Note from the Editor

This edition heralds the important annual events of World Hypertension Day and May Measurement Month. With the worldwide epidemic of overweight and obesity we are beginning to see a reversal of several decades decline in prevalent hypertension and cardiovascular disease.

As indicated in this Newsletter, WHL plays a major part in worldwide collaborations which are gathering momentum to tackle the problems of high blood pressure and its consequences. While these efforts have a special focus on lower and middle income countries they are not to the exclusion of the several billion who are wealthier in income, if not necessarily in health and happiness.

The message for WHD and MMM is to ‘know your numbers’. But in terms of global cardio-metabolic risk we would do well to widen the vision beyond blood pressure to include the tape measure round the waist, the number of steps a day, adherence to wisely prescribed medications, periodic checks for blood glucose and cholesterol and, in lower socio economic groups particularly, urine analysis.

Good counting.

Lawrie Beilin

President’s Column

The first quarter of 2019 has included many highly impactful hypertension prevention and control efforts. These excellent accomplishments are the results of ongoing global collaborations, the fruits of which we are happy to report on in this issue.

It is fantastic to highlight the accomplishments of WHL member societies and partners. To complement these actions, it is a pleasure to welcome our new Envoys – Gbenga Ogedegbe and James Sharman.

The WHL is very enthusiastic to work with our partner, the International Society of Hypertension, on May Measurement Month 2019. In addition, World Hypertension Day will continue with the theme ‘Know Your Numbers’ and the global effort to increase blood pressure awareness. The WHL Children’s Art Contest is a new awareness component of WHD 2019. Both initiatives are important in promoting hypertension control and prevention around the world, and provide an opportunity for all to participate.

I would like for all to take advantage of the Journal of Clinical Hypertension and its valuable content. And finally, please nominate accomplished individuals and programs for the WHL Excellence awards.

Dan Lackland
WORLD HYPERTENSION DAY 2019

Following last year’s highly successful World Hypertension Day, the WHL is enthusiastically looking forward to World Hypertension Day 2019 (May 17, 2019) and its Know Your Numbers campaign, and the ISH initiated and WHL supported May Measurement Month (MMM). We want to thank you our dedicated members for your wonderful efforts to get the word out to your colleagues and the public!

We would like to emphasize the need to give special attention to World Hypertension Day in 2019, given the still huge burden of hypertension worldwide.

You can report your events and numbers through the World Hypertension League Data Reporting Sheet here. If you would also like to submit data to MMM, please check out MMMs protocol at the MMM website. We are so grateful to all of you and look forward with much anticipation and excitement to another great World Hypertension Day celebration!

Children’s Art Poster Contest 2019

Science and Art attempt to describe and understand the world around us.

We invite member societies, partners and all to participate in the 2019 Global Art Poster contest for children. The framework and guidelines for this contest are outlined in WHL Newsletter No. 161, page 11, and recent winners can be found here.

Each campaign may determine the scope and size of their contest. The best posters as judged by member nations should be sent electronically to World Hypertension League at whleague17@gmail.com

Posters should be submitted by December 1, 2019.

Winning artists will receive a WHL Certificate and their work will be displayed on the WHL website for one year, thereafter the art remains the property of the artist.
May Measurement Month

May Measurement Month Gets Set for its Third Successful Year
By Lisa Woodward

May Measurement Month (MMM) continues to build on its success. After measuring the blood pressure (BP) of over 1.2 million people across 80 countries in 2017, the 2018 campaign saw over 1.5 million people screened across 89 countries. This means that, thanks to the generous support of numerous organisations around the world, including national hypertension and cardiac societies, MMM has now reached over 2.7 million people since it began, identifying over half a million people with uncontrolled hypertension.

MMM Chief Investigator and former President of the ISH, Professor Neil Poulter, stated, “As the largest ever synchronised standardised multinational screening of any cardiovascular risk factor, we are going a long way to meet our objectives to raise global awareness of the issues surrounding raised blood pressure.”

