



## Family support interventions that can improve efforts to prevent and control hypertension in the elderly: A narrative review

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### ABSTRACT

Deaths from cardiovascular disease can be prevented by addressing the early risks that arise, starting with the problem of hypertension. Most hypertension occurs in the elderly. The family has a very important role in preventing and controlling hypertension in the elderly. Nurses play a role in overcoming these problems by making the family the focus of services from the assessment stage to the implementation of interventions. The research design used was a literature study with a narrative review method. Databases used include Pubmed, Ebscohost, Emerald Insight, One search and Google Scholar search engine. Inclusion criteria related to the research theme, available full text, published in the last 10 years, in Indonesian or English with experimental research design. The results of the study obtained the results of 6 articles consisting of family support interventions in the form of providing health education with interactive methods and skills training regarding the prevention and control of hypertension in the elderly accompanied by family. This intervention can increase knowledge and behavior of prevention and control of hypertension in the elderly. For health workers it is recommended to optimize family empowerment in controlling hypertension and for families it would be better if they increase awareness and concern in helping the elderly control their hypertension. Further research is needed using more systematic research methods

Keywords: Hypertension; Family Support; Preventing or controlling

### ABSTRAK

Kematian akibat penyakit kardiovaskular bisa dicegah dengan mengatasi risiko awal yang muncul yaitu mulai dari masalah hipertensi. Sebagian besar hipertensi terjadi pada lansia. Keluarga memiliki peranan yang sangat penting dalam mencegah dan mengendalikan hipertensi pada lansia. Perawat berperan dalam mengatasi masalah tersebut dengan menjadikan keluarga sebagai fokus pelayanan dari tahap pengkajian hingga pelaksanaan intervensi. Penelitian ini bertujuan untuk mengetahui bentuk intervensi dukungan keluarga yang dapat meningkatkan pencegahan dan pengendalian hipertensi pada lansia. Desain penelitian yang digunakan adalah studi literatur dengan metode narrative review. Database yang digunakan meliputi Pubmed, Ebscohost, Emerald Insight, One search dan search engine Google Cendekia. Kriteria inklusi yang berkaitan dengan tema penelitian, tersedia full text, terbitan 10 tahun terakhir, berbahasa indonesia atau berbahasa inggris dengan desain penelitian eksperimental. Hasil penelitian didapatkan hasil 6 artikel yang terdiri dari intervensi dukungan keluarga berupa pemberian pendidikan kesehatan dengan metode interaktif serta pelatihan keterampilan mengenai pencegahan dan pengendalian hipertensi pada lansia dengan didampingi keluarga. Intervensi ini dapat meningkatkan pengetahuan dan perilaku pencegahan serta pengendalian terhadap hipertensi pada lansia. Bagi tenaga kesehatan disarankan untuk mengoptimalkan pemberdayaan keluarga dalam mengendalikan hipertensi dan bagi keluarga akan lebih baik jika meningkatkan kesadaran serta kepedulian dalam membantu lansia mengendalikan hipertensinya. Penelitian lebih lanjut diperlukan dengan menggunakan metode penelitian yang lebih sistematis

Kata Kunci: Hipertensi, Dukungan Keluarga, Proses Pengendalian

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## INTRODUCTION

According to the World Health Organization (2018), non-communicable diseases (NCDs) have caused 41 million cases of death to occur each year and 46% of the main causes of death are caused by cardiovascular disease. This cardiovascular disease is closely related to the problem of hypertension. Based on the results of WHO research, hypertension is still a fairly big problem in the world with 29% of the world's population experiencing the disease (WHO, 2014). The highest percentage increase in hypertension cases occurs in developing countries, such as Indonesia (WHO, 2019).

Based on the results of Basic Health Research (Riskesmas) in 2018, hypertension cases increased by 8.3%, from 25.8% to 34.1% (Ministry of Health, 2018). Based on Riskesdas in the same year, the prevalence of hypertension in Indonesia occurred in the age group of 31-44 years (31.6%), aged 45-54 years (45.3%), aged 55-64 years (55.2%) (Ministry of Health RI, 2019). This shows that hypertension mostly occurs in the elderly (>60 years) and pre-elderly (45-59 years) age groups.

