Dear Editor,

I would like to congratulate Costa et al.1 for their published study on the prevalence of systemic arterial hypertension (SAH) in the city of Pelotas, Rio Grande do Sul, Brazil. We observed that blood pressure levels ≥ 160/95 mmHg were considered diagnostic for hypertension. However, even considering the limitations that are inherent to the measurement of blood pressure levels performed at a single occasion for the diagnosis of hypertension, I believe the study would have better portrayed what is taking place concerning the prevalence of the disease if the cutoff had been 140/90 mmHg, which is the one recommended by several national and international guidelines2-5. Therefore, it would be interesting to perform a reanalysis of the presented data using the cutoff that is adopted worldwide. The threshold used in this study tends to reduce the disease detection sensitivity and, consequently, might have underestimated the SAH prevalence found in this sample.

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THE AUTOR REPLY

Dear Editor,

Important epidemiological studies have contributed to the understanding of arterial hypertension in the state of Rio Grande do Sul, Brazil1,2,3,4,5,6. All the studies performed have chosen the cutoff used in our study (>160/95 mm Hg), utilizing a higher specificity parameter. Other, more current studies also chose the 140 x 90 mmHg cutoff3,4. However, the main reason for maintaining the cutoff was the possibility to compare results with another important study, which was previously carried out in Pelotas with a population within the same age range3, thus allowing the comparison among independent variables and of the same outcome throughout time.

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