Note from the Editor

This ‘bumper’ issue heralds in the festive season with a wealth of reports and activities. It is a good time for reflection and here is my small offering. It sometimes seems as if progress in high blood pressure management is stagnant in comparison with related risk factors such as diabetes and lipids. This may be so in terms of new blood pressure lowering drugs, although even the latest antidiabetic agents reducing cardiovascular events probably operate partly via blood pressure reduction. However as evidenced by the contents of this newsletter, there is an abundance of activity and progress on the broader front of prevention, detection and management of high blood pressure across the spectrum of rich and poor worldwide. While better translation of existing knowledge into practice has the potential for enormous gains in health, nonetheless it is vital we continue to search for fundamentally new knowledge that will make our current approaches to high blood pressure appear like the era of polio of my childhood, when the use of isolation and iron lungs were the only means to prevent and treat this devastating disorder. The laudable efforts illustrated in this newsletter must be paralleled by supporting researchers with vision to explore unimagined worlds for tackling high blood pressure.

A special thanks to Mary Trifault for her sterling work as Editor and appreciation to other Editorial Board Members, and to all who contribute so generously in writing for the Newsletter.

Finally, wishing you all good reading, take a break and be sure to find time to reflect on how to achieve better health and life in the New Year.

Lawrie Beilin

President’s Column

Clearly we are ending 2018 with an outstanding list of accomplishments – all due to our member societies and partners. The Board Meeting in Beijing in conjunction with the International Society of Hypertension (ISH) meeting was superb. Our special thanks to President-Elect Zhang for the organization and our congratulations to the ISH leadership for a great meeting. Congratulations are also in order to the World Stroke Organization, American Heart Association, and World Health Summit for very productive and high impact functions.

With implementation of effective interventions as a key objective for hypertension prevention and control, the Journal of Clinical Hypertension has a major role, and it is highly gratifying to read EIC Weber’s section on selected content. Likewise, the Coalition for Circulatory Health White Paper, Driving Sustainable Action for Circulatory Health, is a valuable complement resource for the WHL mission. The WHL envoys represent a highly valued team providing expertise addressing diverse populations and clinical aspects of high blood pressure, and we are so pleased to announce our Envoy for Blood Pressure Measurement – Professor George Stergiou.

While the reports in this year-end issue of the Newsletter are impressive, the anticipations for 2019 are mind-boggling with input from the membership. Please consider recognizing global excellence with the nomination of individuals and organizations for one of the WHL awards. And most important – please know how much you are appreciated for your WHL support and activities. On behalf of the WHL Community we wish you all a wonderful Season of Peace and Prosperity.

Dan Lackland
MEETINGS OF NOTE

World Hypertension Day Reports

Hypertension Canada’s Hypertension Month Campaign
By Crystal Ceres, Communications & Membership Associate, Hypertension Canada

Hypertension Canada struck a win this year for hypertension awareness. This was the first year that May as Hypertension Month was formally acknowledged by Canada’s federal regulator, Health Canada. More than 1,500 community pharmacies participated in public blood pressure screenings and over 4 million Canadians had their blood pressure measured.

With a focus on blood pressure accuracy, we challenged healthcare professionals and pharmacists to not only measure blood pressure, but also do so using validated blood pressure measurement devices. Further, to mark World Hypertension Day 2018, monuments across the country were lit in red, including the Calgary Tower, Toronto CN Tower, and Niagara Falls. The BP campaign, supported by national sponsors LifeSource, Servier Canada, Dairy Farmers of Canada, Loblaw Companies Limited, AstraZeneca, and Burgundy Asset Management, was featured by several of Canada’s national news outlets and generated 37 million media impressions – more than one impression for every Canadian.

Note from the Editor & President’s Column

World Hypertension Day Reports

World Hypertension Congress in Beijing

International Society of Hypertension Beijing

JCH Editor’s Corner

Coalition for Circulatory Health White Paper

European Society of Hypertension Report

World Stroke Day

Hypertension Council 2018 Report

World Hypertension Action Group/PAHO

Blue Cross Blue Shield Louisiana

Call for Nominations – Excellence Awards

New Blood Pressure Envoy

Past Meetings of Note

Links of Note

Calendar of Events
Hypertension Research Center of Isfahan, Iran

By Prof. Alireza Khosravi, Head of Hypertension Research Center; Isfahan Cardiovascular Research Institute; Isfahan University of Medical Sciences

The Isfahan Hypertension Research Center team

On the occasion of World Hypertension Day 2018, the Hypertension Research Center, related to Isfahan Cardiovascular Research Institute of Isfahan University of Medical Sciences Iran, launched a free station for measuring blood pressure of patients and their attendants. In this program, blood pressure was measured for 500 individuals referring to clinics (either patient or his/her attendants) between May 17 and May 24, 2018. Some educational pamphlets were distributed to all the patients and their questions were answered by an expert.

We considered an individual as a hypertension case if her/his systolic blood pressure (SBP) was ≥140 mmHg and her/his diastolic blood pressure (DBP) was ≥90 mmHg, or if he/she reported having been diagnosed with HTN and was taking antihypertensive medications.