People with hypertension rarely realize that they have problems with their condition. This is because hypertension is not often accompanied by complaints so that this disease is known as the silent killer (Ministry of Health of the Republic of Indonesia, 2017). This causes sufferers to rarely take treatment and lead to severe complications, especially related to cardiovascular disease. The above statement is in accordance with the analysis of Hien et al (2018) which states that complications of cardiovascular disease occur due to several things, namely irregularity in controlling blood pressure, medication non-compliance, lack of interaction with health workers, and inadequate therapy (Supriati, 2019). Based on the phenomena that occur in the field, only 1/4 of hypertensive patients have effective blood pressure control out of 70% who undergo treatment (Hussain et al., 2016).

Some studies have found that a factor influencing hypertension treatment and prevention behavior is that patient behavior is directly related to family support (Maytasari & Sartika, 2020; Osamor, 2015).

Based on research (Maytasari & Sartika, 2020) To improve compliance with people with hypertension, it is necessary to strive for an activity program that focuses on health promotion activities not only for patients but also involves family and social members. The research suggestion was supported by other studies showing that family support contributed 61.8% in supporting people with hypertension (Yeni et al., 2016). Evidence also shows that family advocacy is a vital strategy to help encourage family members to think, make decisions, monitor, and solve family problems, especially for families with elderly members (Phetsitong et al., 2019).

Seeing the characteristics of the elderly who need someone to support daily self-care and considering that family support is important for the elderly with hypertension, supporting nurses to provide nursing services in the form of family nursing. Through her role as an educator, nurses can be mediators between families and the elderly. It aims to solve problems and promote the health of the elderly by helping the elderly carry out self-care in controlling hypertension (Ministry of Health RI, 2016). Based on the explanation above, the author wants to know the form of family support interventions that can improve efforts to prevent and control hypertension in the elderly.

## RESEARCH METHOD

This research is a type of literature review research with narrative review method. In this study analyzed were interventions that can improve family support. The research framework used in this study uses JBI methodology and the literature results will be presented using PRISMA-Scr shells.

The criteria eligible for this review were identified using the PICO framework, defined as:

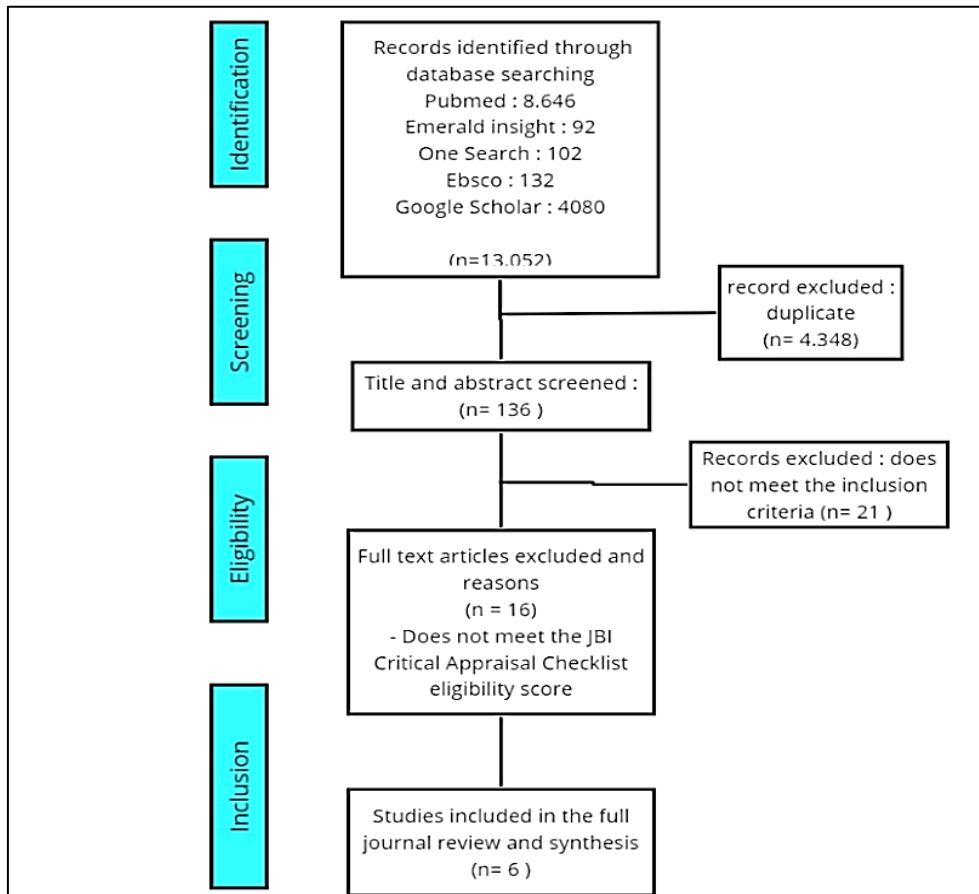
- Population: Elderly with Primary Hypertension
- Intervention: Family support or social support
- Comparison: -
- Outcome: Control hypertension so as to prevent complications

