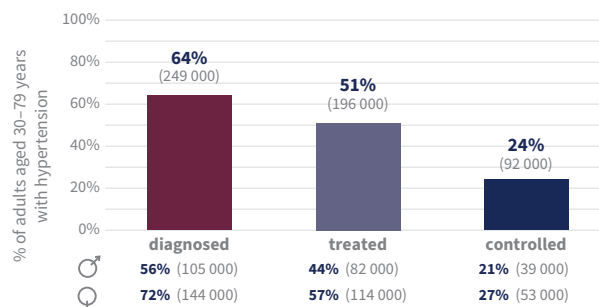
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 46% ♀ 45% ♀ 46%

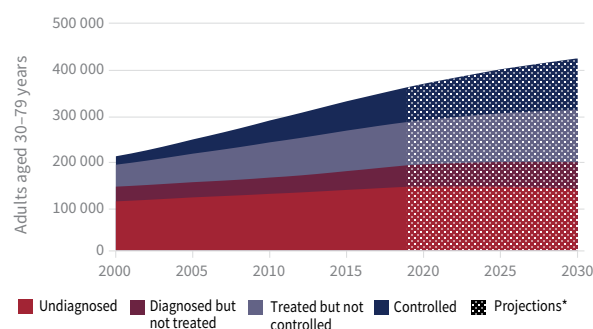
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 387 000 adults aged 30–79 years with hypertension, approximately 295 000 do not have the condition controlled^b

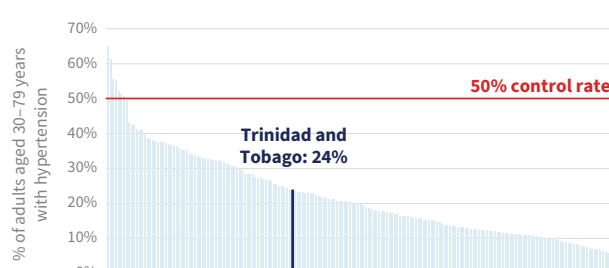


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	13 570	7600	5970	2021
Cardiovascular disease deaths	3130	1650	1480	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	62	50	2021
Risk of premature death from NCDs (%) ^c	20	24	17	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	29	23	35	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	45	35	54	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Tunisia

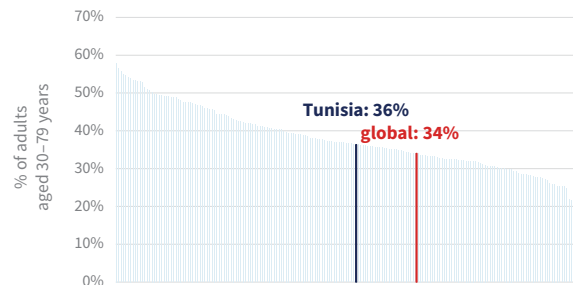
Hypertension profile

Total population (2024): 12 280 000

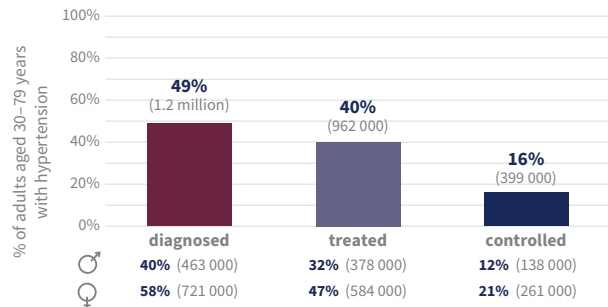
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 36% ♀ 36%

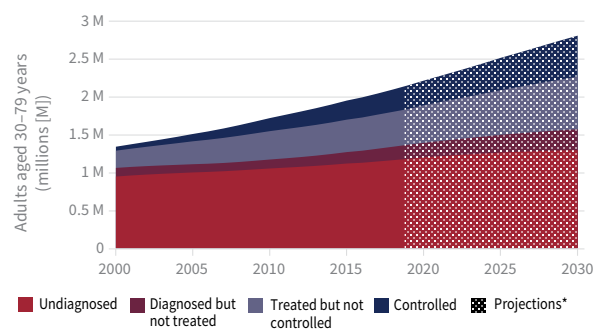
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.4 million adults aged 30–79 years with hypertension, approximately 2 million do not have the condition controlled^b

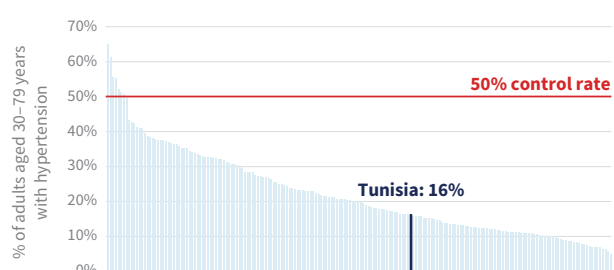


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	89 090	50 380	38 710	2021
Cardiovascular disease deaths	26 710	12 630	14 080	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	52	51	55	2021
Risk of premature death from NCDs (%) ^c	13	15	11	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%) ^d	21	40	2	2022
Obesity, adults aged 18+ years (%)	28	20	36	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	33	29	38	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Türkiye

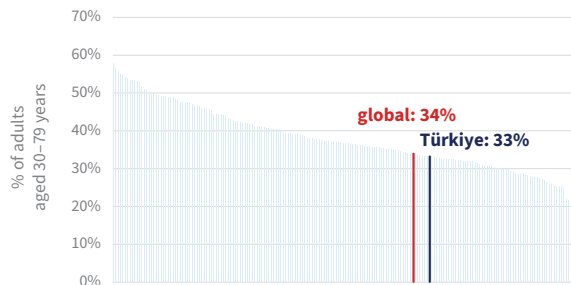
Hypertension profile

Total population (2024): 87 470 000

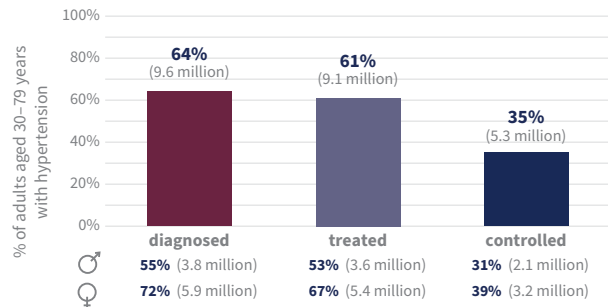
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 33% ♂ 31% ♀ 35%

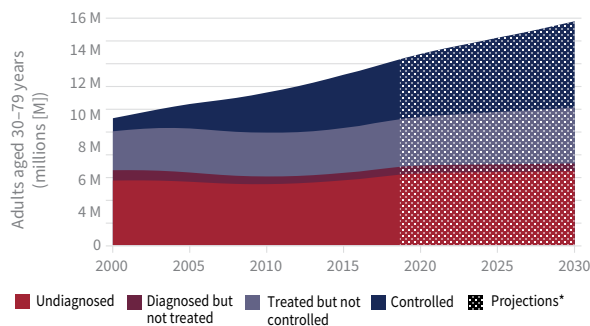
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 15 million adults aged 30–79 years with hypertension, approximately 9.7 million do not have the condition controlled^b