RESULTS

Of 500 participants in this program, 288 (57.6%) were female. Mean age (SD) of participants was 51.83 (13.28) ranged between 19 and 90 years old. Mean age (SD) in females and males were 50.39 (12.68) and 52.89 (13.63), respectively. The number (%) of people with hypertension (according to above definition) in total, in females and males was 264 (52.8%), 119 (56.1%) and 153 (53.1%), respectively. Mean (SD) of systolic versus diastolic blood pressures in people with and without hypertension were 138.25 (18.85) versus 87.05 (11.88) and 113.69 (12.02) versus 75.00 (7.80). The Research Center was encouraged by the level of participation and wishes to thank its team for this highly successful outreach effort.

World Hypertension Conference 2018 Beijing, China

The World Hypertension League Board, Executive and Members held their annual meeting in Beijing, China, in September during the International Society of Hypertension (ISH) conference. A great time was had by all.

WHC in Photos:
WHL NEWSLETTER 162/2018

L – R: Prof. Xin Hwa Zhang, Prof. Liu Lisheng and Dr. Dan Lackland at the WHL Board dinner.

Profs Zhang and Liu Lisheng keep the roadshow going.

ISH Beijing 2018

A Great Success!

By Thomas Unger
ISH Secretary; Chair, Beijing 2018 Committee

With almost 3000 registered participants, Hypertension Beijing 2018, the 27th Meeting of the International Society of Hypertension (ISH), held in cooperation with the Chinese Hypertension League and the Asian Pacific Hypertension Society, was a great success. The scientific programme comprised 99 sessions with a total of 657 oral presentations and a further 934 poster presentations for a total of 1951 abstracts. The faculty was truly international: 323 faculty members came from 43 countries. The high scientific quality of the congress, with its balance between basic and clinical science as well as public health and population science, and incorporation of participants from all continents, was unanimously acknowledged.

Conference guests enjoy the Presidential Reception and Dinner in Beijing.
The local organizing committee spared no effort to make the congress as enjoyable as possible with breathtaking performances at the Presidential Dinner as well as the opening and closing ceremonies. I would like to thank the LOC as well as all members of the ISH Beijing 2018 Committee: Neil Poulter, Maciej Tomaszewski, Cheol-Ho Kim, Lars H. Lindholm, Dylan Burger, Jiguang Wang, Alta Schutte, Masa Horiuchi, Ruan Kruger, and Trefor Morgan. A special thanks also to Helen Horsfield from the ISH Secretariat for tirelessly managing us and the congress as a whole.

L – R: ISH Social encounters: Dr. Arakawa, Brenda Beilin and Ringmar Lindholm

ISH 2018 – Some Highlights!
By Peter M. Nilsson, Professor
Lund University, Sweden

During the recent ISH meeting in Beijing a lot of attraction was drawn to the update on the MMM18 campaign, as presented by ISH President Neil Poulter. The total number of screened subjects worldwide for their blood pressure was about 1.5 million subjects. This is a substantial increase from MMM17 and covering more countries. A worryingly high proportion of people have undetected hypertension, and many also poorly controlled hypertension according to a recent publication on MMM17 [1].

Another memorable moment was when Professor Mark Caulfield talked about the new discoveries in the field of genetics of hypertension. Currently about 1000 genetic markers of blood pressure and hypertension are known. The puzzling fact is that these markers do not overlap with another set of genetic markers for type 2 diabetes and another one for renal function, even if there are so many overlaps between these entities in clinical practice. Further research is clearly needed.

Finally, the new ESH-ESC Guidelines on arterial hypertension 2018 [2] were compared with recent American guidelines, the latter proposing a lower threshold for the diagnosis of hypertension and lower treatment targets. This is much debated as the American view has been inspired by the SPRINT trial where an unusual method for blood pressure measurement was applied that could lead to lower blood pressure recordings than conventional office blood pressure recordings [3]. Some people feel that the ISH should work for a new set of simplified international guidelines on hypertension to ease the transatlantic tensions on these issues.

References

Journal of Clinical Hypertension: Editor’s Corner
By Michael A. Weber, MD

Adherence to Blood Pressure Medications: A Growing Issue in Treatment

We have known for several years that failure of patients to take their antihypertensive drugs is a major cause of poor treatment results. This
problem not only affects blood pressure control but leads to increased stroke and cardiovascular events in hypertensive patients.

In a recent issue of the *Journal of Clinical Hypertension (JCH)* a group of French scientists (Lefort et al) from the University of Rennes, working on behalf of the French League Against Hypertension, performed a survey to better understand the state of adherence to treatment in French patients aged 55 or more. This work is known as the Metascope Survey in France and assessed adherence to treatment using the Girerd Compliance Test. Of note, Dr. Girerd is one of the authors of this study.

