Validation of the OMRON HEM-7251G upper arm blood pressure monitor, in oscillometry mode, for clinic use and self measurement in a general population, according to the European Society of Hypertension International Protocol revision 2010

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Abstract

The OMRON HEM-7251G, an upper arm blood pressure monitor, in oscillometry mode, for clinical use and self measurement, was validated, in a general population, according to the European Society of Hypertension International Protocol revision 2010. The protocol requirements were followed precisely. The device passed all of the requirements and, fulfilling the standards of the protocol, is recommended for clinical use.

Device Details

Brand OMRON Model HEM-7251G

Manufacturer OMRON Healthcare Co., Ltd.

Location Upper Arm
Method Oscillometry

Purpose Clinic Measurement, Self/ Home Measurement

Operation Fully Automatic
Arm Cuff 17.0 cm to 32.0 cm

Other Features The function to guide cuff wrapping

Memory capacity for 90 readings for two users

3rd generation of mobile telecommunications technology to connect with the dedicated server

The function to measure room temperature

Methodology

Familiarisation

Hundreds of test-measurements were carried out. No problems were encountered.

Recruitment

Hypertensive subjects were recruited from outpatients clinic in department of cardiology in the Kansai Medical University, Hirakata Hospital (Osaka, Japan). Some participated immediately without appointment. Normotensive subjects were recruited from outpatients and volunteers. There were some difficultlites in recruiting subjects with DBP with in the high range.



Screening and Recruitment Details

Screening and Recruitment			Recruitment Ranges				
Total Screened	48		mmHg		All	On Rx	
Total Excluded	15			Low	< 90	< 90 0	
Ranges Complete	0			Low	90 - 129	10	3
Ranges Adjustment	0		SBP	Medium	130 - 160	11	7
Arrhythmias	4			Lliab	161 - 180 9		2
Device Failure	0			High	> 180	3	3
Poor Quality Sounds	1						
Cuff Size Unavailable	2			Low	< 40	0	4
Observer Disagreement	0			Low	40 - 79	12	4
Distribution	0		DBP	Medium	80 - 100	10	5
Other Reasons	8			Lliab	101 - 130	11	4
Total Recruited		33		High	> 130	0	4

Procedure

The European Society of Hypertension International Protocol revision 2010 for the validation of blood pressure measuring devices in adults was followed precisely.[1] Overseen by an independent supervisor, measurements were recorded by two observers blinded from both each other's readings and from the device readings.

Results

Subject Details

Sex			
Male : Female	16 : 17		
Age (years)			
Range (Low : High)	28 : 70		
Mean (SD)	51.3 (9.8)		
Arm Circumference (cm)			
Range (Low : High)	22.6 : 31.4		
Mean (SD)	28.1 (2.4)		
Cuff for test device			
Other	33	(17.0 - 32.0 cm)	
	SBP	DBP	
Recruitment BP (mmHg)			
Range (Low : High)	104 : 212	55 : 112	
Mean (SD)	147.3 (26.0)	88.9 (16.5)	

Observer Measurements in each Recruitment Range

SBP (mmHg)		DBP (mmHg)			
Overall Range (Low : High)	98 : 191	Overall Range (Low : High)	49 : 120		
Low (< 130)	32	Low (< 80)	34		
Medium (130 – 160)	39	Medium (80 – 100)	35		
High (> 160)	28	High (> 100)	30		
Maximum Difference	11	Maximum Difference	5		

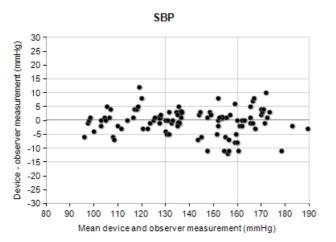
Observer Differences

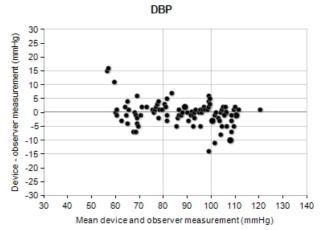
	SBP (mmHg)	DBP (mmHg)	Repeated measurements	
Observer 2 – Observer 1				
Range (Low : High)	-4:+4	-4:+4		
Mean (SD)	0.2 (1.5)	0.3 (1.5)	0	

Validation Results

Part 1	≤ 5 mmHg	≤ 10 mmHg	≤ 15 mmHg	Grade 1	Mean (mmHg)	SD (mmHg)
Pass Requirements						
Two of	73	87	96			
All of	65	81	93			
Achieved						
SBP	77	92	99	Pass	-0.6	4.7
DBP	85	94	98	Pass	-0.2	4.4
Part 2	2/3 ≤ 5 mmł	-lg 0	/3 ≤ 10 mmHg	Grade 2		Grade 3
Pass Requirements	≥ 24		≤ 3			
Achieved						
SBP	26		1	Pass		Pass
DBP	31		1	Pass		Pass
Part 3						Result
						PASS

Plots





Discussion

Recruitment of subjects with high BP, particularly high DBP, proved to be difficult and accounted for most of the extra screened subjects; this is reflected in the overall distribution, as shown in the DBP plot, in which most of points are below 115mmHg.

Conclusion

As the device has reached the required standards, it is recommended for clinical and personal use in a general population.

Acknowledgements and Conflict of Interest

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References

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