Profile

The major mission of the U.S. National Hypertension Association (NHA) is focused on conquering hypertension through medical research, public and professional education.

The NHA was founded in 1977, by a group of scientists and laymen who were concerned with the health problems posed by hypertension in the US. During its history, NHA has vigorously pursued its mission in research, education, and detection on a most cost-effective basis. Less than 10% of NHA's budget has been spent on fund-raising. NHA's research team includes its Chairman, Dr. William M. Manger and Dr. Shlomoh Simchon, who serve as Co-Directors of research, and Ms. Ruth Johnston who is a research Associate. The main laboratory is located at NYU Medical Center.

We have published major papers on the mechanism of salt-induced hypertension, a major contributor to hypertension, particularly in the large percentage of hypertensives who are salt-sensitive. We reported our most recent studies at meetings of the Council for High Blood Pressure Research, and we have published repeatedly in the American Heart Association's journal Hypertension a prestigious journal on hypertension.

One of NHA's major achievements has been the recent discovery that sodium chloride crosses the blood-brain barrier and reaches the brain far more easily in salt-sensitive than in salt-resistant rats. This finding sheds important new light on the mechanism whereby salt causes hypertension.

WHL News

18th WHL Council Conference and Workshop on Hypertension in the Elderly, Buenos Aires, Argentina on May 7, 1999

Within a few days, the 18th Council Conference and Workshop on Hypertension in the Elderly will be held in Buenos Aires. We are looking forward to this interesting meeting.

From the submitted scientific contributions, three selected abstracts from Argentina, Egypt, and the Czech Republic concerned with epidemiological studies on arterial hypertension and risk factors in the elderly are published in the Newsletter.

In the forthcoming issues, the WHL Newsletter will publish selected abstracts of the Workshop, and, of course, a report on the Council Conference.

We are looking forward to seeing you soon in Buenos Aires!

Jörg Pöttsch
Editor, WHL Newsletter

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In addition, new research pinpoints a problem within the kidney and presents evidence concerning a functional defect in the mechanism that normally causes dilation of the vessels in the kidney to permit elimination of excess salt. People who are “salt-sensitive” may be affected by this kidney defect. The goal of this research is to advance our understanding of salt-sensitivity in humans and permit corrective measures and possibly prevention. We are also currently involved in developing a biochemical method for detecting salt-sensitivity.

For the general public, we have launched a campaign with the National High Blood Pressure Education Program in Washington. As part of this program, NHBPEP has set up a telephone line 1-800-575-WELL where one can obtain information about blood pressure.

On May 11 and 12, 1998, the National Hypertension Association in conjunction with the National Stroke Association conducted a seminar “Hypertension and Hypercholesterolemia, and Stroke Prevention and Management: New and Emerging Approaches”. Over 200 persons attended this meeting.

Dr. William M. Manger
Chairman, National Hypertension Association
324 East 30th Street
New York, NY 10016, USA

Scientific News

Arterial Hypertension and Risk Factors in the Elderly: The Procor-Lujan Program
H. Gomez Llambi, R. Fernández Contreras, N. Terragno,
UBA, Buenos Aires, Argentina

Procor-Lujan is a prospective program developed in an urban-rural community in Argentina to obtain epidemiological data and to promote an educational program for prevention, early detection and treatment of high blood pressure (HBP). Data from 308 elderly patients [137 males (M) – 171 females (F)] >60 years old was randomly obtained to determine: 1) prevalence of HBP and risk factors, 2) anthropometric data and 3) features of hypertension treatment. Body Mass Index (BMI): >27 kg/m², or a waist/hip ratio (W/H) >0.95 in men and 0.80 in women was considered as obesity. Three resting BP measurements were taken with a mercury sphygmomanometer and appropriate cuffs. HBP was defined as = or >140/90 mmHg. Systolic blood pressure was 155±25 and diastolic blood pressure 87.9±12.9. Crude prevalence of HBP was 36.85% (Isolated Systolic Hypertension 29.4%). Treatment had been given to 69% and was effective (<140/90) in 73.2%. The prevalence of diabetes was 11.7% (29.4% untreated). The prevalence of hypercholesterolemia was 15.9% (60.4% untreated). BMI and W/H ratio were higher in hypertensives than normotensives (P<0.05). The prevalence of a tobacco habit was 17.6%. Physical activity was performed by 14.28%. BP was similar in treated and untreated patients (175.9±22.5 and 101.5±9.4 vs. 176.7±23 and 102.6±10.4). Enalapril was given to 44%, beta blockers 16.8%, diuretics to 15.04% and calcium blockers to 5.3%. Conclusion: These results indicate a high prevalence and an inadequate treatment of hypertension and risk factors in the elderly in this community.