The authors report in their article in *JCH* that in 2743 patients in this 55 and older age group adherence to treatment was 64%—indicating that over one-third of patients were taking less of their medications than prescribed, or no medications at all. Women were more likely than men to take their medications—69% vs. 58%. Other important findings were that adherence increased with age. But it decreased in patients with multiple comorbidities, either other cardiovascular or metabolic conditions, and even if there were other non-cardiovascular conditions.

A compelling finding was that the number of tablets prescribed for hypertension was an important factor: the greater the number of pills, the poorer the adherence. This problem was more pronounced in men; women were more likely to be responsible in following their treatment. As well, taking medications for reasons other than hypertension resulted in poorer adherence to blood pressure treatment.

The conclusions are clear: Reduce the number of tablets prescribed for treating hypertension, and particularly in patients taking drugs for other reasons. This should not be difficult to achieve. Recent guidelines in Europe (ESC/ESH) and the United States (ACC/AHA) stress the importance of using combination products that can provide two or even three medications in a single pill. The RESOLVE to Save Lives initiative, providing hypertension care in communities with limited resources, has made the use of combination products a cornerstone of its therapeutic strategy. The World Hypertension League, for which *JCH* is the official journal, is an active partner in the RESOLVE program.

Please go online to the *Journal of Clinical Hypertension* to download this article on adherence and many others as well. You can also get automatic emailed announcements of each month’s table of contents by following simple instructions at the *JCH* site. Thanks to the generosity of *JCH*’s publisher, Wiley, there is no charge for downloading articles.


**The Journal of Clinical Hypertension (JCH) is the Official Journal of the World Hypertension League.**

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**White Paper: Coalition for Circulatory Health**

The Coalition for Circulatory Health recently launched a new *White Paper for Circulatory Health: DRIVING SUSTAINABLE ACTION FOR CIRCULATORY HEALTH*, a collaboration of the World Heart Federation (WHF), the International Society of Hypertension (ISH), the World Stroke Organization (WSO) and the World Hypertension League (WHL).

Aimed at policymakers in national and international bodies, the White Paper is a solution-oriented paper which draws on success stories and patient testimonies to present feasible actions in education and training, universal health coverage, financing, infrastructure, and access to medicines and technologies to advance circulatory health.

**The global cost of circulatory diseases**

- A global burden of cardiovascular disease, diabetes and kidney disease that account for half a billion disability years
- Almost 1 billion people affected by hypertension, a major risk factor for circulatory diseases
- A risk of stroke that doubles every decade after 55 years of age

**Recommendations from the White Paper on Circulatory Health**

- Improve access to prevention and care for circulatory health

*Continued on page 7*
• Strengthen the role of primary health care doctors, nurses and trained health workers in circulatory health
• Mobilise national resources for circulatory health, and ensure that governments and international organisations measure initiatives and drive action

Speaking at the launch were EU Commissioner for Health and Food Safety, Vytenis Andriukaitis, Jamaica’s Minister of Health, Christopher Tufton and David Wood, President of the World Heart Federation. To access the full white paper, click here:

OVERVIEW - European Society of Hypertension

By Konstantinos Tsioufis, Professor of Cardiology, University of Athens, Greece; President of European Society of Hypertension (ESH) (2017-19)

The European Society of Hypertension (ESH) has a three-decade history as an ever-evolving network for scientific exchange in hypertension in Europe. The Society is committed to the promotion of research and education as well as to improvements in clinical practice in the field of hypertension and cardiovascular prevention.

There are 12 working groups focusing in diverse fields of clinical and experimental hypertension, that are important contributors to the activities of the ESH. Its acclaimed annual meeting has been organized under the auspices of the Society since 1989 and, with participants from all over the world, it has been highly successful in endorsing scientific networking and the spread of the latest knowledge in hypertension. Educational initiatives also include summer schools for younger candidates interested in hypertension and advanced courses for more experienced scientists.

The ESH publishes various educational materials including two leading hypertension journals, i.e the Journal of Hypertension and the Blood Pressure journal, as well as clinical practice documents and scientific newsletters. The ESH guidelines for the management of hypertension published jointly with the European Society of Cardiology are consistently highly circulated. Its established programs of Hypertension Specialists and Centres of Excellence have provided a paradigm for certification and accreditation in hypertension. Other activities include a lively internet portal, promotion of multicentre research projects as well as development of an ESH smartphone app for patient-physician interaction.

It is clear that the World Hypertension League and the ESH share common objectives. The ultimate purpose is to optimize hypertension prevention and control in order to reduce the associated morbidity. A partnership between the two organizations is a logical and natural move that will allow better sharing of knowledge, expansion of related health policies and more efficacious advancements in hypertension research.

World Stroke Day 2018

Stroke Leaders Highlight Global Cost of Government Inaction

On World Stroke Day, October 29th the World Stroke Organization called for urgent action and investment to address the growing burden of stroke and circulatory diseases globally.

Highlighting the disappointing outcome of the recent UN High Level Meeting on Non-Communicable Diseases (NCDs) the WSO President, Prof. Michael Brainin said,

‘We know that 80% of strokes could be prevented by addressing a small number of risk factors, including hypertension, diet, smoking and lack of exercise. We also know that action on prevention would also contribute to a massive scale reduction in heart disease, cancer and diabetes.’