Where other criteria used in this study are articles of the last 10 years using English and using experimental research designs and are fulltext articles. Apart from articles with experimental designs excluded in this study. The literature search process is carried out in the database Pubmed, EbscoHost CINAHL & Academic Search Complete, Emerald Insight, One Search and search engines such as Google Scholar. The keywords used in article search are Hypertension OR High Blood Pressure AND Family Support OR Family Involvement OR Social Support AND Prevention OR Control based on CINAHL and Medical Subject Heading (MeSH) Terms. After the literature in accordance with the research, the literature was sorted using the Prism method and produced 6 articles relevant to this research topic:

**RESULTS AND DISCUSSION**

After conducting a search and sorting process, 6 articles were found that fit the inclusion criteria on this topic, including this research (Usman et al., 2023), (Maslampak et al., 2018), (Shen et al., 2017), (Zeng et al., 2021), (Boonyathee et al., 2021) ,dan (Triono & Hikmawati, 2020).

After analysis of 6 selected articles, information was found related to family support interventions to improve efforts to prevent and control hypertensu in the elderly. All articles used in this study are in English and published in the last 5 years. The research methods used in selected articles consist of RCT (Randomized Controlled Trial) and Quasi Experimental. All articles analyzed showed that the research area was spread across the Asian continent with distribution details, namely 2 articles were carried out in China, 2 articles were carried out in Indonesia, 1 article was carried out in Iran and 1 article was carried out in Thailand. Participants of the entire article consisted of elderly people with a majority of >60 years with a diagnosis of hypertension or at risk of hypertension by a doctor and consisted of family members or caregivers who lived with people with hypertension.



**Table 1. Article Characteristics (N=6)**

Article Characteristics	Frequency	Article Author
<b>Year of Publication</b>		
2017	1	(Shen et al., 2017)
2018	1	(Maslampak et al., 2018)
2020	1	(Usman et al., 2023)
2021	2	(Zeng et al., 2021), (Boonyathee et al., 2021)
2022	1	(Triono & Hikmawati, 2020)
<b>Countries studied</b>		
China	2	(Shen et al., 2017), (Zeng et al., 2021)
Thailand	1	(Boonyathee et al., 2021)
Iran	1	(Maslampak et al., 2018)
Indonesia	2	(Usman et al., 2023), (Triono & Hikmawati, 2020)
<b>Types of Research</b>		
<i>Randomized Controlled Trial</i>	4	(Usman et al., 2023), (Maslampak et al., 2018), (Shen et al., 2017), (Zeng et al., 2021),
<i>Quasi Experimental</i>	2	(Boonyathee et al., 2021) ,dan (Triono & Hikmawati, 2020)