Having had the global analysis of MMM17 published on the eve of World Hypertension Day 2018 in a paper in *The Lancet Global Health*, MMM has also organised the publication of 39 national papers from top contributing MMM17 countries in the *European Heart Journal Supplement*. Countries that screened over 2500 people were invited to contribute to the supplement, hard copies of which will be sent to 35,000 cardiologists around the world before May 2019. MMM looks forward to following these publications with the global MMM18 analysis in a top level journal before the 2019 MMM campaign begins.

Event in Philippines for MMM 2018

If you’d like to be part of MMM19 and have not already signed up, it’s not too late! We have a bank of resources to help you in setting up your MMM sites available to download from the MMM website. Even if you are only able to run a small campaign you will be contributing important data to help improve and save lives. If you would like to know more about how to get involved, please contact the MMM Project Manager: manager@maymeasure.com

UPCOMING MEETINGS OF NOTE

European Society of Hypertension
Milan, Italy June 21-24, 2019

Join us in Milan this coming June 21-24 for the 29th European Meeting on Hypertension and Cardiovascular Protection and celebrate the 30th anniversary of the establishment of ESH.

This is the annual flagship event of the European Society of Hypertension (ESH) and will offer the highest quality scientific program related to research in Basic and Clinical areas in Hypertension, with State-of-the-Art Lectures, Satellite Symposia, Teaching Sessions and credits for qualifying as Hypertension Specialists. Spotlights of this event will be modern hypertension therapy and global cardiovascular health management.

Welcome from Professor Costas Tsioufis, President of ESH.

For registration info click [here](#).
**XVII Meeting of the Brazilian Society of Hypertension & World Hypertension Congress Sao Paulo, Brazil, August 7-9, 2019**

The Brazilian Society of Hypertension’s scientific program brings the most recent updates in hypertension to physicians and allied health professionals such as nurses, nutritionists and physical educators, as well as discussions of behaviors directed to the hypertensive patient. Several issues will be discussed jointly by physicians and non-medical health professionals to give a broader view of this patient population.

Joint sessions will be conducted by the World Hypertension League, the World Health Organization and the Pan-American Health Organization regarding high blood pressure scenarios worldwide. The World Hypertension League Executive, Board and Members Meeting will also convene at this time.

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**Pan American Health Organization**

**Winter Activities in Latin America & the Caribbean Promote Cardiovascular Risk Reduction - BP Control**

By Donald J. DiPette MD; WHL Envoy to Latin America and the Caribbean

Efforts to address the increasing global cardiovascular disease burden, especially to increase the detection and control of hypertension and cardiovascular risk reduction, continue to expand rapidly in Latin America and the Caribbean. These efforts are led by the unique and synergistic collaboration of several stakeholders including the Pan American Health Organization (PAHO), the regional office of the World Health Organization (WHO) for the Americas, the Centers for Disease Control and Prevention of the United States (CDC), the Resolve to Save Lives Initiative, and the World Hypertension League.

Evidence that the **HEARTS in the Americas Program** of PAHO, in conjunction with the **Global Hearts Initiative** of the WHO and CDC in the region, is rapidly expanding is clear given the transition from the original demonstration sites and now national programs in Barbados, Chile, Colombia, and Cuba to new countries and sites, including Argentina, Ecuador, Panama, and Trinidad and Tobago. All four countries are in the pre-implementation process of the program and are ready to start formal implementation.

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Site visit team meeting with the Minister of Health, Hon. Terrence Deyalsingh, Port of Spain, Trinidad

In November, 2018, a site visit of leadership took place in Trinidad & Tobago in Port of Spain and Arima. MasterClasses took place with planning sessions to train all staff at clinical primary care sites and to start the formation of a core set of anti-hypertensive medications and a simple and standardized pharmacologic treatment algorithm.