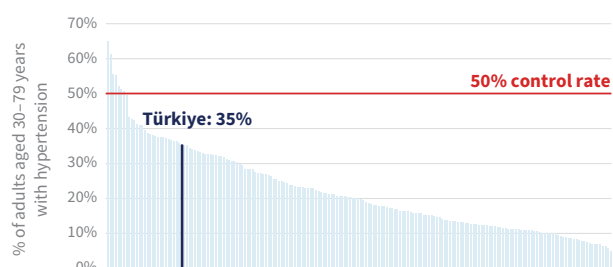


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	664 900	355 100	309 800	2021
Cardiovascular disease deaths	193 300	87 030	106 300	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	52	57	2021
Risk of premature death from NCDs (%) ^c	15	21	10	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	5	6	4	2021
Current tobacco use, adults aged 15+ years (%)	31	41	20	2022
Obesity, adults aged 18+ years (%)	34	26	43	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	44	35	53	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Turkmenistan

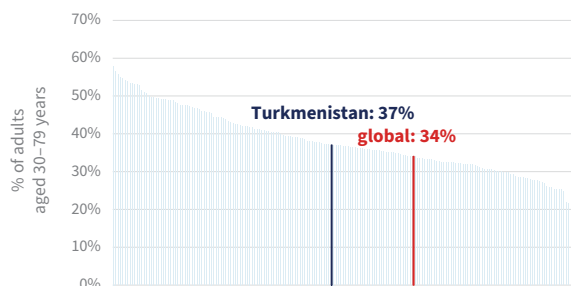
Hypertension profile

Total population (2024): 7 494 000

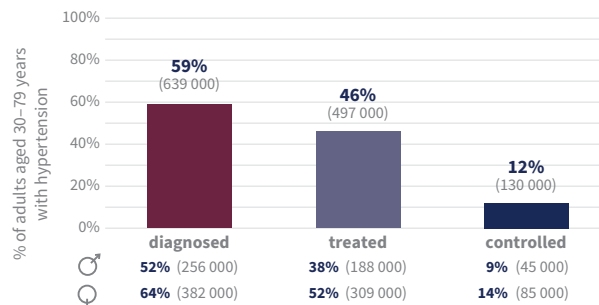
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 37% ♀ 35% ♀ 39%

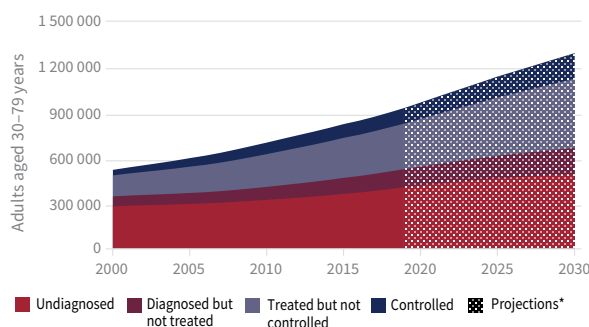
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.1 million adults aged 30–79 years with hypertension, approximately 955 000 do not have the condition controlled^b

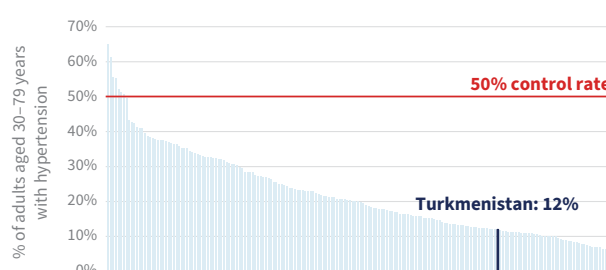


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	42 900	22 890	20 010	2021
Cardiovascular disease deaths	16 660	7790	8870	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	58	56	60	2021
Risk of premature death from NCDs (%) ^c	26	31	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	7	2021
Current tobacco use, adults aged 15+ years (%)	6	11	1	2022
Obesity, adults aged 18+ years (%)	20	17	23	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	3	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	12	11	13	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Tuvalu

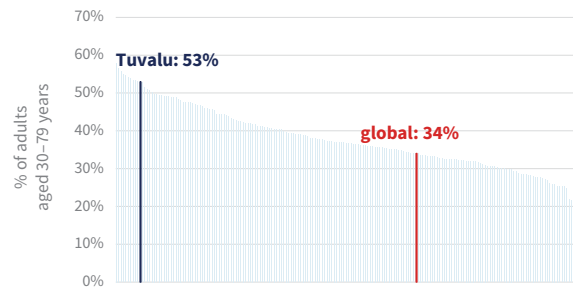
Hypertension profile

Total population (2024): 9650

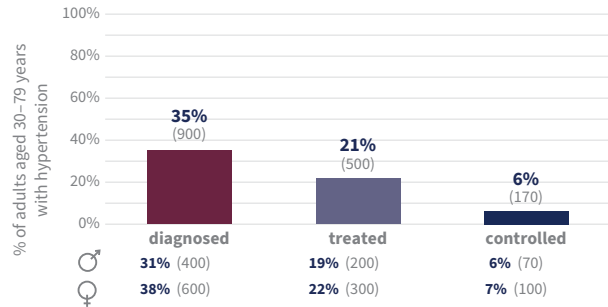
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 53% ♂ 50% ♀ 55%

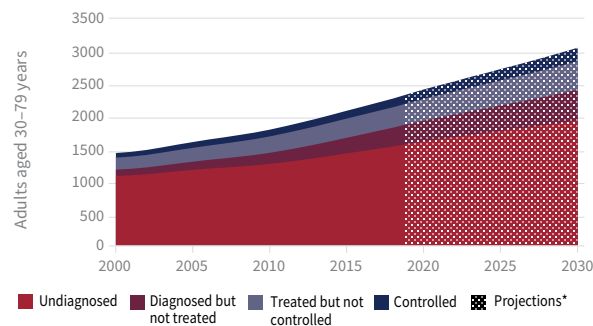
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2600 adults aged 30–79 years with hypertension, approximately 2500 do not have the condition controlled^b

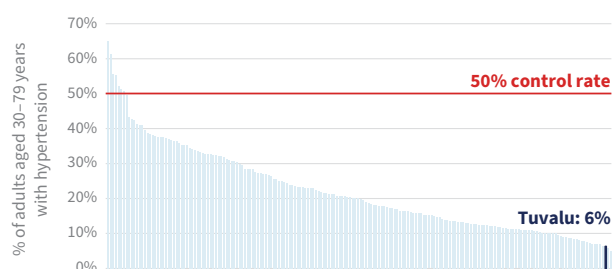


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	no data	no data	no data	2021
Cardiovascular disease deaths	no data	no data	no data	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	52	51	53	2021
Risk of premature death from NCDs (%) ^c	no data	no data	no data	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%) ^d	34	48	19	2022
Obesity, adults aged 18+ years (%)	64	57	71	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	24	16	33	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Don't know

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Uganda

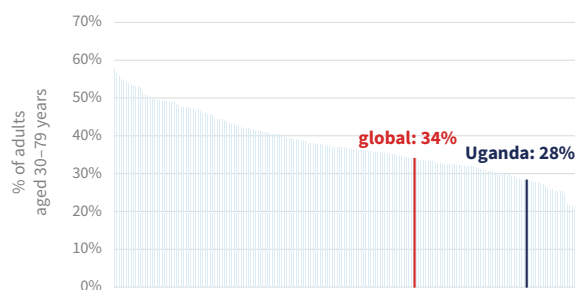
Hypertension profile

Total population (2024): 50 020 000

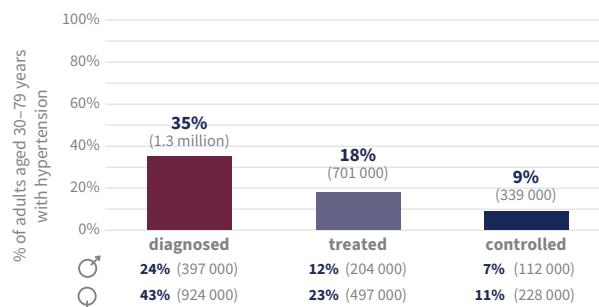
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 28% ♀ 30%

