Editorial

The Diabetes Scourge

Type 2 diabetes which occurs primarily in obese adults and accounts for 95% of the diabetic cases has become a worldwide epidemic. In 1997 WHO estimated there were 135 million diabetics worldwide and that number was expected to rise to 300 million by 2025, with the largest increase in developing countries. In India the number of diabetic people will increase from 19 to 57 million by the year 2025. In the United States there are 17 million Americans with Type 2 diabetes, with a prevalence of about 6% in the general population and 14% in those 60 years and older. The prevalence is increasing at an alarming rate, especially in the adolescent population.\(^{(1)}\)

What are some of the risk factors that predispose to the development of Type 2 diabetes? Obesity\(^{(2)}\) is the major risk, especially visceral obesity defined by a waist circumference of greater than 102 cm in men and 88 cm in women. A sedentary lifestyle is an independent risk factor, but also contributes to the development of obesity. Certain races have a genetic predisposition for developing Type 2 diabetes. Afro-Americans, Hispanic Americans, and Native Americans have a two-fold greater prevalence than Caucasians. Age over 50 is also a significant risk factor. The health consequences of Type 2 diabetes are serious. About 50–70%\(^{(3)}\) of the diabetics have hypertension and the two diseases cause major cardiovascular complications\(^{(4)}\) such as coronary artery disease, myocardial infarction, congestive heart failure, strokes, and peripheral vascular disease. Diabetes is a major cause of blindness and renal failure. Many of these health

---

WHL News

International Art Competition

Following the success of the last WHL art competitions in 1992, 1994 and 1996, the president and the executive board of the WHL have invited all hypertension societies to participate in the 2003 WHL International Art Competition. The theme to be addressed by the posters is ‘hypertension and obesity’. The importance of the positive aspects of hypertension control and benefits to be gained through a healthy lifestyle should be addressed.

The aim of this art contest is to promote community awareness of hypertension and obesity. This competition hopefully contributes to the education of the public about the risk factors, consequences, and need for prevention, detection and management of high blood pressure and obesity.

Target groups for the WHL International Art Competition are the general population and physicians. The Art Competition will be carried out in two phases: first at the national level and then a second international phase. For the national phase each country represented by WHL membership is invited to submit entries continued on page 2

---

Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Editorial</td>
<td>1</td>
</tr>
<tr>
<td>The Diabetes Scourge</td>
<td></td>
</tr>
<tr>
<td>WHL News</td>
<td>1</td>
</tr>
<tr>
<td>International Art Competition</td>
<td>1</td>
</tr>
<tr>
<td>New Evidence Report</td>
<td>2</td>
</tr>
<tr>
<td>WHL Questionnaire</td>
<td>3</td>
</tr>
<tr>
<td>People</td>
<td>4</td>
</tr>
<tr>
<td>Calendar</td>
<td>4</td>
</tr>
</tbody>
</table>
complications are already present when the diagnosis is first made. In the United States, Type 2 diabetes may be present for over 7 years before it is diagnosed.

The financial cost to treat Type 2 diabetes and its cardiovascular complications places a burden on the health budget of a country and this burden is rapidly increasing. For optimal care of the diabetic patient, special diets and multiple drugs are required to reduce the blood glucose. Vigorous control of hypertension is needed to prevent many of the cardiovascular complications and this requires two to three drugs.(5) The goal blood pressure is less than 130/80 and one of the drugs should be an ACE inhibitor or angiotensin receptor blocker, usually combined with a thiazide diuretic. At least one drug is needed to treat dyslipidemia to reduce the development of coronary artery disease and myocardial infarction. The cost of these drugs is far over-shadowed by the cost of hospitalization, disability care, loss of income and many other expenses.

As is evident, the financial burden of treating diabetes and its health consequences is enormous and can bankrupt healthcare systems, especially in the developing countries.

There is one simple solution: Prevention! Obesity is at the heart of the problem. By preventing overweight and obesity the prevalence of Type 2 diabetes will decrease dramatically.(6) Even after diabetes has developed, small amounts of weight loss (5–10 kg)(7) can improve the control of diabetes, hypertension and dyslipidemia. The methodology is cheap and universally applicable: Diet and Exercise!

However, establishment of a national weight control program is not easy. It requires a community effort: families, schools, the media, food industry, government and health professionals. These all need to be dedicated to the prevention of obesity. Each country will need to design its own action plan. The long-term emphasis should be on the young, to encourage them to develop healthy lifestyles to avoid the development of diabetes.

Patrick J. Mulrow, M.D.
Secretary General

References:


A more complete reference list is available upon request from the Newsletter editorial office in Berlin and also available on the WHL website at http://www.mco.edu/whl.

International Art Competition continued

for the art prize. Each country should establish its own methods and criteria for selecting the local art for submission to the WHL International jury. Winning artists of the International Art Competition will receive a monetary prize.

Please contact the WHL Secretariat for any questions relating to the Art Competition.