A similar site visit to Argentina in January 2019 included meetings in both Buenos Aires and La Rioja, the Province which will be leading the HEARTS initiative. The enthusiasm and interest by all was obvious. Site team members included Pedro Ordunez (PAHO), Deliana Kostova and Kristy Joseph (CDC), and Kenneth Connell and Donald DiPette (TEPHINET Consultants to PAHO and the CDC). Supporting further WHL involvement in the program, Marcelo Orias, WHL Vice-President, joined the site team visit in Argentina.

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Site visiting team and dignitaries meet with Cdo. Sergio Casas, Governor La Rioja Province, Argentina

A recent publication in the **Journal of Clinical Hypertension** focuses on rational approaches to the initial management of hypertension. The success and expansion of these efforts in Latin America, the Caribbean, and around the globe continue to emphasize the importance of collaboration and formative involvement between our organization and those of others.
WHL Excellence Awards - CALL FOR NOMINATIONS

Nomination forms and award descriptions can be downloaded at this link.

The World Hypertension League has developed Excellence Awards at the Population Level in the categories of Dietary Salt Reduction, Hypertension Control, Cardiovascular Risk Factor Control and Clinical Research. These awards were developed to provide recognition to individuals, organizations and interventions that make tangible progress towards population prevention and control of hypertension.

Deadline for submission of award nominations: April 30th

Welcome to New WHL Member
International Council of Cardiovascular Prevention and Rehabilitation

Letter to WHL Members

As the current Chair of the International Council of Cardiovascular Prevention and Rehabilitation (ICCPR), I am writing on behalf of our Executive to formally introduce ourselves, and inform you of activities which may be of interest and utility to you.

Cardiac rehabilitation (CR) is an outpatient model of care delivering risk factor assessment and management, patient education, structured exercise, as well as nutrition and psychosocial counselling. There are internationally agreed upon standards and core components, and a robust evidence base exists demonstrating its efficacy and cost-effectiveness. It is the mission of ICCPR to promote CR (see our charter in JCRP vol 33, 2013). CR promotes blood pressure assessment and control, in alignment with WHL’s mission, hence by working together, we can amplify and achieve our shared missions to improve chronic cardiac care and patient outcomes.

ICCPR is a council comprised of named Board of Directors of major societies interested in cardiovascular prevention and rehabilitation. Currently, we have ~35 member associations (see Figure), including WHL which joined back in 2014. We also have ~10 “friends of ICCPR”. ICCPR is an official member of the World Heart Federation, with our headquarters in Canada.

Our website at www.globalcardiacrehab.com collates the resources of our member associations, including links to CR guidelines, advocacy tools, training opportunities, quality indicators, and standards.

KEY ICCPR PROJECTS:

Our members told us what they really needed was advocacy for more CR delivery. Hence, we surveyed all countries to determine the CR reimbursement sources around the world, and secured “success stories” from countries with better reimbursement and capacity (see BMC HSR, volume 16, 2016) to circulate along with our advocacy toolkit here. We also advocate for CR through our participation in the World Health Organization’s Rehab2030 initiative.

We developed a consensus statement on CR delivery in low-resource settings. It is available on ECRI’s Guideline Clearinghouse. We have a companion certification program, where trainees review a module corresponding to each core...
component, to increase capacity to deliver CR in low-resource settings, see here.

We also undertook a survey of every CR program around the world! Results of the study are now being disseminated (see example here). We are happy to report that almost universally CR programs assessed blood pressure in their patients, but only 80% prescribed or titrated medications.

In closing, we hope you will find ICCPR has some complementary resources to all that WHL offers you, bringing you ideas and perspectives related to cardiac patients specifically.