Hypertension Risk Factors in the Elderly in Egypt
M. Mohsen Ibrahim, MD, Egyptian Hypertension Society, Cairo, Egypt

Aging, social stress, obesity, central body fat distribution and increased urinary sodium excretion were associated with higher blood pressure (BP) and increased prevalence of hypertension (HT). The prevalence of these hypertension risk factors (HRF) was examined during a national cross sectional hypertension survey (NHP) in Egypt among elderly individuals. The survey was conducted in 21 sampling locations representing all Egyptian geographic areas and socioeconomic groups. 6,733 individuals were examined; 781 (11.6%) were older than 65 years (OG) and the rest were between 25 and 65 years (YG). Hypertension was more prevalent in OG (63.9% vs. 26.2%). BP was 147/80 vs. 126/79 mmHg, respectively. Poverty, social isolation and central obesity were more prevalent in the elderly, while increased urinary sodium and BMI were prevalent in the younger individuals.

continued on page 3
Hypertension Risk Factors in the Elderly continued

Comparing elderly hypertensives and normotensives, no difference was found in age distribution, socioeconomic status, body fat distribution and urinary sodium, while there was a slight increase in prevalence of social isolation and obesity in hypertensive groups.

<table>
<thead>
<tr>
<th></th>
<th>YG</th>
<th>OG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (mean)</td>
<td>43</td>
<td>49</td>
</tr>
<tr>
<td>Low SES (%)</td>
<td>39</td>
<td>36</td>
</tr>
<tr>
<td>Social Isolation (%)</td>
<td>1.3</td>
<td>2.4</td>
</tr>
<tr>
<td>Obesity (BMI &gt;30 Kg/m² - %)</td>
<td>37.4</td>
<td>43</td>
</tr>
<tr>
<td>W/H</td>
<td>0.89</td>
<td>0.90</td>
</tr>
<tr>
<td>Urinary Na (m mol/L)</td>
<td>95.6</td>
<td>95.0</td>
</tr>
</tbody>
</table>

SES: Socioeconomic status
W/H: waist / hip ratio

Conclusion: Except for social stress, prevalence rates of traditional hypertensive risk factors, i.e., obesity and urinary sodium did not explain the very high prevalence rates of hypertension in the elderly Egyptians.

Awareness, Treatment, and Control of Hypertension in the Czech Population

R. Cifková, et al., Inst. Clin. Exp. Medicine, Prague, Czech Republic

The Czech Republic, unlike the other former East Bloc countries, has seen a decrease in total and cardiovascular (CV) mortality. In particular, the decrease in cerebrovascular mortality since 1985 is the most pronounced (≈ 30%).

Methods: Three cross-sectional surveys of CV risk factors were conducted within the WHO MONICA Project in six Czech districts in 1985 (n=2570), 1988 (n=2768), and 1992 (n=2342). In 1997/98, another population survey (a 1% random sample, aged 25-64, mean age 45 years) was performed in six of the original districts (“old” districts, n=1990) and in three other districts (“new” districts, n=1216).

Results: Cross-sectional survey 1997/98: 

<table>
<thead>
<tr>
<th>Age</th>
<th>&lt;60 years n=2890</th>
<th>&gt;60 years n=316</th>
<th>P</th>
</tr>
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<tbody>
<tr>
<td>M/F</td>
<td>1381/509</td>
<td>155/161</td>
<td></td>
</tr>
<tr>
<td>SBP mmHg</td>
<td>126.0±16.52</td>
<td>140.9±18.42</td>
<td>0.001</td>
</tr>
<tr>
<td>DBP mmHg</td>
<td>81.3±10.13</td>
<td>85.5±9.48</td>
<td>0.001</td>
</tr>
<tr>
<td>Prevalence of HT %</td>
<td>29.7</td>
<td>70.3</td>
<td>0.001</td>
</tr>
<tr>
<td>Awareness of HT %</td>
<td>59.7</td>
<td>74.0</td>
<td>0.001</td>
</tr>
<tr>
<td>Medication for HT %</td>
<td>43.3</td>
<td>62.8</td>
<td>0.001</td>
</tr>
<tr>
<td>Control of HT %</td>
<td>39.0</td>
<td>34.3</td>
<td>n.s.</td>
</tr>
</tbody>
</table>

HT - hypertension (BP >140/90 mmHg or taking antihypertensive medications)
* percentage of individuals with HT

Longitudinal trends: There was a significant reduction in both SBP and DBP in both age categories in the six (“old”) MONICA districts over a period of 12 years. There is also a decreased prevalence and increased awareness of hypertension (HT). More individuals are now treated with antihypertensive drugs, eventually resulting in improved control of HT. There is also a decrease in SBP and DBP in individuals without antihypertensive medication.