‘The impact of stroke on individuals, families and society as a whole is devastating. Stroke survivors can face significant impairment of movement, speech, and cognition alongside debilitating psychological, social and financial problems.

‘With this knowledge, the current lack of political will and investment cannot be easily comprehended, especially when you consider the cost of such inaction. While 5.5 million people die as a result of stroke each year, there are 80m stroke survivors in the world, many of whom live with some form of disability or impairment. While the costs to individuals is incalculable, the cost to society is astronomical.’

Continued on page 8
A recent policy document ‘Driving Sustainable Action for Circulatory Health’ published by the WSO and its partners in the Global Coalition for Circulatory Health, has calculated the global cost of circulatory diseases, including stroke, at US$957 Billion in 2015. On current projections this figure is set to rise to US$1044 Billion by 2030. The white paper sets out four key areas for action that, if enacted, would ensure delivery of global goals on disease reduction which are driving the rise in direct and indirect costs of NCDs. These include legislative interventions that:

- Deliver policies and programmes to address tobacco, alcohol and unhealthy foods, promote clean air and deliver a built environment that fosters safe physical activity.

- Ensure access to affordable, quality-assured essential medicines, delivered by adequately trained staff, including access to multi-therapy treatments.

- Mobilise sufficient resources to combat non-communicable diseases including stroke. The taxation of unhealthy products such as alcohol, tobacco, unhealthy foods and non-alcoholic beverages (such as sugar-sweetened beverages) would generate revenues that could be directed to further prevention and control of circulatory diseases at global and national levels.

- Put in place reliable, simple, and fit-for-purpose surveillance systems for monitoring the burden of stroke and the prevalence of NCD risk factors and treatment of stroke at national and global levels.

Prof Brainin concluded, 'At the recent UN High Level Meeting on NCDs in New York, governments delivered a weak response to a global crisis and agreed to wait 7 years before reviewing progress. In that time another 38.5 million people will die of stroke. We can’t wait until 2025 to calculate our losses, we need strong leadership and bold action to save lives now.'

To download the policy paper please visit http://ow.ly/QukO30mnqn0

Hypertension Council 2018
A Message from the Chair
By Joey Granger, PhD, FAHA, Chair, AHA Council on Hypertension

Our Council on Hypertension (COH) continues to make significant progress in our efforts to address hypertension as a national health issue—both as a professional forum for scientific investigators and clinicians and from the viewpoint of effective treatment strategies for patients.

Recently, members of COH, Council on the Kidney in Cardiovascular Disease, and new members from the American Society of Hypertension (ASH) met for a joint Hypertension conference from September 6-9th in Chicago. This premier scientific meeting on hypertension not only focused on recent advances in basic, clinical, and population research on hypertension but also on the most effective means for detecting, evaluating and treating high blood pressure across diverse populations. We had over 900 attendees at the meeting and approximately 440 abstracts presented. We also presented over 80 awards at the meeting including our highest award, the Excellence Award for Hypertension Research. The 2018 recipients of the Excellence Award were Drs. Clinton Webb and Paul Whelton.

I would like to thank Karen Griffin, Jan Basile, Michael Bloch, and other members of the scientific programming committee for an outstanding job! Although our 2018 meeting
was highly successful, we hope to have an even better meeting in 2019.

So mark your calendar:

**2019 Hypertension Scientific Sessions**
New Orleans Marriott in New Orleans, LA
September 5-8, 2019

This is my last message as Chair of COH. I would like to take this opportunity to thank my colleagues on our leadership committee as well as all members of COH for their support over the last few years. We made important progress in many areas including the merger of ASH members into the COH and increasing interaction with the Council on the Kidney in Cardiovascular Disease. Our council will be in good hands with the leadership of Karen Griffin as chair and Curt Sigmund as our new chair-elect.

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**World Hypertension Action Group**

By John Kenerson MD FACC, WHL Envoy for Global Faith-Based Hypertension Control Initiatives; Director, World Hypertension Action Group

As we move towards 2020 and the close of a decade of growth and influence, WHL has evolved from a confederation of individual country hypertension societies, to a dynamic partnering focus. Vital and vibrant bonds with WHO, ISH, as well as PAHO/CDC/SHTP, GHI, and RESOLVE has meant developing and implementing systems for primary care delivery of hypertension integrated services through clinics focused on prevention and control. This is a blueprint that has worked well in high- to middle-income countries, and in some urban low-income countries, but often does not diffuse down to the rural destitute poor.

Unfortunately, the low resource venue outcome gap has widened. Perhaps the criminal Willie Sutton gave us a clue when answered a query as to why he robbed banks: “Because that is where the money is!” If we take a teleological view, we might question why Faith-Based and Non-Governmental Organizations and medical missions are selectively found in low-resource venues “because that is where the money isn’t!”

Visionary WHL leader systems thinkers might look forward and see a future where the whole is greater than the sum of its parts, without gaps, and see the importance of interconnectivity and interdependence opportunities.