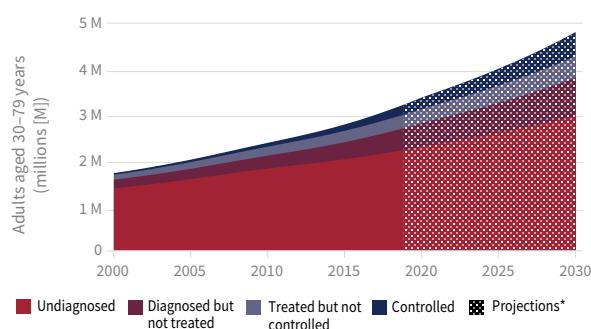
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 3.8 million adults aged 30–79 years with hypertension, approximately 3.5 million do not have the condition controlled^b

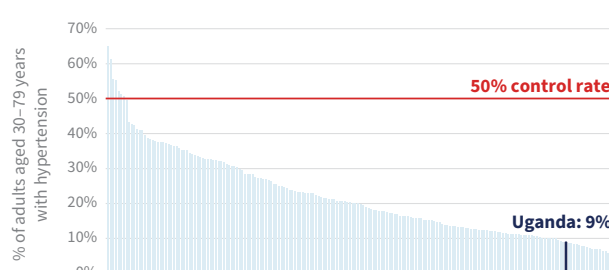


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	251 600	136 900	114 700	2021
Cardiovascular disease deaths	28 300	14 150	14 150	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	56	50	62	2021
Risk of premature death from NCDs (%) ^c	22	25	19	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	8	12	3	2022
Obesity, adults aged 18+ years (%)	7	4	10	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	6	6	5	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature death from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Ukraine

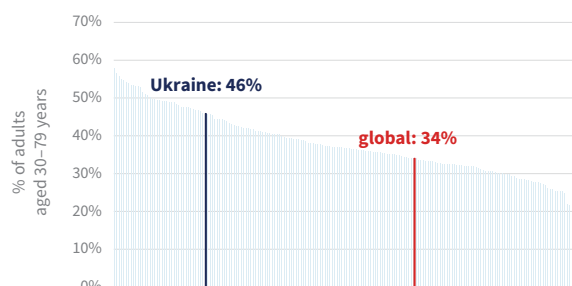
Hypertension profile

Total population (2024): 37 860 000

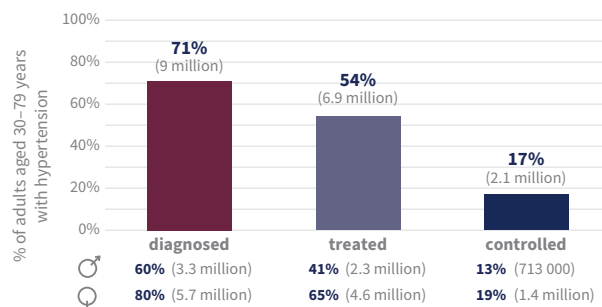
Prevalence of hypertension among adults aged 30–79 years (2024)^a

46% 44% 47%

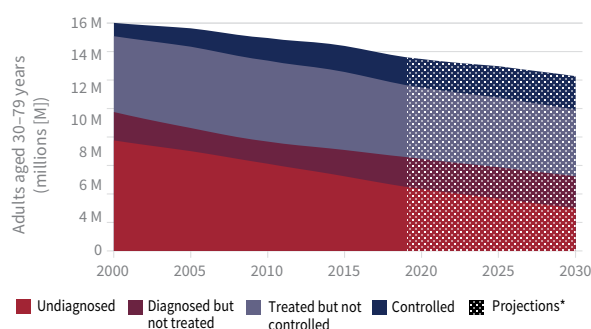
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 12.7 million adults aged 30–79 years with hypertension, approximately 10.6 million do not have the condition controlled^b

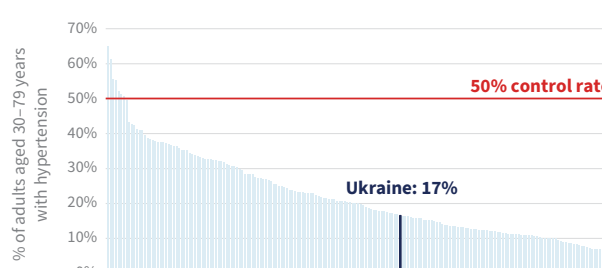


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	771 700	369 800	401 900	2021
Cardiovascular disease deaths	407 500	173 700	233 800	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	57	55	59	2021
Risk of premature death from NCDs (%) ^c	25	35	17	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%)	25	38	12	2022
Obesity, adults aged 18+ years (%)	29	23	34	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	7	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	13	13	13	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

United Arab Emirates

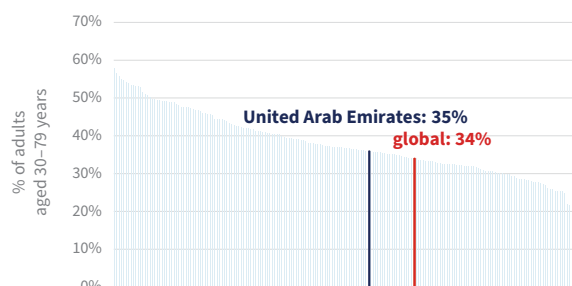
Hypertension profile

Total population (2024): 11 030 000

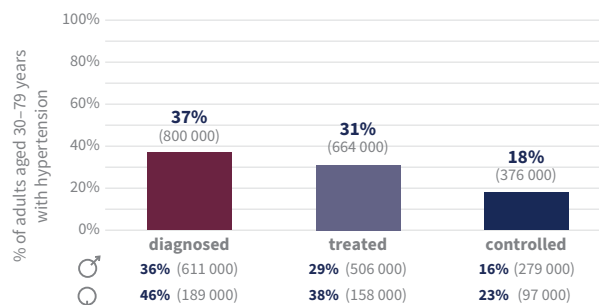
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 35% ♂ 39% ♀ 25%

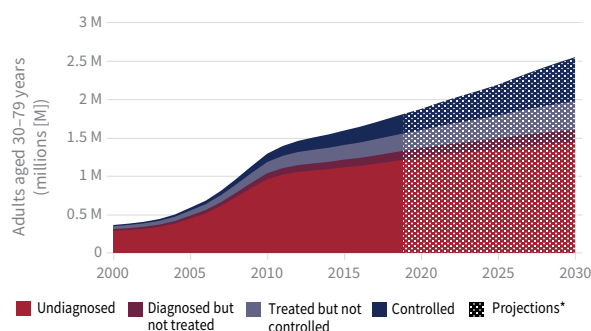
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.1 million adults aged 30–79 years with hypertension, approximately 1.8 million do not have the condition controlled^b