New evidence report

A new summary evidence report “Utility of Blood Pressure Monitoring Outside of the Clinic Setting” is available from Joanne Alexandre, Agency for Healthcare Research and Quality, Public Affairs Division, U.S. Department of Health and Human Services E-mail: JAlexand@AHRQ.gov Fax (+1) 301-594 2283 www.ahrq.gov/clinical/epcsums/utilbpsum/html
Once again we would like to assess your perception of the WHL Newsletter. Your answer will allow us to improve the WHL Newsletter and to respond to our readers' needs and preferences.

Please take a moment and complete this questionnaire and mail it or fax a copy to the editorial office:

WHL Newsletter
Max Delbrück Center for Molecular Medicine (MDC) Berlin-Buch
Robert-Rössle-Str. 10
13125 Berlin, Germany

Fax: (+ 49-30) 94 06-2123

1. In which country are you living?  

2. Are you working as:  
   - [ ] a medical doctor in a hospital or medical center?  
   - [ ] a medical doctor in a private practice?  
   - [ ] a nurse?  
   - [ ] a researcher/scientist?  
   - [ ] a health care professional in an institution (e.g., public health)?

3. Are you regularly reading the WHL Newsletter?  
   - [ ] yes  
   - [ ] no

4. Are you satisfied with the WHL Newsletter contents?  
   - [ ] yes  
   - [ ] no

5. Please rate the different sections of the WHL Newsletter:

<table>
<thead>
<tr>
<th>Sections</th>
<th>1 very good</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6 poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Editorial</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Profile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WHL News</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scientific News</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Report from the member leagues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Calendar</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. What would you like to see improved? Please provide details.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

7. Do you seek additional information from the WHL website?  
   - [ ] yes  
   - [ ] no

8. Did you visit the WHL website during the last three months?  
   - [ ] yes  
   - [ ] no

Thank you for your cooperation!
People

The correct phone and fax numbers of the Southern African Hypertension Society (SAHS) are as follows:

Phone: (+27) 11 706-4196
Fax: (+27) 11 706-4915
E-mail: sahs@mweb.co.za
Website: www.hypertension.org.za

Dr. Milagros Terrero was elected new president of the Dominican Society of Hypertension for the period October 2002 until September 2005. His address is: SODOHIP, Centro Medico Real, Santo Domingo, Dominican Republic.

Phone: (+809) 537 3940, ext 259
Fax: (+809) 732 0097

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, Department of Medicine
3120 Glendale Avenue, Toledo, OH 43614-5809, USA
Phone: (+1) 419 383-6016, Fax: (+1) 419 383 5360
E-mail: gmonhollen@mco.edu
Internet: http://www.mco.edu/whl

Board Officers:
Claude Lenfant (Bethesda), President
Liu Lisheng (Beijing), Vice-President
Peter Sleight (Oxford), Past President
Patrick J. Mulrow (Toledo), Secretary General

Members:
J. George Fodor (Ottawa), Detlev Ganten (Berlin-Buch)
Albert Mimran (Montpellier), Lawrence Beilin (Perth)

Advisory to the Board:
Arun Chockalingam (Vancouver), Patient Education Project
M. Mohsen Ibrahim (Cairo), Developing Countries
Jörg Pötzsch (Berlin-Buch), Communications

The WHL Newsletter is published bimonthly by the World Hypertension League
Anja Kroke, Editor; Erika Pisch, Editorial Assistant

The WHL Newsletter is published with the support of

Calendar

Cardiovascular Disease Prevention VII
March 12–14, 2003
London, United Kingdom
Information: Hampton Medical Conferences
127 High Street, Teddington, Middlesex TW11 8HH, UK
Phone: (+44) 20 8977 0011
E-mail: hmc@hamptonmedical.com

Joint WHL-EHS Meeting in conjunction with the Pan Arab Hypertension Annual Scientific Meeting
April 9–11, 2003
Cairo, Egypt
Information: Dr. Adel Al-Etriby
Prof. of Cardiology, Ain Shams University
E-mail: etrebv@hotmail.com

18th Annual International Interdisciplinary Conference on Hypertension
June 22–25, 2003
Accra, Ghana
Information: ISHIB, 2045, Manchester Street, NE, Atlanta, GA 30324-4110, USA
Fax: (+1) 404 875 6334
E-mail: ishib2003@ishib.ore

3rd Asian-Pacific Congress of Hypertension
September 28–October 1, 2003
Information: Stella Chee,
Congress Secretariat
Ace Daytons Direct (International) Ltd.
Singapore
Fax: (+65) 6379 5261
Fax: (+65) 6475 6436
E-mail: admin@acedaytons-direct.com

26th Annual Meeting of the Japanese Society of Hypertension
October 30–November 1, 2003
Miyazaki, Japan
Information: Dr. Johji Kato,
Miyazaki Medical College, 1st Dept. of Internal Medicine,
5200 Kihara, Kiyotake, Miyazaki 889-1692, Japan
Fax: (+81) 985 85 6596
E-mail: jsh26@congre.co.jp