Sincerely, Sherry Grace, PhD, FCCS, CRFC
Professor, York University & Director of CR Research, University Health Network, Toronto, Chair, ICCPR, globalcardiacrehab@gmail.com

Welcome to New WHL Member
CCSS Costa Rica

By Dr. Roman Macaya, Executive President of the Fund of the Social Security System of Costa Rica

The CCSS institutional intervention begins with assessing the dimension of the disease and quantification of high blood pressure as a health problem, and the determination of the prevalence of this disease defines the institutional workload. With this in mind, with a periodicity of 4 years beginning in 2010, the Cardiovascular Risk Factors Survey was applied. The latest data is from 2014, where a prevalence of diagnosed high blood pressure was defined at 31.2%, with an incidence of high blood pressure of 5%.

After defining the problem, the instrumented care was designed by means of the Guide for the Diagnosis and Treatment of High Blood Pressure Detection, used as a standard to assess the quality of care and to ensure the design of the care process was based on the best available evidence, associated with the structural adjustment required for compliance.

Once the standard was defined, the Costa Rican Social Security Fund set forth the following goals:
• Guarantee the availability of training around the contents of the *Guide for the Detection, Diagnosis and Treatment of High Blood Pressure*.

• Perform the taking and recording of blood pressure in the general population, with emphasis on the population that uses the services.

• Achieve optimal goals of blood pressure in the population that suffer from high blood pressure.

• Guarantee the necessary supplies in terms of support for diagnosis and control, such as required laboratory and cabinet examinations.

• Guarantee the availability of medication for an adequate control of high blood pressure.

Associated with this care process are interventions in terms of health promotion, such as nutritional counseling with an emphasis on reducing salt intake, and education for hypertensive and pre-hypertensive patients through the implementation of a *Manual of Education in Non-communicable Chronic Diseases*.

**MOVE WITH THE MAYOR (MWTM)**

By Jen Childress, MS, MCHES
Senior Public Health Consultant, National Forum for Heart Disease and Stroke Prevention

Columbus Mayor, Andrew Ginther, talks to the community about heart health. Nursing staff from Columbus Public Health are at the ready to conduct blood pressure screens.

For more information on MWTM, please visit: [www.nationalforum.org](http://www.nationalforum.org).

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**From the ISSHP**

**Why Screen Younger Women for Hypertension Following Pre-eclampsia?**

By Laura A. Magee, President, International Society for Hypertension in Pregnancy (ISSHP), on behalf of the ISSHP Executive and Council

The International Society for the Study of Hypertension in Pregnancy (ISSHP) has its origins in the detection, pathogenesis, evaluation, and treatment of women with the hypertensive disorders of pregnancy (HDP). Increasingly, however, our organisation recognises the need to expand our perspective beyond pregnancy and the postpartum period. Worldwide, the HDP (and pre-eclampsia in particular) are associated with long-term complications, including but not limited to hypertension and cardiovascular disease, for both mother and child. For the mother, this may be mediated in part by shared risk factors for both pregnancy hypertension and cardiovascular disease and/or a result of vascular damage from pre-eclampsia. For the fetus, there is convincing evidence of the potential for structural change (such as reduced nephron mass) and fetal metabolic programming associated with HDP complications such as growth restriction.

It remains unproven how best to use the information acquired in pregnancy to effect positive change in the health trajectories of the
child and mother over their subsequent life course. At minimum, it is clear that all women and children who have experienced a hypertensive pregnancy should pursue a healthy diet and lifestyle and undergo cardiovascular risk factor screening.

As this is a family activity, ISSHP on this **22 May 2019 World Pre-eclampsia Day** is promoting measurement of partner BP, as a joint heart-healthy responsibility of parenthood.

The ISSHP looks forward to a new, exciting partnership with the WHL so that we can help to promote awareness of the link between pregnancy hypertension and adult hypertension and find actionable solutions to address non-communicable disease, the most pressing health care need of our time.