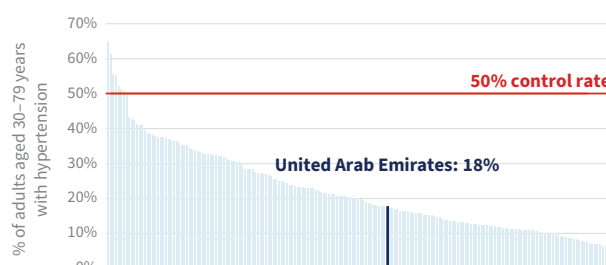


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	14 230	9850	4380	2021
Cardiovascular disease deaths	4430	3340	1100	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	50	48	53	2021
Risk of premature death from NCDs (%) ^c	12	13	9	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	5	2021
Current tobacco use, adults aged 15+ years (%) ^d	9	15	3	2022
Obesity, adults aged 18+ years (%)	32	29	38	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	1	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	66	63	74	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

United Kingdom of Great Britain and Northern Ireland

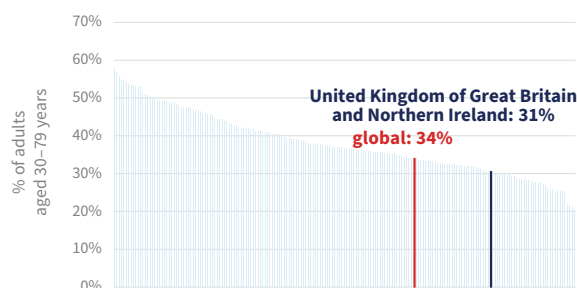
Hypertension profile

Total population (2024): 69 140 000

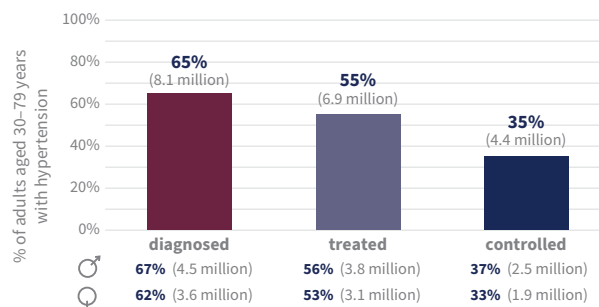
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 31% ♀ 34% 28%

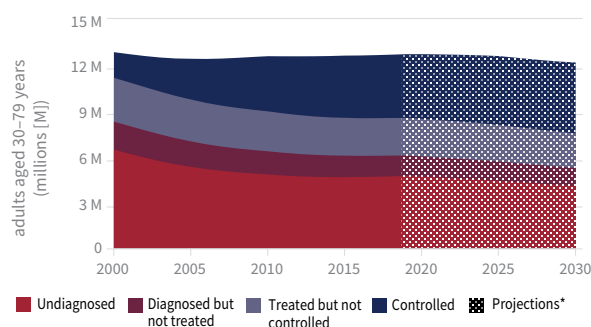
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 12.6 million adults aged 30–79 years with hypertension, approximately 8.1 million do not have the condition controlled^b

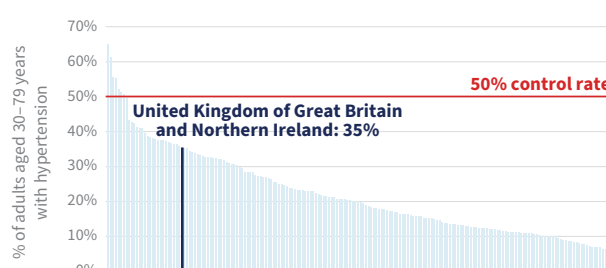


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	689 700	345 800	343 900	2021
Cardiovascular disease deaths	147 500	77 870	69 640	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	41	41	41	2021
Risk of premature death from NCDs (%) ^c	11	13	9	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	6	2021
Current tobacco use, adults aged 15+ years (%) ^d	14	16	12	2022
Obesity, adults aged 18+ years (%)	29	28	29	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	19	18	20	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

d. Tobacco use estimates are not available. Tobacco smoking estimates are substituted for missing tobacco use estimates.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

United Republic of Tanzania

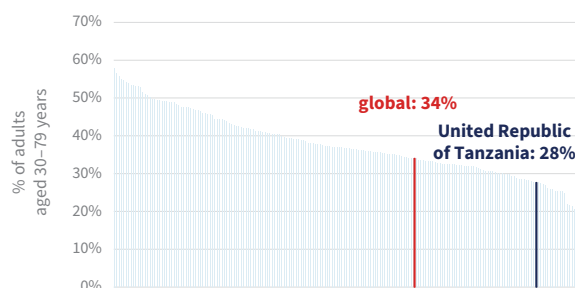
Hypertension profile

Total population (2024): 68 560 000

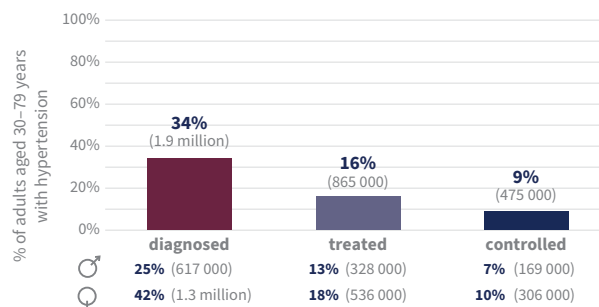
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 28% ♀ 25% 30%

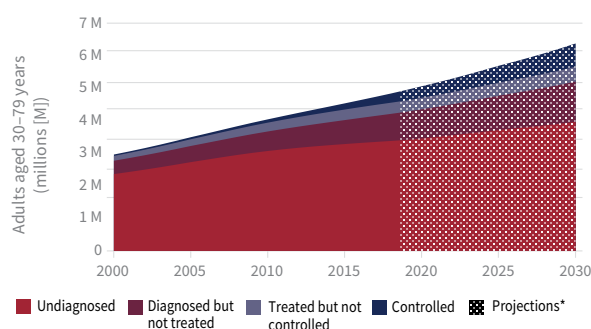
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 5.5 million adults aged 30–79 years with hypertension, approximately 5 million do not have the condition controlled^b

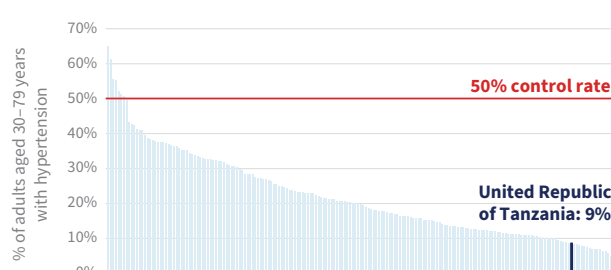


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	370 400	188 600	181 800	2021
Cardiovascular disease deaths	53 150	25 650	27 510	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	55	50	60	2021
Risk of premature death from NCDs (%) ^c	19	20	18	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	8	8	2021
Current tobacco use, adults aged 15+ years (%)	9	15	3	2022
Obesity, adults aged 18+ years (%)	11	6	17	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	4	5	4	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