Partnering with WHL, the World Hypertension Action Group (WHAG) looks to develop the complementary pre-primary care niche by working with FBO and NGO medical missions, fostering ICT interconnectivity. To avoid criticism of medical tourism and dilletante behavior, a defined comprehensive knowledge base has been developed with a total of 25 modules. This includes a core curriculum of 15 modules focused on situational awareness, BP screening, and measurement, medication, and a unique management algorithm driven by local data.

The complete WHAG tool box for low-resource venues will be available in 2019, including a multi-level website, videos, a manual, compendium, with available low-literacy hypertension coloring books, co-founded by Colleagues In Care. Stay tuned!
Colombia, and Cuba have now transitioned to formal programs and are expanding nationally. For example, the HEARTS program was officially launched in Barbados (joining Chile, Columbia, and Cuba) in August 2018. Key developments and activities include the strong endorsement of the program by the new Minister of Health and Wellness, the assembly of a program coordinator and technical team, and the training of site managers, including physicians, nurses and pharmacists.

Masterclasses are also planned for November 2018, to train all staff at the clinical primary care sites. In addition, a highly successful site visit recently took place in Chile. Members of the PAHO and WHO, CDC, consultant advisors, and governmental and community leadership met in Santiago, Chile in September of this year. National and local control rates of hypertension have dramatically increased. In addition the site visit included a formative visit to Antofagasta in northern Chile where significant expansion of the program has now been planned and is being implemented. Due to success of the program and local and national positive results, formal agreements are now solidified with Argentina, Ecuador, Panama, and Trinidad-Tobago. A formal site visit to initiate the HEARTS in the Americas Program and to review the HEARTS Technical package is already scheduled for Ecuador and Trinidad-Tobago in late November and Panama and Argentina in early December this year.

Several recent publications which were specifically the result of the activities described in this newsletter have recently been published in the journal of our organization, the Journal of Clinical Hypertension.

The success and expansion of these efforts in Latin America and the Caribbean continue to emphasize the importance of collaboration and formative involvement between our organization and those of others. The World Hypertension League is in a key position to support and to play an important role in the success of such programs such as the HEARTS in the Americas, Global HEARTS, and the RESOLVE to save lives programs. These initial successes could not have been accomplished without all those involved. Thank You.

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**Blue Cross Blue Shield Louisiana**

**Blue Cross Honors Nearly 400 Louisiana Primary Care Doctors for Improving the Health of Louisianians**

BATON ROUGE – Primary care doctors in Blue Cross and Blue Shield of Louisiana’s Quality Blue program are getting better health results for their patients who have chronic conditions.

Blue Cross announced its 2018 Quality Blue program results at the annual Statewide Learning Collaborative on November 1st, at the Hilton Capitol Center in Baton Rouge.

“We started the Quality Blue program to closely partner with healthcare providers around the state, support them in treating their patients and share information with them that helps coordinate care, close gaps and, overall, boost health outcomes,” said Vindell Washington, M.D., Blue Cross chief medical officer. “The results show it’s working. We’re stronger together in improving the health of our shared customers – their patients, our members.”

Quality Blue program data through September 2018 show more enrolled primary care doctors are getting their patients at goal for the chronic conditions targeted in Quality Blue:

- 38% of their patients are meeting clinical quality measures for diabetes
- 74% of their patients are meeting clinical quality measures for hypertension (high blood pressure)
- 45% of their patients are meeting clinical quality measures for vascular disease
- 79% of their patients are meeting clinical quality measures for kidney disease

Blue Cross establishes the clinical quality measures for each condition to track health improvement over time. For example, the doctors are tracked to see how many of their patients have blood pressure or blood sugar elevations controlled.
readings in a healthy range, are taking medication as directed, or are not smoking.

At the collaborative, nearly 400 individual primary care doctors from all regions of Louisiana were recognized as Top Performers in treating each of these conditions. This included 387 doctors who received Top Performer awards in hypertension, who were jointly recognized by Blue Cross and the World Hypertension League.

For more information about Quality Blue, visit www.bcbsla.com/QBPC. To learn more about Blue Cross Blue Shield Louisiana, visit our website at www.bcbsla.com.

WHL Excellence Awards

CALL FOR NOMINATIONS

The World Hypertension League (WHL) has developed Excellence Awards at the Population Level in the categories of: Dietary Salt Reduction; Hypertension Control; Cardiovascular Risk Factor Control and Clinical Research. These awards were developed to provide recognition to individuals, organizations and interventions that make tangible progress towards population prevention and control of hypertension.

