News from the World Hypertension League (WHL).
A division of the International Society of Hypertension, and in official relations with the
World Health Organization.

No. 51, February 1997

17th WHL
Council Conference
and
Workshop on Control of Hypertension and Congestive Heart Failure in Populations
Saturday, June 28, 1997
Montréal, Canada

WHL News

Symposium on Arterial Hypertension in Bucharest, Romania, from October 25–28, 1996

Dr. Patrick J. Mulrow, Secretary General of the World Hypertension League, participated in
the Symposium on Arterial Hypertension in Bucharest, Romania from October 25–28, 1996.
Dr. Mulrow’s talk focused on new trends in the treatment of arterial hypertension.
It was an excellent clinical and scientific meeting. The Romanian Society of Cardiology
is working hard to promote the detection, control and prevention of arterial hypertension in

Last Call for Abstracts

This is the last call for abstracts for the WHL workshop on control of hypertension and con-
gestive heart failure in populations. Abstracts should be sent to the WHL Secretary General,
Dr. Patrick J. Mulrow (see Impressum on page 4 for his address). Take advantage of free
registration for this WHL workshop on the eve of the 4th International Conference on Preventive
Cardiology. The abstracts will be published in the 1997 WHL Yearbook.

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Symposium of Arterial Hypertension in Bucharest continued

Romania. It was an excellent meeting and Dr. Mulrow was delighted to represent the World Hypertension League at this symposium.

At present, the Romanian Society of Cardiology is not a member of the World Hypertension League. The advantages of placing membership in the World Hypertension League were discussed with them and the necessary procedure was initiated. We look forward to welcoming the Romanian Society of Cardiology into our membership at a future time.

Dr. Patrick J. Mulrow
Secretary General


An Executive Board meeting on December 10, 1996 was held in conjunction with a Servier sponsored satellite of the French Hypertension Society meeting. The satellite "The treatment of high blood pressure in the population" was organized and chaired by Prof. L. Poggi (Marseilles) in conjunction with Profs. J. Cohn, J. M. Mallion, J. Ménard and myself.

The first session comprised a review of the differing care patterns and degrees of control of hypertension in the UK, US, Canada, Germany, Eastern Europe and France by Brown, Mulrow, Chockalingam and Fodor, Luft, Strasser and Chamontin. Brown described his experience with general practitioners in the Cambridge/East Anglia collaboration. He noted that although the British Hypertension Society guidelines recommend a lower threshold (90mmHg diastolic) for treating patients aged >65 years than for younger patients (100mmHg), in practice GP's did the reverse - not treating older patients until high pressures were recorded and treating younger patients at less elevated levels. Mulrow reported that progress has been made in population treatment and control in the US, but pointed out that there was still room for considerable improvement. Chockalingam stated that a similar situation exists in Canada and also reported on the pattern of drug prescription which is now led by ACE inhibitors or angiotensin antagonists (28% of market share) followed (in order) by diuretics, calcium channel blockers, beta blockers and others.

Luft reported interesting data from the newly reunified Germany, where the prevalence of hypertension is considerably greater in the former East Germany even though salt intake is, if anything, less. Cardiovascular mortality is declining in the West, but not the East.

Petrie (UK) was unable to attend, but sent a provocative abstract pointing out that guidelines were often perceived as GOBSAT publications (Good Old Boys Sat At Table), which are not very influential with GP's. He chided the organization of hypertension in the UK which seemed less organized with less public advocacy than for example, diabetes societies. He felt this was because no specialist group was responsible for hypertension; nor was there a formal training program in hypertension, which sat uneasily between cardiology and nephrology.

Strasser stressed that, according to information from the Monica study, hypertension is twice as common in the East of Europe. He also emphasized some differences in the quality of health care.

Chamontin described the organization for BP control in France, as seen in a recent survey of 235 GP's who collected data over a one week period. Hypertension accounted for over 40% of the consultations. About 60% of these hypertensives were on drug treatment; 7 out of 10 were acceptably controlled with only one quarter under optimal control.

The second session of the workshop dealt with epidemiology, optimal pressure levels and with the consequences of hypertension on the heart and kidney. Alderman recounted his 18 year
WHL News continued

News from the Chinese Hypertension League

The 1996 (third) Symposium of the International Heart Health Network (ICHHN) was held from October 17-20th in Beijing. More than 400 delegates from Australia, Canada, Hong Kong, Japan, Singapore, Taiwan, USA and China attended the symposium. The theme of this congress was “Advances on the pathogenesis and management of cardiovascular diseases, in particular hypertension and atherosclerosis”. There were two satellite meetings, five plenary sessions, nine sessions of free paper presentations and poster presentations. A wide variety of topics ranging from preventive to interventional cardiology were covered. The ICHHN General Meeting was held on October 19, 1996, chaired by Dr. Tse Tak Fu. Professor Liu Lisheng was installed as the President of ICHHN. The 1997 (fourth) ICHHN symposium will be held in Taipei.

