Conclusion Medical students’ self-perceived nutrition competence in providing nutrition care increased modestly at three points throughout medical training. Opportunity exists for further supporting medical students to increase their competence nutrition care, which could be achieved through mandatory and greater medical nutrition education.

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AN EVALUATION OF THE CURRENT STATE OF HYPERTENSION DIAGNOSIS AND MANAGEMENT IN A RURAL PRIMARY CARE PRACTICE

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Background Hypertension is the leading cause of cardiovascular-related mortality in Ireland. Due to the lack of diagnosis, awareness and early treatment, the prevalence of hypertension in the community is increasing at an alarming rate. Latest guidelines suggest the use of ambulatory blood pressure measurement (ABPM) as the gold standard to diagnose hypertension.

Objectives To investigate the current prevalence of hypertension in a rural primary care practice by assessment of current anthropometric measures and the uptake of 24hr ABPM. This study also explores the development of a practice-based algorithm to better identify and manage patients with hypertension.

Methods This study included (1) a retrospective cross-sectional chart audit assessing the anthropometric measurements and uptake of 24hr ABPM in patients aged ≥25 years with the last clinic BP systolic ≥150mmHg or had a coded diagnosis of hypertension and (2) the development of a hypertension management protocol based on clinical guidelines.

Results A total of 890 patients were included. Out of those with a coded diagnosis of hypertension (78%, n=691), the mean BMI was 29.9 with a mean weight of 84.4kg, 13% were current smokers and 64% had an ABPM. With 22% (n=199) of the patients without a coded diagnosis of hypertension, the mean BMI was 28.8 with a mean weight of 85.2kg and 26% had an ABPM. Overall, 18% of the patients had diabetes and 62% of the patients had a lipid disorder.

Discussion With most of the patients currently being overweight and have a history of lipid disorder along with almost half of the patients without an ABPM, this audit exposes a significant gap in diagnosis and management of hypertension. To meet guideline targets, an evidence-based hypertension protocol (figure 1) was designed and implemented where the practice nurses were empowered to measure, identify and refer patients with elevated blood pressure for ABPM and nutritional counselling.