The following awards seek to raise the profile and encourage the activities of individuals and organizations in preventing and controlling hypertension at the population level, and thus contribution to the effort to reduce the burden of hypertension globally:

Individual Awards:

- Liu Lisheng Excellence Award in Population Cardiovascular Risk Factor Control
- Norman Campbell Excellence Award in Population Hypertension Prevention and Control
- Peter Sleight Award for Excellence in Hypertension Clinical Research
- Claude Lenfant Award for Excellence in Population Hypertension Control
- Excellence Award in Dietary Salt Reduction at the Population Level

Organizational and Interventions Awards:

- Dietary Salt Reduction
- Hypertension Control
- Cardiovascular Risk Factor Control
- Clinical Research

Notable Achievement Awards:

- Dietary Salt Reduction at the Population Level
- Hypertension Control at the Population Level

For a nomination forms and award descriptions, please go to this link. Note that the deadline for submission of nominations is April 31, 2019.

WHL Announces New Special Envoy for Blood Pressure Measurement – George Stergiou MD

The measurement of blood pressure is the most common procedure performed in clinical medicine. The diagnosis of hypertension and the decisions for life-time treatment are exclusively dependent on blood pressure measurement. Despite intense efforts for several decades worldwide, accurate blood pressure measurement remains a largely unresolved public health issue with poor methodology and inaccurate devices often being responsible for the misdiagnosis and the mismanagement of hypertensive patients. With recent hypertension guidelines recommending lower blood pressure targets with treatment, the need for accurate blood pressure evaluation has become even more important.

The first issue is that only 1 in 5 blood pressure monitors available on the market have proven accuracy with independent validation studies. An important step forward is the AAMI/ESH/ISO Universal Standard for the validation of blood pressure monitors, which...
will be published in 2019 and will replace all previous protocols, and eventually will become mandatory. The second issue is the use of inappropriate methodology, which is crucial for accurate blood pressure evaluation.

The Hypertension Centre STRIDE-7 of Athens University is a non-profit organization founded by the European Economic Community STRIDE (Science and Technology for Regional Innovation and Development in Europe) program. In the last 25 years the Hypertension Centre STRIDE-7 has considerably contributed in blood pressure monitoring research dealing with both methodological and technological issues.

International initiatives are urgently needed, aiming to optimize office, home and ambulatory blood pressure measurement in clinical practice. The World Hypertension League is an important vehicle for improving the management of hypertension worldwide and I am looking forward to joining efforts and expertise aiming to change the practice of blood pressure measurement.

George Stergiou, MD

BIO
Professor of Medicine, Chairman of Hypertension Center STRIDE-7, Athens University, Greece; Chairman of European Society of Hypertension (ESH) Working Group on Blood Pressure Monitoring and Cardiovascular Variability; International Society Hypertension (ISH) Council member. International Pediatric Hypertension Association (IPHA) executive committee member; ISO committee member on blood pressure monitoring equipment; Research focused on blood pressure monitoring methodology and technology, pediatric hypertension, antihypertensive drug action. Authored >260 PubMed articles; Citations >16,000; h-index 56.

PAST MEETINGS OF NOTE

Brazilian Society of Hypertension
During the Brazilian Society of Hypertension meeting convened in São José do Rio Preto from August 8 – 11th, a joint WHL and Brazilian Society of Hypertension session was held. Dr. Marcelo Orias, Vice-President of WHL, participated at the meeting and handed out the 2018 WHL NOTABLE ACHIEVEMENT AWARDS in the category of Prevention, Treatment & Control of Hypertension at the Population Level to Drs. Márcia R. Simas and Márcia M. G. Gowdak for their contribution to developing an App to help patients and physicians control BP better. Congratulations to the Brazilian Hypertension Society and to Drs Simas and Gowak!

Southern Medical Association/ASH Carolina, Georgia & Florida Chapter Joint Symposium
The Carolinas-Georgia-Florida Chapter of the American Society of Hypertension (ASH) partnered with the Southern Medical Association (SMA) to offer attendees an outstanding accredited CME opportunity this fall in Charleston, South Carolina from October 31-November 2.

Focusing on “Improving the Lives of the Southern Patients,” the ASH Chapter-SMA Special Joint Symposium addressed health issues that are particularly problematic in the southeastern United States. Presented by experts and leaders in the field of medicine, this one-day event focused on how to improve
identification and management of these problems. Topics included:

- The Risk Profile of the Southern Patient
- Monitoring Blood Pressure & Disease Risks
- Disease Risks Treatment and Control - Blood Pressure Management
- Strategies and Interventions for Implementation
- Where Do We Go in the Future: Protocol Implementation

Action Plan for Healthy Lives and Well-being for All”, aimed at aligning the cooperation of the main global health organizations in reaching the United Nation’s health targets. In a Joint Plenary Session with the Grand Challenges Annual Meeting of the Bill & Melinda Gates Foundation, German Chancellor Angela Merkel, the Norwegian Prime Minister Erna Solberg, Microsoft Founder Bill Gates, and WHO’s Dr. Tedros Adhanom Ghebreyesus emphasized their strong support for jointly progressing towards achieving the health related Sustainable Development Goals.

World Health Summit 2018
Jointly working towards the UN’s Health Targets
By Dr. Detlef Ganten, President, WHS

With 2,400 participants from 100 countries, the 10th World Health Summit 2018 brought together world leaders from academia, politics, civil society and the private sector. In 50 sessions with 300 speakers, they jointly discussed new strategies to strengthen health systems, how the world can make sure to be prepared for the next pandemic, and the chances and challenges posed by the digital healthcare revolution.