United States of America

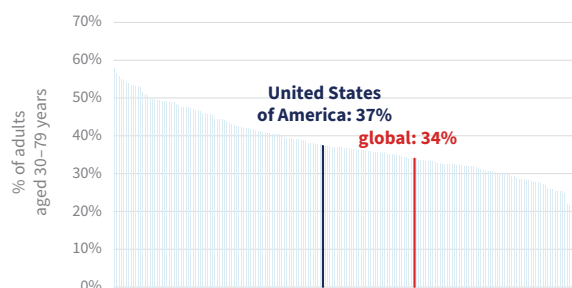
Hypertension profile

Total population (2024): 345 400 000

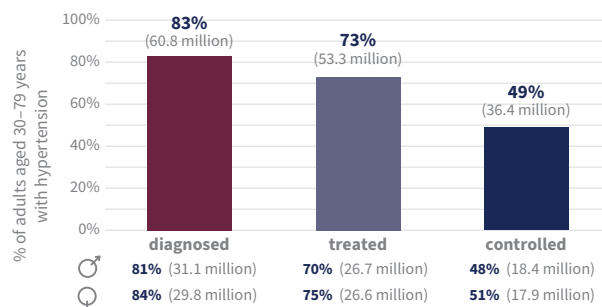
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 37% ♀ 39% 35%

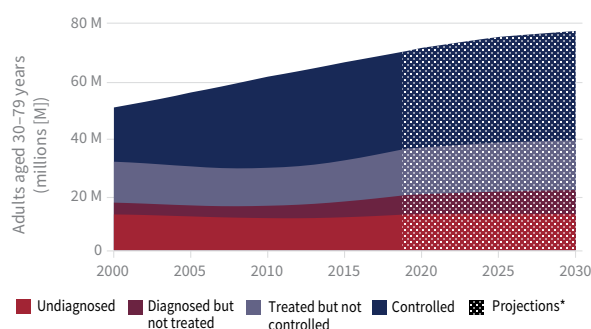
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 73.5 million adults aged 30–79 years with hypertension, approximately 37.1 million do not have the condition controlled^b

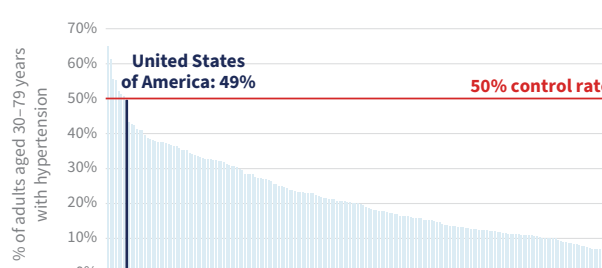


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	3 447 000	1 840 000	1 607 000	2021
Cardiovascular disease deaths	911 700	483 700	428 000	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	46	43	49	2021
Risk of premature death from NCDs (%) ^c	14	16	11	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	8	2021
Current tobacco use, adults aged 15+ years (%)	24	30	19	2022
Obesity, adults aged 18+ years (%)	43	42	44	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	10	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	34	28	40	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Don't know

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Uruguay

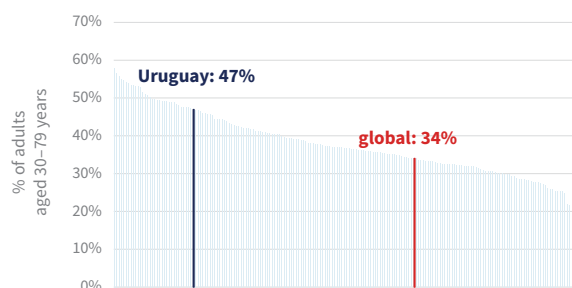
Hypertension profile

Total population (2024): 3 387 000

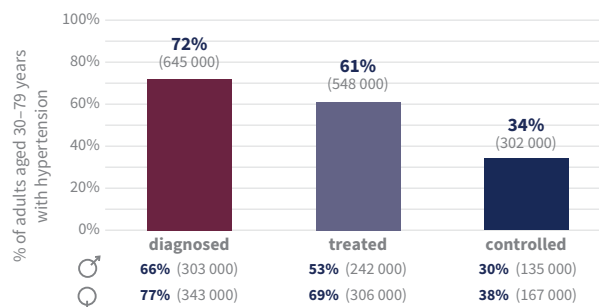
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 47% ♀ 49% 45%

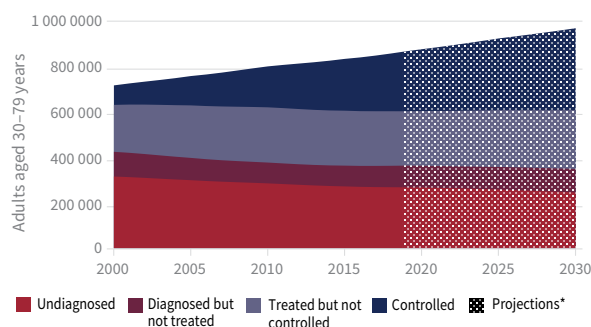
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 902 000 adults aged 30–79 years with hypertension, approximately 599 000 do not have the condition controlled^b

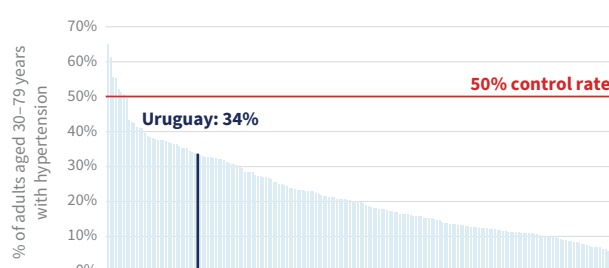


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality

	both sexes	males	females	year
Total deaths	40 760	20 830	19 930	2021
Cardiovascular disease deaths	9020	4320	4700	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	50	48	52	2021
Risk of premature death from NCDs (%) ^c	17	21	14	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	8	2021
Current tobacco use, adults aged 15+ years (%)	21	23	18	2022
Obesity, adults aged 18+ years (%)	35	31	38	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	6	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	34	31	37	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Uzbekistan

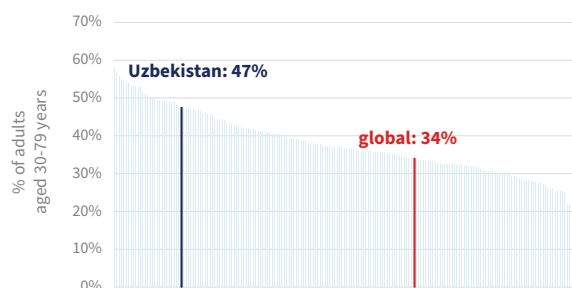
Hypertension profile

Total population (2024): 36 360 000

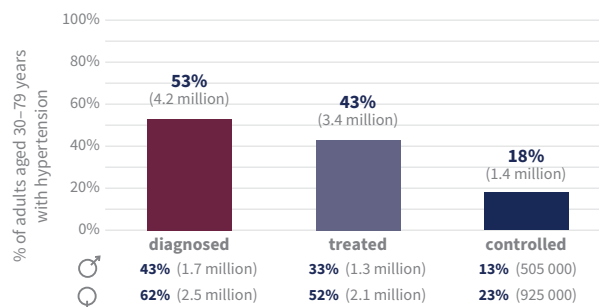
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 47% ♀ 49% 46%

