Profile

The All India Heart Foundation was established in 1962, the first such organisation in the Asian-Pacific region and in a Third World country. The necessity for establishing a Heart Foundation in India, the world’s largest democratic nation, was originally urged by the late Dr. Paul Dudley White. Today, the Foundation has branches in some of the major cities and is affiliated to the International Society and Federation of Cardiology (I.S.F.C.) at Geneva.

Research is our most important activity. Intramural research has been carried out on 3 topics of great relevance to India. Rheumatic fever and rheumatic heart disease (RF/RHD), the most important causes of heart disease in children and young adults, have been such subjects since 1966. Work at the Foundation has shown that secondary prophylaxis on a 3-weekly basis and timely primary prophylaxis are feasible even in the setting of a developing country such as India. The cost of staff and drugs has been worked out. Many facets of the natural history of the disease such as the applicability of the Jones criteria, etc. have been clarified. A model registry for RF/RHD has been created. The feasibility of integrating the control of RF/RHD into the School Health Services of Delhi has been worked out and is being adopted by the Indian Council of Medical Research on a nationwide scale.

An epidemiological study of hypertension is being carried out. The identification of “risk factors for heart attack among Indians” living in Delhi has been a major research project at the Institute since 1981. The Foundation has

WHL News

- The Southern African Hypertension Society has changed its organisational structure and address. Please note: President: Prof. P. P. Leary; Secretary: Dr. M. A. Seedat; International Secretary: Prof. C. Rosendorff. Address: University of the Witwatersrand Medical School, 7 York Road, Parktown 2193, Johannesburg, South Africa, Phone (27) 11-6472010, Telefax: (27) 11-6434318.

- A seminar on the endocrine function of the cardiovascular system was held at the Beijing Medical University, People's Republic of China, on May 17, 1989. It was attended by approx. 200 specialists from China. The endocrine function of the heart and the importance of regulatory peptides for the cardiovascular system were the major topics of this meeting. In recent years, the Laboratory of Cardiopulmonary Endocrinology of the Beijing Medical University has done much work concerning the endocrine function of the cardiovascular system.

- WHL Artist Competition: Following the 1989 World Health Organisation (WHO) theme “Let's talk health” and based on a very successful artist competition organised by the German National Blood Pressure Programme in 1987 (see poster p. 4), the World Hypertension League plans to promote an international artist competition on “High blood pressure and its consequences” in one or more member countries.

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also established a National Heart Institute as its research centre, fully equipped for diagnosis, invasive and non-invasive, and treatment including valvuloplasty, angioplasty and bypass surgery.

Public Health Education is an important activity. A bulletin called “Heart News” has been issued monthly since 1962. It is aimed primarily at the layman and the general practitioner. This is extremely popular and has been subscribed to by a number of libraries; articles from it are quoted freely in newspapers and other popular publications.

A large number of pamphlets on various aspects of heart disease, e.g. hypertension, angina, heart attacks, weight reduction, keeping fit exercise, how to avoid heart attack, and diets for heart disease, etc. have been published, mostly in English, some in regional languages.

Lectures, radio talks and television programmes on many aspects of heart disease are given by the directors and other senior members of the Foundation throughout the country, in English and in regional languages.

Refresher courses for general practitioners are held from time to time.

Holding “Heart Camps” is a new continuing venture started by the Foundation in the rural areas around Delhi, in conjunction with local organisations such as the Rotary Club, etc. A large proportion of the rural population benefits from it. The training of physicians, nurses and technicians is another aspect of the Foundation’s activities.

The Foundation has jointly hosted several international conferences, e.g. the V World Congress of Cardiology in 1966, the American College of Cardiology Circuit Courses in 1965 and 1973, an Indo-U.S. Workshop on Rheumatic Heart Disease in March 1981 and “Medicine Update” in 1989, together with the Royal College of Physicians, London.

Scientific News

Converting enzyme inhibitors — new antihypertensive mechanism of action?

Converting enzyme (CE) inhibitors are widely established in the treatment of arterial hypertension. Besides their ability to inhibit the circulating hormonal renin-angiotensin system (RAS), a new similar role in the inhibition of local vascular tissue RAS has now been proposed by Unger et al. (1989).