At the conference, the Director-General of the World Health Organization presented the “Global

The M8 Alliance, the academic Think Tank of the World Health Summit, has also issued their Berlin Declaration 2018 stressing the central role of health as a driving force for the United Nations’ Sustainable Development Goals and advocating a holistic and science driven approach to solving global health challenges. In addition to infectious diseases, the non-communicable diseases, e.g. obesity, diabetes, cardiovascular diseases including hypertension and also mental health are of increasing importance for the global burden of disease (www.worldhealthsummit.org).

The next World Health Summit will take place on October 27-29, 2019, in Berlin/Germany.
World Stroke Congress (WSC) 2018
Montreal, Canada

WSC celebrates World Heart Day 2018.

The World Stroke Congress is an established and foundational contributor to the World Stroke Organization’s strategy of building capacity and driving continuous improvement in the quality of stroke care globally. The event provides a biennial platform to convene the global stroke community, a place where stroke professionals, researchers, administrators and policy makers can connect and share experiences and expertise.

Taking place in the midst of Montréal’s vibrant fall colour, WSC 2018 attracted 2670 delegates from 95 countries. 1330 abstracts were received, contributing to an unparalleled stroke educational and scientific programme that addressed every aspect of stroke from global healthcare policy, epidemiology and prevention, to late breaking clinical trials on acute care and stroke recovery.

Innovation was in evidence throughout the event from session format to digital technology. Eposters and ultra-short poster presentations not only ensured the maximum engagement in researchers’ work, but also provided an important experience for early-career stroke researchers to gain exposure on a global platform.

Even coffee breaks became opportunities to discuss stroke in the context of global healthcare policy, with a daily programme of informal dialogues. Delivered in partnership with the NCD Alliance, with input from WHL, the NCD Café drew good numbers and led to lively discussions while helping to disseminate the WS0-NCD Alliance joint policy brief ‘Acting on Stroke and NCDs’.

This partnership theme was continued through 11 joint sessions with affiliate societies including the World Hypertension League and World Heart Federation. Looking over the past 11 World Stroke Congresses it is exciting to see how events have helped support the growth of these partnerships, as well as providing local impetus, networks and knowledge, and have contributed to the development of national stroke prevention and treatment strategies at an increasingly international standard.

BPCON 2018
A Conference Par Excellence
By Dr. S.N. Narasingan, Organizing Secretary & Scientific Committee Chairman

The 28th National Conference of the Indian Society of Hypertension (InSH) was conducted from September 7–9, 2018 in Chennai, India.

The Organizing Committee witnessed an overwhelming response from delegates across the country, numbering 605. The program was well structured by Dr. Venkata S. Ram, Scientific Advisor and Dr. S.N. Narasingan, Scientific Committee Chairman, keeping in mind the theme of the conference “Indian Meeting on Hypertension and Co-Morbidities”.

L – R: Dr. Vladimir Hachinski, Dr. Dan Lackland, and Dr. Phil Gorelick at the joint WSC/WHL session.

L – R: Dr. Werner Hacke and Dr. Dan Lackland
The Inauguration Ceremony of BPCON 2018 hosts many illustrious guests.

L – R: Dr. Venkata S. Ram & Dr. S.N. Narasingan welcome Dr. Daniel Lackland, WHL President.

A curtain raiser of the conference was an interview with Dr. S.N. Narasingan, and the inauguration of BPCON 2018 was well attended, with Dr. Daniel Lackland, President, World Hypertension League (WHL), as the Chief Guest and Dr. Konstantinos Tsioufis, President, European Society of Hypertension as the Guest of Honour.

The May Month Measurement (MMM) program, initiated by the International Society of Hypertension (ISH), was able to screen blood pressure for 100,000 patients. Dr. Anuj Maheshwari presented the awards to 10 doctors who excelled.

Seven Fellowships were awarded to doctors for their outstanding work in the field of hypertension, by Dr Narsingh Verma. There were workshops on Home BP Monitoring, ABPM and What is New in BP Methodology. Symposia on STEMI Management and Heart Failure covered informative topics along with orations.

A book “Pearls in Hypertension” was released during the conference covering various topics and abstracts. Poster presentations were really attractive: a highlight of the photo gallery was the display of ‘Evolution in BP Management’. A special contribution by pharmaceutical companies was their involvement in measuring the pulse wave velocity and central aortic pressure of all the delegates.

The conference was covered by media and the press and we want to thank all those who contributed to making this year’s BPCON a great success.