Conclusions: In a random sampled of the population in the Czech Republic the prevalence of HT in the elderly is double that in the age group <60 years. The elderly are significantly more aware of HT and more frequently treated by antihypertensive drugs; however, there is no difference in the control of HT which is still not adequate. The longitudinal trends in the prevalence, awareness, treatment, and control of BP are positive in both age groups. These positive longitudinal changes may contribute to the lower cerebrovascular and CV mortality.

People

The German Society of Hypertension elected a new board at the General Assembly in November 1998. Their chairman is now Professor Peter Dominiak at the following address: Dr. Peter Kaune, General Secretariat, Deutsche Hochdruckliga, PO Box 10 20 40, 69010 Heidelberg, Germany.

Tel.: (+49-6221) 411 774
Fax: (+49-6221) 402 274
People continued

The Chilean Society of Hypertension has a new board: The president is Dr. Jorge Jalil, Dr. Maria Cristina Escobar is Vice President and Dr. Iván Godoy is Secretary. The address of the Society is: Pontificia Universidad Católica de Chile, Department of Cardiovascular Diseases, Marçoleta 345, Room #19, Santiago, Chile.

Tel.: (+ 56-2) 633 3171
Fax: (+ 56-2) 686 3342

Professor Un Ho Ryoo was elected as chairman and Professor Haeng Il Koh as Secretary General of the Korean Society of Hypertension during its annual meeting last November 1998. The address of the Society is: College of Medicine, Inje University Seoul Paik Hospital, Department of Internal Medicine, 85, Jeodong 2-ka Chungku, Seoul 100-32, Korea.

Tel.: (+82-2) 2268-9952
Fax: (+82-2) 2268-9952

Impressum

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 a division of the International Society of Hypertension (ISH), and is in official relations with the World Health Organization (WHO).

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G. Fodor (Ottawa), Vice-President
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J.N. Cohn (Minneapolis), K.H. Rahn (Münster), members.
C. Lenfant (Bethesda), Special Adviser
T. Strasser (Geneva), Adviser, International Liaison
A. Chockalingam (Ottawa), Adviser, Patient Education-Project
M.M. Ibrahim (Cairo), Adviser, Developing Countries

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Calendar

6th Annual Meeting Section Blood Pressure Measurement and Diagnostics in Hypertension
April 30–May 1, 1999
Bremerhaven, Germany
Information: Dr. Peter Kaune
Deutsche Hochdruckliga
PO Box 10 20 40,
69010 Heidelberg, Germany

14th Annual Scientific Meeting of the International Society on Hypertension in Blacks, Inc.
July 11–14, 1999
Toronto, ON, Canada
Information: ISHIB 1999,
2045 Manchester Street,
Atlanta, GA 30324, USA

1st Meeting of the Asian-Pacific Society of Hypertension (3rd Pacific Rim)
September 19–22, 1999
Bali, Indonesia
Information: National Cardiac Center
Harapan Kita Hospital, 8th Floor,
Suite 2807, Jln. Jend. S. Parman
Kav. 87, Jakarta 11420, Indonesia
E-mail: apsh@cbn.net.id

72nd Scientific Session of the American Heart Association
November 7–10, 1999
Atlanta, GA, USA
Information: AHA, Scientific and Corporate Meetings, 7272 Greenville Ave.
Dallas, TX 75231-4596, USA

23rd Annual Scientific Meeting of the German Hypertension Society
November 17–21, 1999
Karlsruhe, Germany
Information: Dr. Peter Kaune,
Deutsche Hochdruckliga
PO Box 10 20 40,
69010 Heidelberg, Germany

5th International Dead Sea Symposium
February 29–March 3, 2000
Dead Sea, Israel
Information: Kenes
PO Box 50006, Tel Aviv, Israel
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