**Table 2. Characteristics of Family Support Interventions provided**

<b>Characteristics of the intervention</b>	<b>Frequency</b>	<b>Article Author</b>
<b>Forms of Family Support Intervention</b>		
Education programs for the elderly and families (families are involved as supporters in controlling and preventing hypertension in the elderly)	1	(Usman et al., 2023),
Family skills training (families are taught to play a full role in the control and prevention of hypertension in the elderly)	5	(Maslakpak et al., 2018), (Shen et al., 2017), (Zeng et al., 2021), (Boonyathee et al., 2021) ,dan (Triono & Hikmawati, 2020)
<b>Family Support Dimension</b>		
Emotional support.	1	(Boonyathee et al., 2021)
Dukungan penghargaan	1	(Zeng et al., 2021)
Dukungan instrumental	1	(Maslakpak et al., 2018)
Dukungan informatif	3	(Triono & Hikmawati, 2020), (Usman et al., 2023), (Shen et al., 2017)
<b>Durasi Intervensi</b>		
10 minggu	1	(Zeng et al., 2021)
12 minggu	1	(Boonyathee et al., 2021)
12 bulan	1	(Shen et al., 2017)
Tidak diketahui	3	(Triono & Hikmawati, 2020), (Usman et al., 2023), (Maslakpak et al., 2018)

Based on the results of the analysis of the 6 relevant articles, there are 2 forms of family support interventions carried out based on actions taken by both caregivers and families. Where the 2 forms of intervention consist of providing education and skills training for families who have elderly people with hypertension. So that every family member can be exposed both directly and indirectly in the process of treating this disease. Each intervention has a duration of intervention that varies from 10 weeks to 12 months. The type of intervention is divided into the categories of supervision, partnership, education, social support, and assistance to families and intervention patients.

## DISCUSSION

Family support is a form of assistance provided by family members by providing physical and psychological comfort to someone when he is sick (Turchi et al., 2014). Family is the main source of social support in caring for physical, emotional and social needs in a person, especially the elderly (Boonyathee et al., 2021). For the elderly who have a history of hypertension, family plays an important role in the process of monitoring and preventing complications due to hypertension at home (Triono & Hikmawati, 2020). Social support provided by family members is related to the self-efficacy of the elderly in terms of changes in behavior, lifestyle, and satisfaction they have. Research conducted by Whulandani (2014) states that an elderly person who has positive family support will have a high desire to be able to check his blood pressure regularly and take medication as recommended and carry out a healthy lifestyle.

Jatmika et al., (2018) suggests that family support can be provided through 4 dimensions, namely in the form of emotional support, appreciation support, instrumental support and informative support. Parenting and support provided by the family must be accompanied by good knowledge and skills from each family member to be able to prevent and control hypertension. The form of family intervention support can consist of two forms, namely the family who plays a direct role in prevention and control with the skills that the nurse has provided or the family only as a support and companion when the nurse conducts education for the elderly.

The things described above are in accordance with the results of literature analysis from 6 journals that have been found, that family support interventions consist of 2 forms, namely 1) providing education to the elderly and family which means in this case the family only acts as a companion and support, 2) providing skills training on efforts to prevent and control hypertension in the elderly and their families so that families can play a direct role in controlling For elderly family members with hypertension.

### **Education programs for the elderly and families (families involved as supporters in the control and prevention of hypertension in the elderly)**

According to Toeri Dunst Trivette's concept (1988) nurses in the community can intervene by promoting self-care to families through education, negotiation and evaluating family empowerment (Unissula, 2014). The concept is in accordance with the results of the study (Maslakpak et al., 2018) explained that the provision of education that nurses do to patients and families can improve blood pressure control and medication adherence. The provision of this education

can be done by various methods such as interactive short lectures, role-play, group work, demonstrations, and real-world practice (Maslakpak et al., 2018; Zeng et al., 2021). Each method has the same goals, among others, to provide information to the elderly and family about lifestyle and health, initiate self-reflection on healthy lifestyles, change attitudes, and encourage action planning (Maslakpak et al., 2018). The topics given during the educational session focused on managing hypertension self-care (Usman et al., 2023; Zeng et al., 2021) Control and prevention of hypertension (Shen et al., 2017), health complications that can arise, nutrition education and health coaching for DASH (Dietary Approaches to Stop Hypertension) guidelines (Usman et al., 2023) as well as providing information on appropriate physical activity and exercise for parents (Boonyathee et al., 2021).