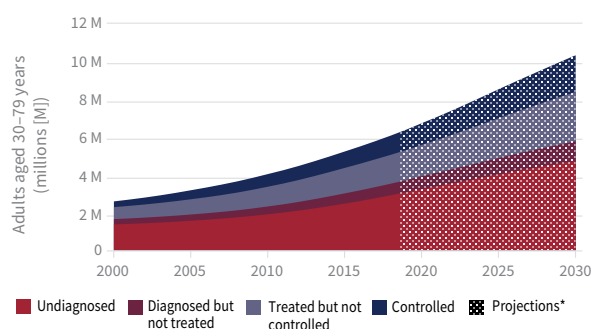
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 8 million adults aged 30–79 years with hypertension, approximately 6.6 million do not have the condition controlled^b

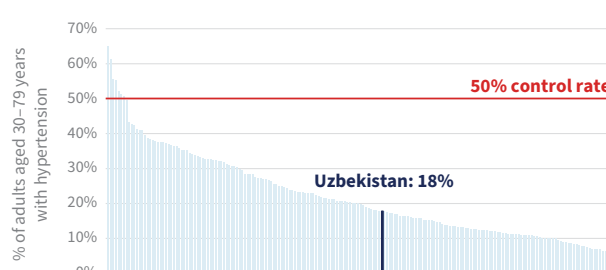


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	217 100	108 200	108 900	2021
Cardiovascular disease deaths	116 200	53 570	62 620	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	54	53	55	2021
Risk of premature death from NCDs (%) ^c	25	28	21	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	9	10	7	2021
Current tobacco use, adults aged 15+ years (%)	17	32	1	2022
Obesity, adults aged 18+ years (%)	29	25	32	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	32	26	37	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	Yes
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025

Vanuatu

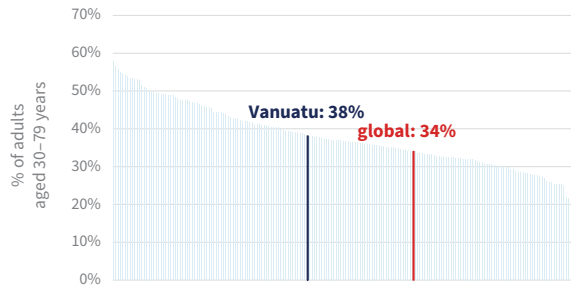
Hypertension profile

Total population (2024): 327 800

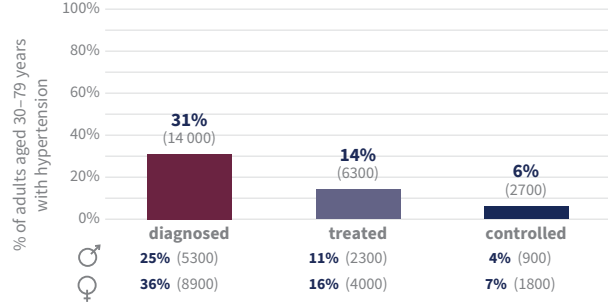
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 38% ♀ 36% 40%

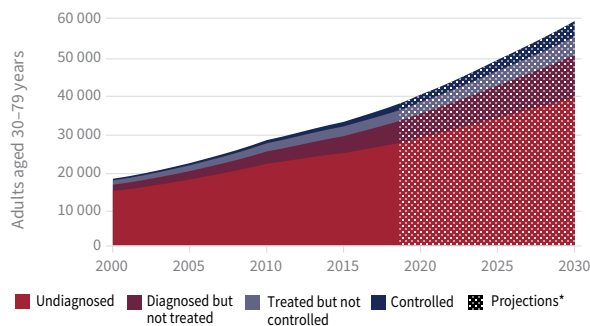
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 46 000 adults aged 30–79 years with hypertension, approximately 44 000 do not have the condition controlled^b

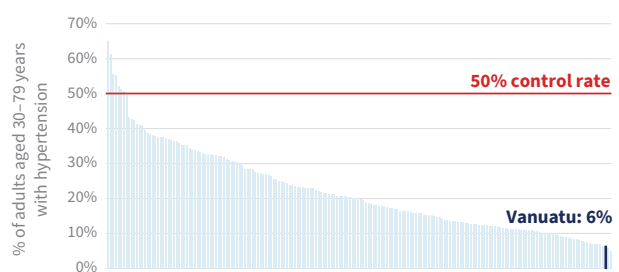


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	2230	1390	850	2021
Cardiovascular disease deaths	870	560	310	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	58	56	61	2021
Risk of premature death from NCDs (%) ^c	37	43	30	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	8	7	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	20	15	25	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	8	6	9	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Venezuela (Bolivarian Republic of)

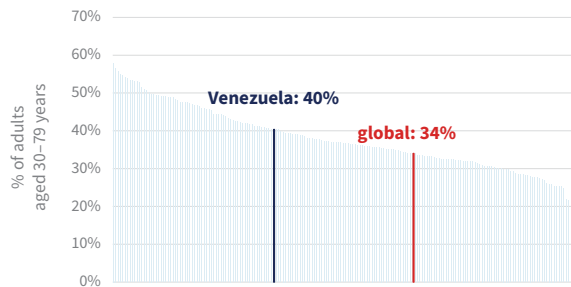
Hypertension profile

Total population (2024): 28 410 000

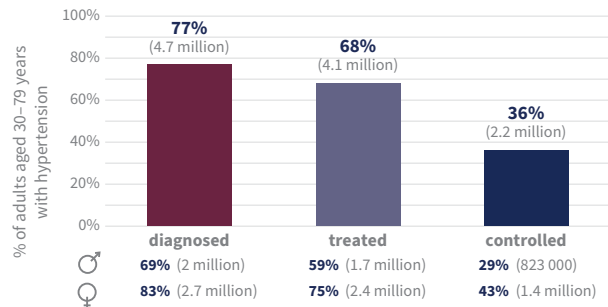
Prevalence of hypertension among adults aged 30–79 years (2024)^a

40% 40% 41%

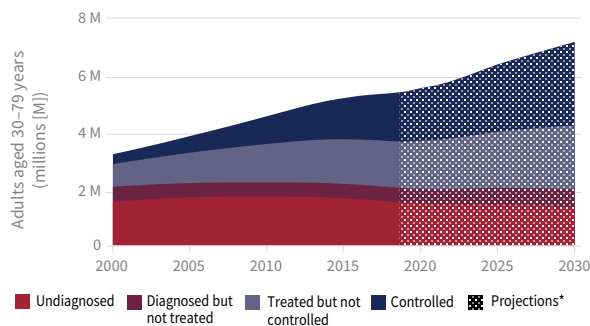
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 6.1 million adults aged 30–79 years with hypertension, approximately 3.9 million do not have the condition controlled^b

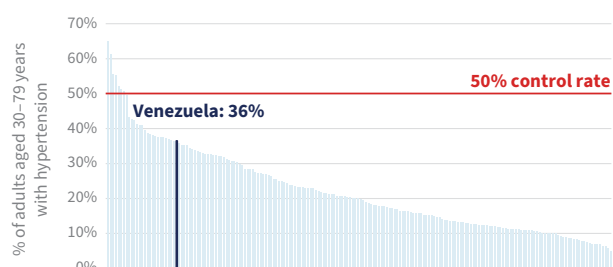


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	227 100	132 700	94 430	2021
Cardiovascular disease deaths	69 220	38 170	31 060	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	58	57	58	2021
Risk of premature death from NCDs (%) ^c	19	23	15	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	9	2021
Current tobacco use, adults aged 15+ years (%)	no data	no data	no data	2022
Obesity, adults aged 18+ years (%)	23	20	25	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	2	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	46	38	53	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Viet Nam