The Chinese Hypertension League (CHL) advanced the organization to a new stage. Qinhuangdao City developed computer systems to follow up hypertensive patients.

The meeting on prevention and management of hypertension and cardiovascular diseases was held on October 15–16, 1996, in Beijing Anzhen Hospital. More than 50 delegates from many cities and provinces attended this meeting. Prof. Wu Yingkai summarized the advantages and disadvantages of prevention and treatment of cardiovascular diseases in China over the past 20 years. Prof. Liu Lisheng emphasized the early diagnosis and effective treatment of hypertension to encourage the Chinese Hypertension League to promote various types of prevention of cardiovascular diseases.

Professor Liu Lisheng
President, Chinese Hypertension League

Workshop “Treatment of Raised Blood Pressure” continued

observational studies of hypertension in the New York work place. While MI and stroke remained stable, heart failure incidence increased 10-fold in 10 years. A history of diabetes or vascular disease at entry strongly predicted an unfavorable outcome despite good control of BP, emphasizing

the need for strong prevention efforts. This study underlined the need for interventions which were multiple, and personally relevant for the individual patient. Managed care monitoring was often simplistic and so was retrogressive. Strauer (Düsseldorf) reviewed the important restriction which LV hypertrophy placed on coronary flow and coronary reserve. Marked improvement has been observed following treatment, especially with ACE inhibitors.

Simon (Paris) similarly reviewed the new ultrasound methods for examination of the more subtle effects of hypertension on the vessel wall and emphasized how suitable this was for assessment of the effects of treatment. Marre (Angers, France) emphasized the value of quantitative measures of albuminuria, especially microalbuminuria. More trials were needed to assess how best to reduce this and to see how well changes correlated with changes in proteinuria.

The final paper in this session by Boissel stressed the need to determine the absolute cardiovascular risk in particular patients, or particular subgroups, in order to foresee the benefit from treatment for that patient.

In the last session we considered ways to improve the universal shortfall in all our countries between the desirable degree of control of BP and the imperfect results achieved. The impact of the widening disparity in incomes on morbidity and mortality was noted as an important factor.

Research on these crucial non medical factors is scanty and much needed. Poggi concluded the program by describing French initiatives at the community level. This led to a final general discussion on the need to continue and update a “Monica like audit” on the incidence of blood pressure treatment, adequacy of control, and what drugs are currently used in as many populations as possible.

It seems plausible that the World Hypertension League is well placed to coordinate these efforts. As a beginning, we are asking the presidents of our member leagues to report on their current situation at our upcoming council conference in Montréal.

A more complete report of this interesting day will be published in the American Journal of Hypertension. Dr. John Laragh, Editor, took a lively part in the discussion at this workshop.

Dr. Peter Sleight
President
New Member

The WHL Executive Board admitted the **Thai Hypertension League** into WHL membership. The president is Dr. Suphachai Chaithirapan, Siriraj Hospital, Dept. of Medicine, Hypertension Unit, Bangkok-noi, 10700 Bangkok, Thailand. Phone/Fax (+66) 2 419 7790

New WHL Newsletter Sponsor

On January 1, 1997, Omron Healthcare, Inc. became the sponsor of the World Hypertension League Newsletter. Omron is a company which produces healthcare products, e.g. blood pressure monitoring devices. The cooperation between WHL and Omron is driven by their common interest in the promotion of the prevention, detection, and treatment of hypertension in the population.

Calendar

**17th Council Conference of the World Hypertension League**
June 28, 1997
Montréal, Québec, Canada
**Information:** Dr. Patrick J. Mulrow
Secretary General, WHL
Medical College of Ohio
PO Box 10008
Toledo, OH 43699-0008, USA

**12th International Interdisciplinary Conference on Hypertension in Blacks**
July 20–24, 1997
London, England
**Information:** International Society on Hypertension in Blacks, Inc.
2045 Manchester Street, NE
Atlanta, GA 30324-4110, USA
e-mail: ishib@aol.com

**2nd Hypertension Summer School**
August 8–13, 1997
Castine, Maine, USA
**Information:** Conference Coordinator
2nd Hypertension Summer School
Meetings and Councils
American Heart Association
7272 Greenville Avenue
Dallas, TX 75231-4596, USA

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).

Secretariat:
Medical College of Ohio, Dept. of Medicine, P.O. Box 10008, 3000 Arlington Ave, Toledo, OH 43699-0008, USA
Phone: (+1) 419 381-6016, Fax: (+1) 419 381 5360
E-mail: whlsec@magnum.mco.edu

Board:
P. Sleight (Oxford), President
D. Ganten (Berlin-Buch), Past 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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J. Pötzsch, Editor; E. Pisch, Editorial Assistant

Editorial Office:
Max Delbrück Center for Molecular Medicine (MDC)
Robert-Rössle-Str. 10, 13125 Berlin-Buch, Germany,
Phone: (+49) 30 9406 3510, Fax: (+49) 30 9406 2254.
E-mail: poetzsch@mdc-berlin.de

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