### **Family skills training (families are taught to play a full role in the control and prevention of hypertension in the elderly)**

Supervision and assistance to the daily self-care of the elderly: The large number of drugs that must be taken and the long period of treatment make patients with hypertension often fail in the treatment process and lead to bad complications of the disease. According to Zanchetti (2015), family support by providing supervision and assistance to people with hypertension can increase patient compliance to routine treatment. This is in accordance with the results of the analysis of the literature found in the study (Shen et al., 2017) states that therapy supervised by family members has positive results in improving patient medication adherence.

On research (Shen et al., 2017) Each patient appoints a family member as a supervisor who will supervise the patient's behavior during the study period. The family supervisor has the responsibility to remind patients to take medications and have their blood pressure checked regularly and on time at a health care provider or professional doctor. In other studies conducted (Triono & Hikmawati, 2020) The family only accompanies and reminds patients to take efforts to prevent and control hypertension such as accompanying in sports activities, reminding them to take medication regularly, prohibiting smoking, etc. Family member-based surveillance interventions and family mentoring interventions produce positive changes in hypertension control.

Establishment of partnerships between patients and families: Family support provided in the form of partnerships can provide comfort to patients and their families in the process of providing treatment. Based on research (Zeng et al., 2021) Caregiver-patient-family partnership interventions can show benefits in improving patients' blood pressure control, dyadic relationships and psychological well-being of family partners in rural areas. In the study, patients and caregivers who are families (dyad) together underwent a partnership training session consisting of an education session and a partnership skills session.

Strategies to facilitate skills learning include teaching and discussion, role-playing, feedback and real-life daily practice. The partnership skills training protocol is based on the Shared Care Model (SCM) concept developed to outline interpersonal processes between patients and family caregivers for mutual support and management of chronic diseases at home. Shared care has three components: communication, decision-making and reciprocity. After the partnership training session, the family independently applies the skills supervised by a nurse.

Then to assess the implementation carried out by the family (diad) regarding the daily application of partnership techniques and hypertension treatment that has been studied, the strategies used are behavioral observation strategies and feedback from family participants (diad). Partnership interventions between caregivers and families can have a major influence on blood pressure control behavior and improve the well-being of the couple's relationship (Zeng et al., 2021).

Monitoring in low-salt diet behavior by families: This intervention uses the concept of family empowerment used in the elderly group by providing information and skills repeatedly related to the behavior to be taught. The concept of giving repeated information to the elderly according to John (1988) in (Usman et al., 2023) has an impact on improving positive self-care attitudes. This intervention emphasizes the role of the family to be able to monitor the dietary behavior of the elderly. This intervention consists of educational sessions, monitoring implementation practices and evaluation processes at the end of each session. Furthermore, follow-up meetings were held to ensure participants' skills in controlling blood pressure could be maintained.

After the education, the first and second follow-up meetings continued one and two months after the training, respectively. The first and second follow-up meetings were held to validate the progress of program implementation and ensure the maintenance of compliance with the implementation of their respective programs. Educational programs that are followed up by involving families have been shown to significantly improve adherence to low-salt diets and reduce salt levels in cooking and reduce systolic blood pressure although not significantly (Usman et al., 2023).

Training programs for family caregivers social support (SSFCTP): *Social support family caregiver training program* (SSFCTP) It is a program designed to encourage caregivers to promote self-efficacy and self-care among the elderly. This program has proven effective in controlling hypertension in the elderly. These results are in accordance with the analysis of the literature on the study (Boonyathee et al., 2021) stated that this program significantly helps families to be able to provide support so that the elderly can control their hypertension.

