In September 2017 the experts of the American Diabetes Association (ADA) published a new document dedicated to diagnostics and treatment of arterial hypertension (AH) in patients with diabetes mellitus (DM). AH is one of the main risk factors in people with DM, and its prevalence depends on many circumstances and reaches 80%. It has been proved that BP control with antihypertensive therapy reduces the frequency of cardiovascular diseases related to atherosclerosis, heart failure, and microvascular complications. Published document consists of several parts that include detection, screening and Keywords: Hypertension, diabetes, Morocco, risk factors, Anthropometric measurements, cross-sectional survey. ©Mohamed Berraho et al. Pan African Medical Journal (ISSN: 1937-8688). Â© Both hypertension and diabetes predispose to the development of CVD and renal disease [15,16]. The presence of hypertension in diabetic patients substantially increases the risks of coronary heart disease, stroke, nephropathy and retinopathy [17-19]. Indeed, when hypertension coexists with diabetes, the risk of CVD is increased by 75%, which further contributes to the overall morbidity and mortality of an already high risk population [17,20]. In Morocco, there are no studies that have focused on hypertension and its associated risk factors through patients with type 2 diabetes. Hypertension, or high blood pressure, often occurs alongside diabetes mellitus, including type 1, type 2, and gestational diabetes, and studies show there may be links between them. Hypertension and type 2 diabetes are both aspects of metabolic syndrome, a condition that includes obesity and cardiovascular disease. Both hypertension and diabetes may have some underlying causes in common, and they share some risk factors. They also contribute to a worsening of each other’s symptoms. A hypertensive crisis means that the individual needs to see a doctor immediately. A person with early-stage hypertension has a risk of developing hypertension in the future. Lifestyle habits can help control blood pressure and prevent hypertension and its complications. Hypertension is more prevalent in patients with diabetes, causing target organ damage, especially cardiovascular and renal vascular disease. The associated decline in cardiovascular health accounts for >80% of the mortality,43,57 In addition to cardiovascular disease, the three major microvascular complications of diabetes are retinopathy, neuropathy, and nephropathy. Renal complications in diabetes. Diabetic kidney injury is ameliorated by EP1 antagonism26 and exacerbated by EP4 agonism,41 but the role of EP4 remains controversial. There is undoubtedly a detrimental role of PGE2/EP receptors in diabetic nephropathy, but more work is needed to clarify the exact pathways involved, with many controversies awaiting clarification. Mortality from cardiovascular disease is 2 to 4 times higher in patients with type 2 diabetes compared with patients with similar demographic characteristics but without diabetes. The management of hypertension in patients with diabetes is as important as glucose control in the prevention of long-term diabetes complications. This article discusses the incidence of hypertension in diabetes, the impact of hypertension on the development of long-term complications, diagnosis of hypertension in patients with diabetes, blood pressure goals, the treatment of hypertension in patients with diabetes, a