The idea that vascular renin may contribute locally to blood pressure control independent of the plasma RAS has gained substantial support through experimental work in recent years. A RAS system in the vascular wall of resistance vessels, large arteries and veins has been confirmed biochemically. In addition, the ability of the vascular RAS to synthesise angiotensin II (ANG II) independent of the plasma RAS has been shown in endothelial cells, which may exert a number of actions on vascular tone and function. Orally administered CE inhibitors block not only the plasma RAS but also CE in the vasculature, leading to decreased ANG II concentrations and possibly to an accumulation of locally generated vasodilating peptides and prostaglandins in the vascular wall. Upon drug withdrawal, this vascular RAS was more closely associated with a slow return of blood pressure to hypertensive levels than the fast recovery of the plasma RAS. These new data favour the hypothesis that local CE inhibition in the vascular wall contributes to the therapeutic effects of CE inhibitors in hypertension.


WHL Materials

US public perceptions of high blood pressure and sodium

The United States of America has sustained a decline in cardiovascular mortality for more than two decades. The decline in stroke mortality has been substantial in all ages and races, and in both sexes.

The accelerated decline in stroke mortality
coincides with increased efforts by the public to achieve healthier life styles. During the past 15 years, the proportion of adults who smoke has declined by more than 20%; per capita consumption of foods high in total fats, saturated fats and cholesterol has also decreased; and the proportion of the population that exercises regularly has increased by as much as 100%. In 1982, the National Heart, Lung, and Blood Institute conducted a survey of the public and their knowledge regarding sodium consumption. Highlights of the survey include the following. About half of the general public knows that the average consumption level of sodium or salt in the USA is related to high blood pressure. About one-third reported that they had already reduced their sodium intake, while the remaining respondents wanted to reduce their sodium consumption but either had not really tried or had not been successful. The reason for change mentioned most frequently was the possibility of developing high blood pressure. According to those on low sodium diets, the most common advice given by a health professional as a method of reducing dietary sodium is not to add salt to food. The next most common recommendation, as reported by about one-third of those on low sodium diets, is to avoid particular foods. Liking the taste of salt is usually the problem reported by those who are trying to reduce their sodium consumption. That food manufacturers add salt to everything was also mentioned with concern by these consumers. The confusing language in terminology used on food labels is also a barrier to those interested in the sodium level in their diet, although this problem decreased with increasing education. Use of low sodium recipes was primarily hindered by the amount of time or work needed to acquire and use these recipes. Only 5% of those who were on low sodium diets had been advised to use the list of ingredients on food labels to help keep track of the amount of salt or sodium in their food. Advice on the use of the nutrition label is even less widespread, with only 3% of the respondents reporting use of this source of information. Of those who have seen low sodium products in the grocery store, only one-half have purchased these types of products. Consumers generally showed less concern about sodium in the food served when dining outside of the home.  

It is concluded that if we wish hypertensive patients to reduce the sodium content of the foods they consume, they must be taught what the maximum amount of sodium consumption per day is, how to cook low sodium recipes and how to avoid foods with a high sodium content. Physicians and health professionals will need to provide more direct advice.  

E. Roccella

For a complete copy of this survey, write to the National High Blood Pressure Education Program, Box 120/80, Bethesda, Maryland, 20892, USA, and request: "Public Perceptions of High Blood Pressure and Sodium", NIH Publication 86-2730.

Library

Salt and hypertension

The complexity of arterial hypertension and the relationship between dietary salt intake and blood pressure is still under discussion. Many physicians believe in a direct correlation between high salt intake and hypertension. Recently, several studies including the Intersalt Study (see Newsletter no. 2/88) have debated the strength of the relationship between a high sodium chloride intake and hypertension in a population and pointed to the importance of other risk factors. The published proceedings of a symposium held in Bonn, FRG, in 1988, present the latest results of research on the role of different electrolytes in the pathogenesis of hypertension. This book aims at describing pathophysiological mechanisms by which different minerals influence blood pressure regulation. Research into the field is extremely active, and much is known and currently applied in clinical practice around the world. However, new discoveries still give rise to changing opinions. The scope of discussion in this book ranges from events at the cellular level to epidemiological and social issues. The volume is divided into five chapters with contributions from several distinguished authorities: Electrolyte and Volume Homeostasis, Cellular Mechanisms, Genetic Determinants of Salt Sensitivity,
Pathophysiological Significance of Different Types of Minerals, Epidemiology of Salt Consumption and Intervention Trials.
A concluding panel discussion deals with the most controversial issues, and an updated summary of the 1986 US Joint National Committee Report on Detection, Evaluation, and Treatment of High Blood Pressure is included in the appendix. The recommendations for the dietary intake of specific minerals are helpful for use by health professionals and the general public. On the whole, this book provides an excellent current review on the role of dietary minerals in volume homeostasis and cardiovascular regulation at an advanced scientific level.

Poster of the German National Blood Pressure Programme. Artist competition 1987: "Have your blood pressure measured regularly."

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