Table 3. Article Analysis Results

No	Article Title, Year Published & Author	Country of Origin	Sample	Research Design	Type of Intervention & Duration	Research Results and Conclusions
1	Family member- based supervision of patients with hypertension: a cluster randomized trial in rural China (2017)  Y Shen, X Peng, M Wang, X Zheng, G Xu, L Lü, K Xu, B Burstrom, K Burstrom, J Wang.	China	554 hypertensive patients and their families	RCT	<ul style="list-style-type: none"> <li>Family member-based supervision</li> <li>Performed for 12 months.</li> </ul>	<ul style="list-style-type: none"> <li>In the intervention group, the proportion who measured their blood pressure more than once per month increased from 56.0 to 95.8% at mid-term checkups and to 96.2% at late-stage checkups. Significantly positive effects were observed at blood pressure control levels on medium-term probes (OR= 0.7, 95% CI: 0.4-0.9), but long-term effects were not significant (OR = 0.9, 95% CI: 0.6-1.3)</li> <li>Family-based surveillance interventions produce positive changes in hypertension control including; Improve hypertension control behavior, improve medication adherence, lower systolic and diastolic blood pressure, reduce mortality and complications and reduce salt intake.</li> </ul>
2	Does family involvement in patient education improve hypertension management A single- blind randomized, parallel group, controlled trial (2018)  Masumeh Hemmati Maslampak, Behrooz Rezaei, Naser Parizad.	Iran	100 hypertensive patients and their families	RCT	<ul style="list-style-type: none"> <li>Partnership intervention between patient (hypertension) and family (educate)</li> <li>The program is carried out by dividing the control group, patient-oriented group</li> </ul>	<ul style="list-style-type: none"> <li>Interactive group discussions have a significant influence on treatment adherence of patients with hypertension. Family-oriented patient education results in improved BP control and ultimately reduced systolic and diastolic in patients with hypertension</li> <li>Interactive educational interventions involving families are effective in improving blood pressure control and medication adherence and can reduce systolic and diastolic in hypertensive patients.</li> </ul>
3	Effects of a family dyadic partnership program for people with hypertension in a rural community: A pilot randomised controlled trial (2021)  Dejian Zeng, Chen Yang, Wai Tong Chien.	China	44 Hypertensive patients and family caregivers	RCT	<ul style="list-style-type: none"> <li>Partnership intervention between caregivers and families</li> <li>Randomized participants were divided into an intervention group for 10 weeks or a control group receiving usual care.</li> </ul>	<ul style="list-style-type: none"> <li>The partnership intervention between family caregivers and patients was a viable and acceptable program with high recruitment (81.5%) and completion rates (95.5%) and positive feedback from participants. There was a greater increase in the percentage of controlled blood pressure in the intervention group</li> <li>Partnership interventions between caregivers and families can have a major influence on blood pressure control behavior and improve the well-being of the couple's relationship</li> </ul>
4	Family involvement in low-salt diet for hypertensive older adults (2022)  Suharno Usman, Andi Masyitha Irwan, Rosyidah Arafat.	Indonesia	30 hypertensive participants and their families	RCT	<ul style="list-style-type: none"> <li>Education, training, and follow-up programs involving families.</li> <li>The intervention group involved one family member during education sessions and follow-up meetings.</li> <li>In contrast, none of the family members were involved in the control group.</li> </ul>	<ul style="list-style-type: none"> <li>Adherence to the low-salt diet over time improved significantly in the intervention group after education sessions and follow-up meetings were held (p &lt;0.05) compared to the control group (no improvement). Salt concentrations in food and urine in the intervention group decreased significantly after education sessions and follow-up meetings (p &lt;0.05)</li> <li>Actionable education and training programs involving families have been shown to significantly improve adherence to low-salt diets and lower salt levels</li> </ul>

