

Editorial

Narsingh Verma

Department of Physiology, King George's Medical University, Lucknow, Uttar Pradesh, India

The current era of hypertension research is defined by expansion, not replacement. Traditional blood-pressure control remains foundational, but newer work is adding better risk stratification, smarter monitoring, and more realistic care pathways that can improve outcomes across diverse populations.

The strongest framing is to highlight three priorities: prevention, precision, and implementation. Prevention includes diet, salt reduction, physical activity, and early screening; precision includes individualized targets and risk-based therapy; implementation includes digital follow-up, guideline adherence, and system-level quality improvement. Together, these directions show that hypertension research is becoming more clinically practical and more globally relevant.

This issue of hypertension includes original researches, "Prevalence of social jet lag and associated sleep and metabolic health risks", "Urban lifestyle and hypertension" and case reports are "Routine UACR screening unmasking reflux nephropathy after a pregnancy complicated by gestational diabetes", "Resting dyspnea, regional wall motion abnormality, and normal coronary angiography in a hypertensive patient,"

Happy Researching

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Corresponding author

Narsingh Verma, Department of Physiology, King George's Medical University, Lucknow, Uttar Pradesh, India.
Email: narsinghverma@kgmcindia.edu

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