INTRODUCTION

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Studies of the aetiology of essential hypertension are limited by the lack of understanding of the time when hypertension begins (Zinner et al., 1975).

In children, it was generally accepted that a cause for hypertension could be identified, in almost all cases. However, the report of the task force on blood pressure control in children (1977), suggest that recent evidence casts doubt upon the validity of this concept; because the aetiology in many cases of juvenile hypertension remains undetected. Those individuals thus, probably fall into a category that could be construed as essential hypertension. The report of the task force has also put the question, whether a primary (essential) hypertensive state exists in the paediatric population as a precursor to its expression in adult life or as an entity unique to this age group (with no long-term implication). Zinner et al. have answered this question two years before (1975). They found a significant positive relationship between the blood pressure of the children in two surveys done four years apart for the same age group of hypertensive children.

McLain in(1976), has supported this result, reporting that the hypothesis that elevated blood pressure in adults is rooted in childhood is gaining more acceptance.

This hypothesis, thus, indicates the need for early identification of children with elevated blood pressure so that they can be put under medical surveillance. Accordingly a strategy of intervention in childhood would be preferable, to present approaches directed largely towards early diagnosis

and treatment of clinically established hypertension in adults (Rance et al., 1974).

It is necessary then, to have available, Egyptian percentiles for blood pressure to help delineating normative values specific for different age-groups for the Egyptian children to serve as a background for detecting early hypertension.