5	<p>Effects of a social support family caregiver training program on changing blood pressure and lipid levels among elderly at risk of hypertension in a northern Thai community Sorawit (2021)</p> <p>Sorawit Boonyathee, Katekaew Seangpraw, Parichat Ong-Artborirak, Nisarut Auttama, Prakasit Tonchoy, Supakan Kantow, Sasivimol Bootsikeaw, Pitakpong Panta, Dech</p>	Thailand	268 elderly people at risk of hypertension and their caregivers	Quasi-Experimental	<ul style="list-style-type: none"> <li>• Social support family caregiver training program (SSFCTP) The 12-week exercise consists of two main activities: 1) Skills in building relationships between caregivers and elderly, 2) Follow-up and reinforcement</li> </ul>	<ul style="list-style-type: none"> <li>• At the end of the intervention and follow-up period, the average knowledge, self-efficacy, and health care behavior scores in the intervention group were higher than in the control group (<math>p &lt; 0.05</math>). In addition, elderly systolic and diastolic blood pressure in the intervention group was statistically significantly lower compared to the control group (<math>p &lt; 0.05</math>)</li> <li>• The findings suggest that the "Social Support Family Caregiver Training Program (SSFCTP)" can help rural seniors control blood pressure and improve knowledge, self-efficacy, and health care behaviors against hypertension compared to the control group</li> </ul>
6	<p>The Effect of Family Support on Blood Pressure Control Behavior in Elderly Hypertensive Patients at Puskesmas Sumbang 1 (2020)</p> <p>Agus Triono, Isna Hikmawati.</p>	Indonesia	36 elderly people with hypertension and their families	Quasi-Experimental	<ul style="list-style-type: none"> <li>• Intervention in the form of family assistance to family members with deep hypertension; exercise activities, provide low-salt food, prohibit smoking, remind bedtime, remind to take medicine and invite worship.</li> </ul>	<ul style="list-style-type: none"> <li>• Systole before intervention averaged 147.78 mmHg and systole after intervention averaged 102.78 mmHg. After the intervention, 15 of the 18 experimental group respondents (83.3%) exercised. A total of 9 respondents (50%) showed a balanced diet low in salt after the intervention.. A total of 13 respondents (72%) do not smoke because their families prohibit respondents from smoking. A total of 11 respondents (61%) got enough sleep for more than 8 hours after being reminded by family. A total of 18 respondents (100%) took amlodipine medicine given by the health center after being reminded by their families. A total of 18 respondents (100%) prayed accompanied by family.</li> <li>• Intervention by involving families in assisting the formation of good self-management in family members with hypertension, tested to control hypertension.</li> </ul>

The research program consists of two main activities, including: 1) skills in building relationships between caregivers and the elderly including discussing problems faced in daily life, sharing past experiences related to elderly care, and increasing knowledge about hypertension through video media; 2) both caregivers and parents receive a self-care diary titled "Promise with the Heart" to document daily routine activities such as documenting blood pressure, diet and exercise. Activities focus on self-efficacy skills, modeling, nutrition education, and physical activity (Boonyathee et al., 2021).

Activities carried out in each session above include providing emotional support such as families meeting the psychosocial needs of family members by mutual encouragement, love, warmth and mutual support and respect between members where families are encouraged to promote patient self-efficacy (Boonyathee et al., 2021), Families can provide assessment support through feedback in the form of partnerships with educated families (Zeng et al., 2021), Information support, namely the family providing advice or information about patient health problems, one of which can be seen in interactive discussions between families and patients both play an active role in efforts to increase health knowledge (Maslakpak et al., 2018), instrumental support by providing energy, funds or taking the time to help or serve clients (Usman et al., 2023; Shen et al., 2017; Triono & Hikmawati, 2020).

## CONCLUSION

Based on the results and discussions that have been described, it can be concluded that the provision of family support interventions can significantly control hypertension in the elderly. Where this intervention consists of 2 forms, namely the family only acts as a support and companion, or the family is fully involved to intervene in various types such as supervision or partnership. The results of the literature study of the entire article found that the control group and the intervention group at the initial examination showed data that were not significantly different, but after the intervention there was a significant difference. After the intervention, all articles show that the elderly carry out efforts to prevent and control hypertension, including: 1) decreased salt consumption, 2) increased physical activity and controlled behavior of cigarette or alcohol consumption 3) increased blood pressure control, 4) improved medication adherence, 5) made appointments with health workers, 6) improved welfare with partners, self-efficacy and behavior in worship, 7) decreased salt concentration in food and urine and regular sleep duration.

Based on this, health workers are advised to optimize family empowerment in controlling hypertension and for families, it would be better if they increase awareness and concern in helping the elderly control their hypertension. More research is needed using more systematic research methods

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## Conflict of Interest Statement

The authors state that there is no potential conflict of interest with respect to the writing and publication of this article.

## Reviewer's Advice

The authors leave it entirely up to the maintainers to review our articles, and the reviewer results are relayed back to us if they need to be corrected according to the input of the reviewer team.

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