Editorial

Effects of community intervention on detection and effectiveness of treatment for arterial hypertension - Results of the Polish Four Cities Project

Cardiovascular diseases are the main cause of death in the adult Polish population. Arterial hypertension, cigarette smoking and lipid disorders represent the most important risk factors leading to myocardial infarction and stroke. Every third adult in Poland (approximately 9 million people) suffers from hypertension, another 9 million people have high normal blood pressure. Representative studies conducted during transition into market economy in Poland between 1994 and 2002 (NATPOL Projects) showed that in 2002 the number of adults in Poland who did know their own blood pressure decreased by 3.5 million compared to 1994. The highest reduction was observed in small towns and in the countryside, as well as among lower educated people. Preventive programmes should therefore be addressed mainly to those most vulnerable communities.

Raising social awareness concerning necessity for blood pressure measurement and healthy lifestyle is an important part of the fight against hypertension. Using modern social marketing methods may play a crucial role in shaping a healthy lifestyle and making the community aware of health risks. We wanted to check whether implementation of marketing techniques for the increasing of awareness of blood pressure and creation of a healthy attitude may be profitable in small-town and rural communities.

WHL News

Report from the WHL Regional Meeting in Cairo, Egypt, on April 6, 2005

This was the second WHL regional meeting to be held in Egypt. The meeting was organized jointly with the Egyptian Hypertension Society. There were representatives from Middle Eastern and North African hypertension societies.

In the morning sessions, there were discussions of the problem of obesity in the region, policies to combat hypertension in the community, guidelines for hypertension control in developing countries and approaches to achieve better control of blood pressure.

Dr. Claude Lenfant discussed the important topic of how to prevent the development of hypertension. Dr. M. Mohsen Ibrahim discussed hypertension guidelines for developing countries. Dr. Hussien H. Rizk of Egypt discussed why hypertension is poorly controlled in most countries and how to bridge the gap between knowledge and patient care. George Fodor gave a plenary lecture about hypertension and obesity in Canada. Management of hypertension in Nigeria and impediments to effective control of hypertension were discussed by Dr. Basden J.C. Onwubere. In the after-

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ties, where traditional medical screening interventions carry little effect. Such optimisation of preventive interventions and the attempt to level out disproportions in health status are in line with the assumptions contained in the latest EU documents – Heart Plan for Europe and Healthy Heart.

The aims of the Polish Four-Cities Project were: (i) to increase awareness of blood pressure in the general population; (ii) to increase awareness and efficacy of treating hypertension; (iii) to develop the most effective methods of improvements among inhabitants of rural areas and small towns; (iv) to compare standard medical interventions to an approach combined with social marketing methods; and (v) to assess the effectiveness of intensive education across the health service structures.

The project was conducted in the city of Łódź and three small towns. In one of the small towns medical intervention via social marketing was introduced. (Fig. 1).

The program was worked out by well trained specialists in sociology and social psychology (Fig. 2). It consisted of several months of intensive education and information campaign by local newspapers, radio and TV. The top event of the media campaign was a special one-day music and fest event organized in the town market square, featuring comedy shows, contests with valuable awards and a music show by popular Polish pop-stars.

Results: The routine medical screening interventions increased only slightly and non-significantly the awareness of blood pressure values.

In contrast, the social marketing activities significantly increased the awareness of one’s blood pressure from 61.5% to 79.8% (p<0.01). The most spectacular decrease of non-diagnosed hypertension from 50% to 27% was observed where the combined intervention was conducted (Fig. 3).

Conclusions: Medical intervention supported by a social marketing campaign led to a much greater improvement in self-awareness of blood pressure values among residents of small towns than only medical screening intervention alone. Medical intervention combined with community intervention in countries like Poland (large within country differences) brings the detection of hypertension in small towns up to the level observed in large cities. Medical intervention, especially when combined with social marketing methods and intensive training of the medical personal, improves the efficacy of the treatment of hypertension. In addition, the social marketing intervention appeared to be cost-effective.
The results and conclusions of the Polish Four-Cities Project served as a basis for preparation of the Polish 400 Cities Project introduced in Poland in 2004, which is now the largest national interventional program in CVD prevention being run in Europe.

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noon, the results of a physician knowledge survey conducted in five Middle Eastern countries were presented.

The final session was a panel discussion between representatives from Lebanon, Egypt, Tunisia, Morocco, Emirates, Nigeria and Canada. The objective was to find ways to promote cooperation among leagues and societies for control of hypertension and obesity, and ways to bridge the gap between knowing and doing. Areas of mutual interests were discussed with the possibility of a multinational program.

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There were eight invited speakers who gave talks of 15–20 minutes to an audience of about 250 participants. The panel session, in which representatives of various countries in Europe presented national experiences in prevention of arterial hypertension provided an inspiration for closer cooperation between the old and new Member States. Arterial hypertension is not only more frequent in Central and Eastern Europe, but also its control is poorer than in Western countries. The meeting was an occasion to exchange views in order to improve the epidemiological and health situation in the new member states and better implement the European standards of hypertension diagnosis and management.

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People

The current chairman of the German Hypertension League (DHL) – German Hypertension Society (DHG) is Prof. Hermann Haller. Secretary General is Joachim Leiblein, Berliner Str. 46, 69120 Heidelberg, Germany.

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New e-mail address of WHL Secretary General's office in Toledo, OH, USA

The Medical College of Ohio's name changed to Medical University of Ohio and the new e-mail address is gmonhollen@meduohio.edu (see also impressum).

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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Calendar

WHL Regional Meeting with the Chinese Hypertension League
October 16, 2005
Beijing, China
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167 Beilishi Lu, Beijing 100037, PRC
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5th Genova Meeting on Hypertension, Diabetes and Renal Disease
February 23–25, 2006
Genova, Italy
Information: Ms. Barbara Rossi
ARISTEA
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E-mail: rossi@aristaed.com

Scientific Meeting of the National Heart Foundation of Australia "Cardiovascular Disease in the 21st Century: Shaping the Future"
March 23–24, 2006
Sydney, NSW, Australia
Information: Heart Foundation Conference 2006,
Conference Secretariat, GPO Box 2609,
Sydney NSW 2001, Australia
Fax: (+61-2) 9251-3552
E-mail: conference@heartfoundation.com.au

World Congress on Controversies in Obesity, Diabetes and Hypertension (CODHy)
May 25–28, 2006
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