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The Prevalence of, Hypertension and Diabetes in Ogugu, Ogbagebe and Ofabo, Ofu and Olamaboro Lga, Kogi State, Nigeria: A Report

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Abstract

Urinalysis, Malaria Parasite test, blood pressure checks and body mass index was calculated for the people of Ogugu, Ogbegebe and Ofabo Communities, diagnoses made and drugs administered. 356 Persons benefited from this scheme out of which 25 (7.02%) were children and 331 (92.97%) adults. 95 suffered from high blood pressure (26.69%) with the highest being 250/120 mmhg, 11 were diabetic (3.09%).

Keywords: Hypertension; The economic transition; Blood pressure; Cardiovascular disease; Diabetes

Introduction

The prevalence of hypertension is an important risk factor for cardiovascular disease (CVD) is increasing in the developing countries and this may be connected with the economic transition in those countries [1]. High blood pressure causes one in every eight deaths worldwide [2]. About one billion adults, the world over, had hypertension in the year 2000, and the number is expected to rise to 1.56 billion in 2015 [3]. According to a report to show the blood pressure pattern in Kogi State, it was observed that there was a high prevalence rate of hypertension amongst adults, hence, there is an urgent need to address the issue, this is why the BP screening was conducted to identify cases and treat accordingly [1-3].

Urinalysis, malaria test, blood pressure checks was conducted to reveal cases of malaria, high blood pressure, diabetes and treat them accordingly to reduce their prevalence in the afore-mentioned communities. Ogugu Community has a population of 180,000 according to the 2006 census. Below is the population of Kogi State according to each Local Government Area (Table 1).

Methodology

A total of 356 persons from 3 places of domicile were studied. Rapid diagnostic test kit was used to test for malaria (Figure 1). Urine dipsticks used for urinalysis. Manual and electronic BP apparatus used to check blood pressure. Beneficiaries moved from the Microbiological bench



Figure 1: Diagnostic test kit was used to test for malaria.

to the doctor's bench for diagnoses. Children were dewormed with Albendazole, cases of malaria, high blood pressure and diabetes were treated with ACT, Anti-hypertensive and Glucophage respectively.

Result

356 Persons benefited from this scheme out of which 25 (7.02%)

Name	Status	Population	Population	Population	
		Census	Census	Projection	
		26-11-1991	21-03-2006	21-03-2011	
Kogi	State	21,47,756	33,14,043	38,50,400	
Adavi	Local Government Area	1,57,092	2,17,219	2,52,370	
Ajaokuta	Local Government Area	97,904	1,22,432	1,42,250	
Ankpa	Local Government Area		2,66,176	3,09,250	
Bassa	Local Government Area	88,496	1,39,687	1,62,290	
Dekina	Local Government Area	1,77,513	2,60,968	3,03,200	
Ibaji	Local Government Area		1,27,572	1,48,220	
Idah	Local Government Area		79,755	92,660	
Igalamela-Odolu	Local Government Area		1,47,048	1,70,850	
ljumu	Local Government Area	66,603	1,18,593	1,37,790	
Kabba/Bunu	Local Government Area		1,44,579	1,67,980	
Kogi	Local Government Area	82,483	1,15,100	1,33,730	
Lokoja	Local Government Area		1,96,643	2,28,470	
Mopa-Muro	Local Government Area		43,760	50,840	
Ofu	Local Government Area	1,08,095	1,91,480	2,22,470	
Ogori/Magongo	Local Government Area		39,807	46,250	
Okehi	Local Government Area	1,46,264	2,23,574	2,59,760	
Okene	Local Government Area		3,25,623	3,78,320	
Olamaboro	Local Government Area	1,04,705	1,58,490	1,84,140	
Omala	Local Government Area		1,07,968	1,25,440	
Yagba East	Local Government Area	88,780	1,47,641	1,71,530	
Yagba West	Local Government Area	76,936	1,39,928	1,62,570	
Nigeria	Federal Republic	8,89,92,220	140,431,790	164,728,600	

Table 1: The population of kogi state according to each local government area.

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were children and 331 (92.97%) adults. 95 suffered from high blood pressure (26.69%) with the highest being 250/120 mmhg, 11 were diabetic (3.09%). 43 (12.07) had malaria.118 Persons benefited in Ogugu Community out of which 38 are hypertensive, 3 diabetic and 15 had malaria. 98 Persons benefited in Ogbadebe Community out of which 22 had high blood pressure, 2 diabetic and 9 had malaria. 140 Persons benefited in Ofabo Community out of which 35 were hypertension, 6 diabetic and 7 had malaria (Figures 2 and 3; Table 2).

Conclusion

It was observed that the reason for the low prevalence of malaria is due to the fact that there are little Mosquitoes this time of the year. There was a high prevalence of high blood pressure which is related to the hardship in the State.

S/N	Community	Disease/Infection	Total beneficiary	Number of Persons diagnosed	Prevalence rate
1	Ogugu	Hypertension	118	38	7358484e+36
		Malaria	118	3	4716.981
		Diabetes	118	15	56603.774
2	Ogbadebe	Hypertension	98	22	8343949e+52
		Malaria	98	2	38216.561
		Diabetes	98	9	254.77
3	Ofabo	Hypertension	140	35	09090909100
		Malaria	140	6	4.545
		Diabetes	140	7	0

Table 2: A table to show the prevalence of diseases in Ogbonicha, Aloma, Ogbulu and Iboko communies.

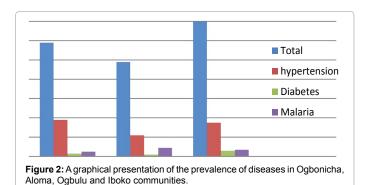




Figure 3: Provide medical care.

It is important to provide medical care, or deploy medical personnel to the communities to checkmate the spread of preventable diseases to improve the general wellbeing of the people.

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