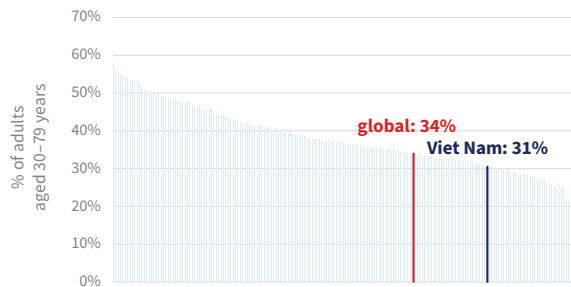
Hypertension profile

Total population (2024): 101 000 000

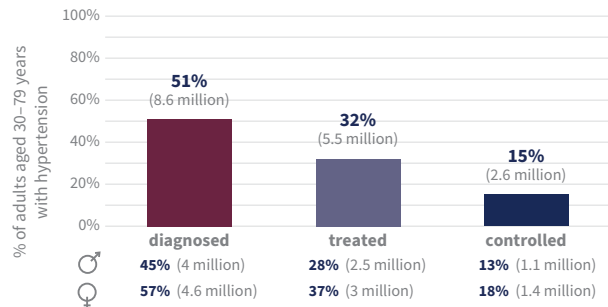
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 31% ♀ 33% 28%

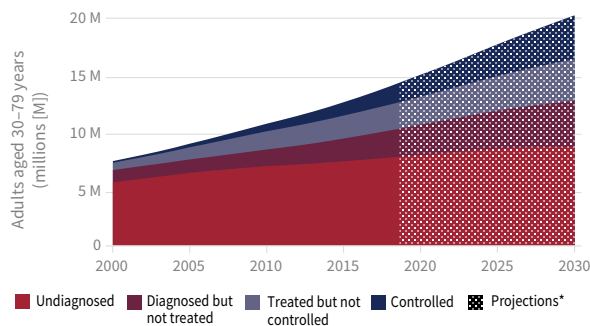
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 16.9 million adults aged 30–79 years with hypertension, approximately 14.4 million do not have the condition controlled^b

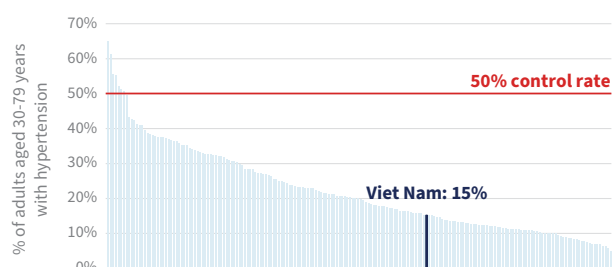


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	703 500	381 900	321 600	2021
Cardiovascular disease deaths	260 400	136 900	123 500	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	63	63	64	2021
Risk of premature death from NCDs (%) ^c	20	28	13	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	10	11	10	2021
Current tobacco use, adults aged 15+ years (%)	23	43	2	2022
Obesity, adults aged 18+ years (%)	2	2	2	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	11	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	30	26	35	2022

National response

Targets

National target for blood pressure	Yes
National target for salt consumption	Yes

Policies

Operational cardiovascular disease policy	Yes
Operational salt reduction policy	Yes

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	Yes
Conducted recent, national survey on salt/sodium intake	Yes
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Yemen

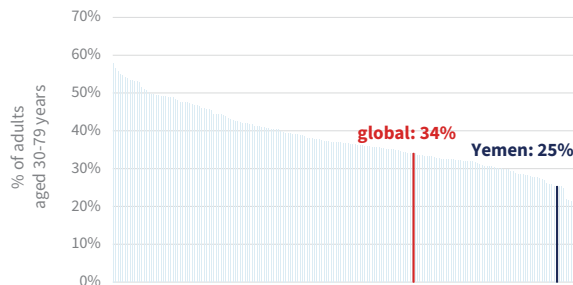
Hypertension profile

Total population (2024): 40 580 000

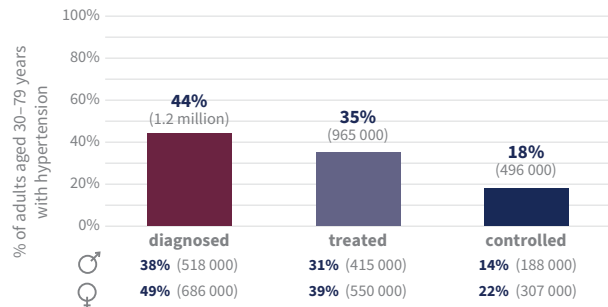
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 25% ♀ 25%

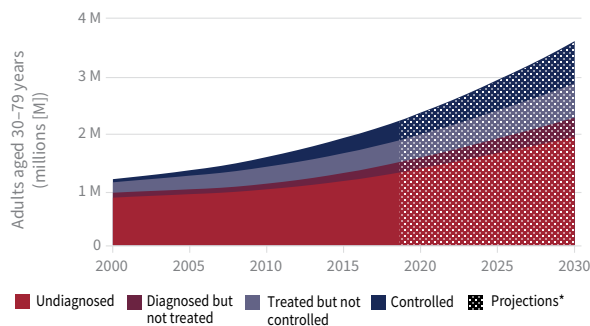
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 2.7 million adults aged 30–79 years with hypertension, approximately 2.3 million do not have the condition controlled^b

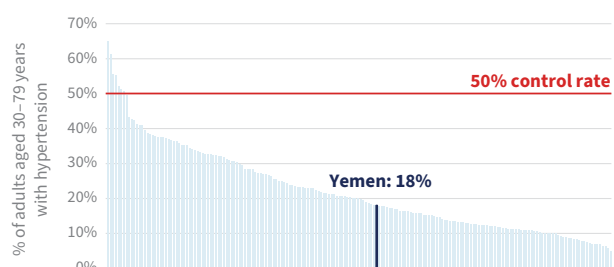


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	224 600	127 100	97 470	2021
Cardiovascular disease deaths	56 570	27 780	28 790	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	52	48	57	2021
Risk of premature death from NCDs (%) ^c	26	28	24	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	6	7	5	2021
Current tobacco use, adults aged 15+ years (%)	21	35	8	2022
Obesity, adults aged 18+ years (%)	12	9	14	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	0	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	29	24	34	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	No
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	No

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature deaths from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

World Health Organization: Hypertension profiles, 2025

[See Explanatory Notes for indicator definitions](#)

Zambia

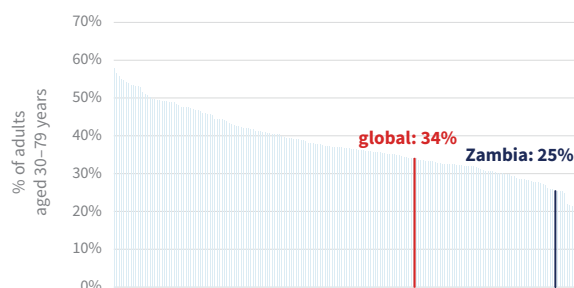
Hypertension profile

Total population (2024): 21 310 000

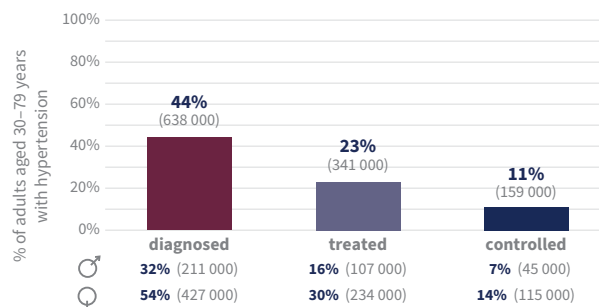
Prevalence of hypertension among adults aged 30–79 years (2024)^a