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**Collaboration - American Academy of Neurology (AAN) and the WHL**

By Ralph L. Sacco, MD, MS, President AAN

Hypertension remains the most modifiable risk factor for stroke and is a key target for the WHO to reach the 2025 goal of reducing premature mortality from non-communicable diseases including cardiovascular disease and stroke. Hypertension is also a major determinant of brain health including cognitive aging and dementia. Evidence-based guidelines have identified multiple approaches to treating hypertension and the WHO has identified BP control as a “best buy” given the many cost-effective approaches that are widely available.

Multiple non-government organizations have included approaches to improving BP control within their strategic platforms. The American Heart Association/American Stroke Association continues to define ideal blood pressure as 120/80 and includes BP control among the seven key characteristics defining ideal cardiovascular health. Along with lifestyle modification, evidence-based approaches to the management of hypertension are critical to reaching these population health goals. The World Stroke Organization has made stroke prevention a critical part of its global mission and disseminated approaches to the control of BP. The American Academy of Neurology is devoted to promoting the highest quality patient-centered neurologic care and has helped to educate multiple neurological healthcare providers about evidence-based approaches to prevent stroke and cognitive-based decline.

Only through collaborative approaches will we be able to reach the WHO 2025 goals and see major reductions in death and disability from cardiovascular diseases, stroke, and dementia.

**Video resources:**

https://vimeo.com/carc1/review/311919682/e57aa952ec

https://vimeo.com/carc1/review/311922894/812003d372

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**WHL Announces New Envoy for the Hypertension Management Team – Gbenga Ogedegbe, MD, MPH**

It is an exciting time to address hypertension treatment both locally and globally. In response to the high burden of hypertension worldwide, many hypertension treatment guidelines have been enacted or unveiled by major organizations. Regardless of the current state of treatment, one thing is clear: there has to be an efficient method to implement new and existing treatment guidelines in clinical practice.

Two important issues and potential barriers that have heightened this issue are the acute shortage of healthcare providers in low and low-middle income countries – where the burden of hypertension and its related complications are felt most – and the fact that majority of patients in high income nations like the U.S. receive their care in small independent practices that often do not have the resources to implement evidence-based guidelines for hypertension treatment.

Both issues are being addressed respectively by implementation of task-shifting strategies
whereby non-physician health workers can provide evidence-based hypertension care in LMICs, and secondly via the use of practice-based teams that include pharmacists, medical assistants and nurses in managing patient panel. Fortunately, the evidence supporting these two important implementation strategies is growing and I look forward, as an envoy of the World Hypertension League, to propagate the importance of improving hypertension control worldwide via the implementation of these strategies.

Gbenga Ogedegbe, MD, MPH

WHL Announces New Envoy to the Lancet Commission – Prof. James Sharman, MD

Role in global hypertension management

The world of best-practice medicine strives for high quality patient care informed by best available evidence. In this context, we know that accurate measurement of blood pressure is critical for correct diagnosis and best-practice management of high blood pressure to reduce future risk of cardiovascular events.

It would then seem obvious that health care professionals measuring blood pressure, as well as people measuring their own blood pressure at home, should only use high quality medical devices that have been proven to measure blood pressure accurately. Unfortunately, this may not be the case because the world has become inundated with blood pressure devices that are known to be inaccurate or have not been adequately tested for accuracy. This can lead to major adverse outcomes of incorrect diagnosis and missed opportunities to perform best-practice care.

The WHL has brought attention to this problem and called for tighter regulation around the manufacturing, marketing and sale of blood pressure devices. I will be chairing a committee of the Lancet Commission on Hypertension Group to work with the WHL, and other organisations internationally, to implement and evaluate actions to increase the global availability of accurate blood pressure devices. The ultimate goals are better diagnosis and treatment of hypertension, and a decrease in the worldwide burden from high blood pressure.

James Sharman, MD
Professor of Medical Research, Deputy Director, Menzies Institute for Medical Research, University of Tasmania, Hobart, Australia

PAST MEETINGS OF NOTE
International Stroke Conference
WSO/WHL Joint Session, February 6-8 2019, Honolulu, Hawaii

The WHL was pleased to join the American Stroke Association and the World Stroke Organization in sponsoring a session at the International Stroke Conference in Honolulu.