**WHL-RESOLVE AHA Joint Session**

Moderated by Dr. Daniel Lackland, WHL President, the WHL-RESOLVE joint session included talks on Global Population Strategies for High Blood Pressure Control: the RESOLVE initiative, North American and Asia, Global Application and Implications of Hypertension Guidelines and Targeting Populations for Sodium Reduction Strategies to Control Hypertension. The faculty included Dr. Lawrence Appel, Dr. Donald DiPette, Dr. Norm Campbell and Dr. Paul Whelton.
LINKS OF NOTE

World Stroke Organization Newsletter

Hypertension (ISH) Newsletter
http://pub.lucidpress.com/6a3594cf-c5e0-43d3-b813-0aa7064bd23c/#ldchPZbG1Gfy

WHO NCDs & Mental Health video

LINKS
https://www.linkscommunity.org/
LINKS is an online community and resource center for people working to improve cardiovascular health around the world. The main goals of LINKS is to connect people working to improve cardiovascular health in order to share and learn best practices, build and supply a toolkit of technical resources, and provide catalytic support to eligible governments and organizations in low- and middle-income countries. LINKS stands for:

Learning and capacity building: Periodic webinars and meetings, technical resources and annotated bibliographies

Implementation advice and tools: Access to programmatic mentors and standardized tools for cardiovascular health and related monitoring, surveillance and training

Networking: Meetings and contact with other LINKS members

Knowledge exchange: Receive and share advice and consultation from/with content experts via peer-to-peer exchange

Support for eligible organizations in low- and middle-income countries: Limited technical assistance and/or one-time grants to improve in-country progress toward improving cardiovascular health

SCIENCE OF SALT WEEKLY

Science of Salt Weekly is a publication of weekly Medline searches related to dietary sodium. An initiative of the World Hypertension League in partnership with the World Health Organization Collaborating Centre on Population Salt Reduction, it is funded and supported by the Canadian Institute for Health Research & Heart and Stroke Foundation and the George Institute for Global Health.

Background: Nearly every country (181 of 187) in the world consumes in excess of the WHO recommended maximum salt intake of 5g per day. The high profile provided by public health efforts has resulted in a vast number of publications on dietary salt. The rapidly growing volume of research makes it challenging to stay up to date as to what is the best strategy for improving health.

The aims of Science of Salt Weekly is to identify, summarize and appraise studies reporting on the relationship between dietary salt and health outcomes and the implementation of salt reduction initiatives that were identified as part of its systematic review series with a view to assist scientists, clinicians and policy makers to stay informed about the effects of salt on health and the best strategies to lower salt intake.

Knowledge Action Portal (KAP)
https://www.knowledge-action-portal.com/

The WHO GCM/NCD has launched the Knowledge Action Portal (KAP), an interactive online platform for noncommunicable disease (NCD) information, interaction and inspiration. The KAP aims to create a community of connected individuals from various backgrounds and skill-sets to access knowledge and information, promote collaboration, and find the common goals to beat NCDs.

The KAP provides users with access to a variety of campaigns, media, publications, and other resources in an accessible and easy-to-use format. In addition, the KAP is creating a social network through the utilization of connectivity algorithms, messaging functions, and personalized profiles. The KAP will have a phased approach to development, taking in a variety of feedback from users to guide future growth.
Mission
The objectives of the WHL are to promote the detection, control and prevention of arterial hypertension in populations. The World Hypertension League (WHL) is a federation of leagues, societies and other national bodies devoted to this goal. Individual membership is not possible. The WHL is in official relations with both the International Society of Hypertension (ISH), and the World Health Organization (WHO).

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Secretariat:
Dr. Xin-Hua Zhang
E-mail: whleleague17@gmail.com
Internet: http://www.whleague.org

Editorial Office:
Editor-in-Chief: Dr. Lawrence Beilin
Associate Editor: Mary L. Trifault
E-mail: whleleague17@gmail.com

Associate Editors:
Dr. Norman Campbell
Dr. Detlev Ganten

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Calendar of Events

16th Annual Congress of the Malaysian Society of Hypertension
January 19-21, 2019
Kuala Lumpur, Malaysia
[click here]

Patient Centered Meeting on Diabetes, Dyslipidemia and Hypertension
January 24-27, 2019
Vienna, Austria
[click here]

International Stroke Conference
February 6-8, 2019
Honolulu, Hawaii
[click here]

22nd Annual Scientific Conference of Pakistan Hypertension League
February 21-24, 2019
Lahore, Pakistan
[click here]

6th International Congress on Pre-Hypertension, Hypertension, Metabolic Disorders, Cardiovascular Disease
February 28 – March 3, 2019
Vilnius, Lithuania
[click here]

World Hypertension Day
May 17, 2019

World Pre-eclampsia Day
May 22, 2019

2nd International Congress of Hypertension in Children and Adolescents (ICHCA)
May 24-26, 2019
Warsaw, Poland
[click here]

31st Annual Cardiologists Conference
June 17-19, 2019
Rome, Italy
[click here]

European Society of Hypertension 2019 Meeting
Milan, Italy
June 21-24, 2019
[click here]

Patient Centered Meeting on Diabetes, Dyslipidemia and Hypertension
Vienna, Austria
October 31 – November 3, 2019
[click here]

15th Asian Pacific Congress of Hypertension
Brisbane, Australia
November 24-27, 2019
[click here]