25% 24% 26%

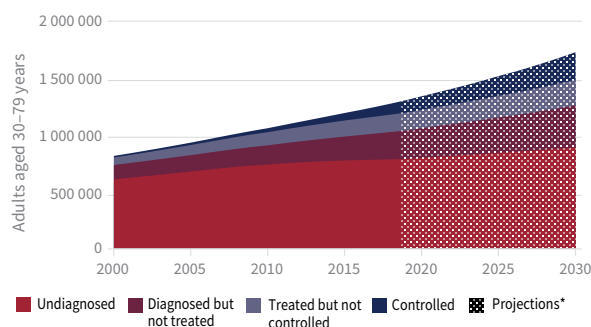
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.5 million adults aged 30–79 years with hypertension, approximately 1.3 million do not have the condition controlled^b

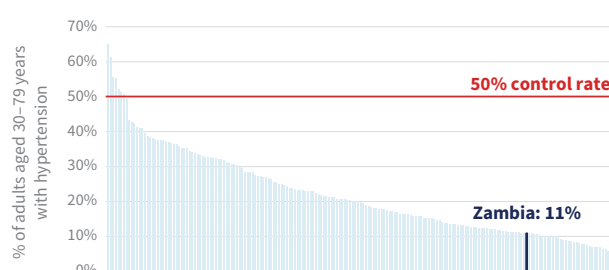


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	139 600	74 270	65 370	2021
Cardiovascular disease deaths	15 180	7330	7850	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	53	49	57	2021
Risk of premature death from NCDs (%) ^c	24	26	22	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	7	7	8	2021
Current tobacco use, adults aged 15+ years (%)	15	26	4	2022
Obesity, adults aged 18+ years (%)	9	4	14	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	4	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	14	10	18	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥ 140 mmHg or DBP ≥ 90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP < 140 mmHg and DBP < 90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

c. Risk of premature death from NCDs refers to Sustainable Development Goal (SDG) indicator 3.4.1, defined as the probability of dying from any of cardiovascular disease, cancer, chronic respiratory disease, or diabetes between ages 30 and 70 years.

† See Explanatory notes.

[See Explanatory Notes for indicator definitions](#)

World Health Organization: Hypertension profiles, 2025

Zimbabwe

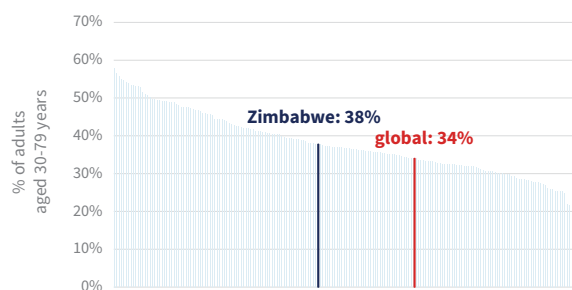
Hypertension profile

Total population (2024): 16 630 000

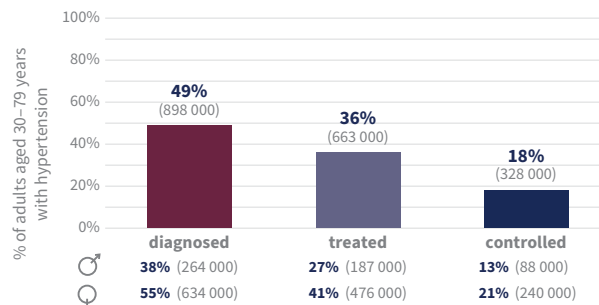
Prevalence of hypertension among adults aged 30–79 years (2024)^a

♂ 38% ♂ 32% ♀ 42%

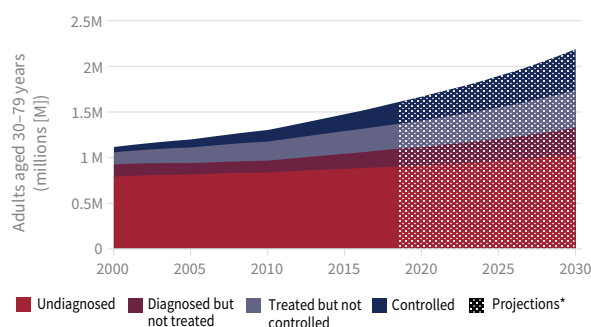
Prevalence of hypertension (adults aged 30–79 years) – country comparison (both sexes)^a



Of the 1.9 million adults aged 30–79 years with hypertension, approximately 1.5 million do not have the condition controlled^b

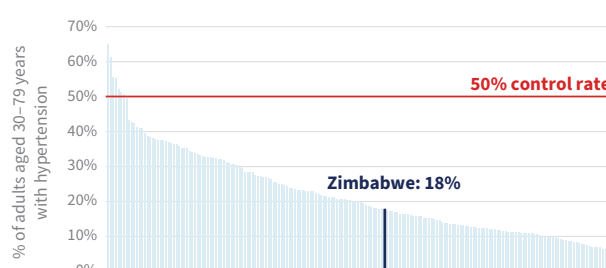


Trends in hypertension disaggregated by diagnosis, treatment and control (both sexes)



*Projections assume a continuation of past trends.

Hypertension control rates – country comparison (both sexes)^b



Mortality†

	both sexes	males	females	year
Total deaths	153 200	76 090	77 130	2021
Cardiovascular disease deaths	23 770	9160	14 600	2021
Cardiovascular disease deaths attributable to high systolic blood pressure (%)	59	52	64	2021
Risk of premature death from NCDs (%) ^c	31	30	32	2021

Risk factors

	both sexes	males	females	year
Mean population salt intake, adults aged 25+ years (g/day)	8	8	8	2021
Current tobacco use, adults aged 15+ years (%)	11	21	1	2022
Obesity, adults aged 18+ years (%)	12	4	19	2022
Total alcohol per capita consumption, adults aged 15+ years (litres/year)	5	no data	no data	2022
Physical inactivity, adults aged 18+ (%)	18	13	21	2022

National response

Targets

National target for blood pressure	No
National target for salt consumption	No

Policies

Operational cardiovascular disease policy	No
Operational salt reduction policy	No

Treatment

Guidelines for management of hypertension	Yes
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Surveillance

Conducted recent, national survey measuring raised blood pressure/hypertension	No
Conducted recent, national survey on salt/sodium intake	No
Functioning system for generating reliable cause-specific mortality data on a routine basis	No
Standardized patient information system broadly available at the primary health care level that captures CVD-related patient data	Yes

a. Hypertension is defined as having SBP ≥140 mmHg or DBP ≥90 mmHg or taking medication for hypertension.

b. Controlled hypertension is defined as receiving treatment for hypertension and having SBP <140 mmHg and DBP <90 mmHg. Control rate is the percentage of adults aged 30–79 years with hypertension who have it controlled.

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† See Explanatory notes.

See Explanatory Notes for indicator definitions

World Health Organization: Hypertension profiles, 2025