The theme of the Session was the hidden salts and sugars in diets and the risks of stroke. The Session was chaired by Daniel Lackland and Werner Hacke with the following speakers:

- **Stroke Risks and Salt/Sugar Intake:** Norman Campbell
- **Hidden Salt and Sugar Sources in Diets:** Raymond Townsend
- **Populations at Greatest Risks from Salt:** Jacqui Webster
- **Strategies: Reduce Salt and Sugar Intake:** Donald DiPette

L – R: Drs. Donald Dipette, Werner Hacke, Norman Campbell, Jacqui Webster, Daniel Lackland and Raymond Townsend
Global Summit on Circulatory Health, December 5-8, Dubai

L – R: Michael Brainin (World Stroke Organization), David Wood (World Heart Federation) and Daniel Lackland (World Hypertension League) at the Coalition for Circulatory Health Summit in Dubai

LINKS OF NOTE

World Stroke Organization Newsletter
Click here

International Society of Hypertension (ISH) Newsletter
Click here

WHO NCDs & Mental Health video
Click here

LINKS online resource center
Click here

Link’s January webinar: “Improving global cardiovascular health with three simple and inexpensive, yet underutilized interventions: hypertension control, salt reduction and elimination of artificial trans fat,” can be viewed here.

Link’s February webinar: “Choosing the best hypertension treatment protocol—does it really matter?” can be viewed here.

SCIENCE OF SALT WEEKLY

Science of Salt Weekly is a publication of weekly Medline searches related to dietary sodium. An initiative of the World Hypertension League in partnership with the World Health Organization Collaborating Centre on Population Salt Reduction, it is funded and supported by the Canadian Institute for Health Research & Heart and Stroke Foundation and the George Institute for Global Health. Click here

Knowledge Action Portal (KAP)

WHO’s interactive online platform for noncommunicable disease (NCD) information, interaction and inspiration, please click here

Mission

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

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<td>April 3-4, 2019, Cairo, Egypt</td>
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<td><strong>Stroke Course; a SLICE® Experience</strong></td>
<td>April 9-11, 2019, Tel Aviv, Israel</td>
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<td><strong>World Hypertension Day</strong></td>
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<td><strong>World Pre-eclampsia Day</strong></td>
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<td><strong>World Health Assembly</strong></td>
<td>May 20-28, 2019, Geneva Switzerland</td>
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<td><strong>2nd International Congress of Hypertension in Children and Adolescents (ICHCA)</strong></td>
<td>May 24-26, 2019, Warsaw, Poland</td>
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<td><strong>31st Annual Cardiologists Conference</strong></td>
<td>June 17-19, 2019, Rome, Italy</td>
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<td>June 21-24, 2019, Milan, Italy</td>
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<td><strong>Immigration, Acculturation and Immigration ESH Satellite Meeting</strong></td>
<td>Tel Aviv, Israel July 1, 2019</td>
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<td><strong>Brazilian Society of Hypertension Meeting</strong></td>
<td>August 7-9, 2019, Sao Paulo, Brazil</td>
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<td><strong>4th Global Conference on Circulatory Health</strong></td>
<td>August 30-31, 2019, Paris France</td>
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<td><strong>Hypertension 2019 Scientific Sessions</strong></td>
<td>September 5-8, 2019, New Orleans, LA</td>
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<td><strong>World Health Summit</strong></td>
<td>October 27-29, 2019, Berlin, Germany</td>
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<td><strong>Patient Centered Meeting on Diabetes, Dyslipidemia and Hypertension</strong></td>
<td>October 31 – November 3, 2019, Vienna, Austria</td>
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<td><strong>15th Asian Pacific Congress of Hypertension</strong></td>
<td>November 24-27, 2019, Brisbane, Australia</td>
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