WHL History 2015

Table of Contents

1. **Raison d'etre** **Dr. Patrick J. Mulrow**
2. **Introduction** **Dr. Norman Campbell**
3. **WHL History According to Detlev Ganten** **Dr. Detlev Ganten**
    - The Founding of the WHL
        - Obituaries – Drs. Bartorelli, Gross and Strasser
    - The Early History of the WHL
    - Ottawa Declaration
    - Farewell to the WHL Dr. Tom Strasser
    - Words from Past President Dr. Detlev Ganten
    - International Art Competition
    - Newsletter Office
4. **WHL History According to Claude Lenfant** **Dr. Claude Lenfant**
5. **History** **Dr. Patrick J. Mulrow**
    - Early Years in Office
    - Website
    - WHL Art Competition
    - Meetings
    - Management of US Not-for-Profit Organization
    - Preliminary Studies by Drs. Peter Sleight and Patrick Mulrow
    - Booklets and Brochures
    - Strategic Planning Meetings
    - Abbreviated WHL History

- World Hypertension Day

6. History of WHL During Dr. Liu Lisheng's Presidency Dr. Liu Lisheng (Fifth President of the WHL)

- History
- New Members Since 2006
- Meetings
- World Hypertension Day
- New Governance, Structure and Activities of the WHL
- Executive Board and Officers
- Council Conferences
- Executive Board Meetings

7. Restructuring of the WHL Dr. Norman Campbell

- January – June Update of WHL
- Journal of Clinical Investigation

8. Reflections on a Presidency Dr. Norman Campbell

- Restructuring of the WHL
- Enhancing Hypertension Prevention and Control Globally
- (January-June 2014 Update)
- Journal of Clinical Investigation

Raison d'etre

The History of the WHL

The WHL was established as a not-for-profit organization in 1984. It's main objective was to prevent and control hypertension in populations around the world. The WHL was highly effective in carrying out its mandate.

President Norman Campbell noted that many of the people involved in the founding and development of the WHL were still active and could contribute to an authoritative history of the World Hypertension League. This document not only details the founding of the WHL, but also the recent reorganization and development of the League.

Introduction by Dr. Norman Campbell

The principal mandate of the World Hypertension League (WHL) is to aid the prevention and control of hypertension in populations all over the world. The WHL is in official relations with the World Health Organization and the International Society of Hypertension and its members are leagues, societies, national and regional bodies aiming at hypertension prevention and control. Individuals cannot join. The WHL is the "connective tissue" of organizations that are working to reduce the burden of hypertension. However, beyond its liaison function, WHL stimulates the establishment of new organizations where this type of organized approach to hypertension control does not exist. WHL promotes exchange of information and best practices among the member organizations and develops resources and position statements to foster and lead in hypertension prevention and control.

The WHL communicates using its website (whleague.org), its newsletter, email updates and its official journal, the Journal of Clinical Hypertension as well as through regional and global meetings. Through its member and partnering organizations, the WHL potentially reaches millions of men and women with hypertension and associated risks and diseases all over the world. This document presents the evolution of WHL's activities since its foundation. While progress in medicine has its roots in research, the primary domain of the International Society of Hypertension, the WHL focuses on health policy, and health services that reduce the burden of hypertension and its related risks and diseases.

World Hypertension League History According to Dr. Detlev Ganten

This document presents a summary of WHL's activities since its foundation. It also reports on what WHL's member organizations are doing in the practice of hypertension control. While progress in medicine has its roots in research, the domain of the International Society of Hypertension (ISH), it rests with WHL to act as a transmitter between science, health policy, and the practice of hypertension control.

The Founding of the WHL

Founding an international organization takes time; money, though important, comes second; but, the precursor and sine qua non of an organization is the concept and the people behind it as the driving force.

Dr. F. Gross
*1913 †1984

Dr. C. Bartorelli
*1911 †1991

Dr. T. Strasser
*1922 †2001

Already established in 1964, the International Society of Hypertension (ISH) illustrated the benefit of such an international organization in promoting research and catalyzing exchange of research information. In order to similarly promote the necessary prevention oriented research and application of public health activities, the idea of a European League was proposed in 1975 by the famous hypertension researchers Franz Gross (Germany), Cesare Bartorelli (Italy) and Tom Strasser (WHO). Their ideas fell on fertile grounds and finally resulted in the formation of the World Hypertension League (WHL) in 1984.

Hypertension is a worldwide problem. This was clear from epidemiological studies in the 1950's and 60's. Hypertension research benefited greatly from the establishment, around 1964, of the International Society of Hypertension (ISH), whose congresses greatly catalysed exchange of research information; but practical applications to populations seemed to be lagging behind research.

The concept of hypertension control in populations, emanated by the World Health Organization (WHO) and the United States National High Blood Pressure Education Program fell on fertile ground in the 1970s. National leagues against hypertension started coming to life in a number of European countries (e. g, Italy, Germany, Belgium, Portugal, Greece); they had both medical and lay members, and their aims were distinct from those of scientific societies.

Around 1975, the idea of a European league was born in discussions between Franz Gross of Heidelberg, Cesare Bartorelli in Milan and Tom Strasser, then working for the World Health Organization (WHO) in Geneva. Gross and Bartorelli were members of the WHO Expert Committee for Cardiovascular Diseases and were involved in a number of WHO meetings on hypertension, in particular, mild hypertension. (WHO had

established, in 1973, a Mild Hypertension Liaison Committee, to link the ongoing trials on mild hypertension, pre-eminently a population problem.)

In 1977, Professor Bartorelli hosted a memorable conference at the beautiful Villa d'Este on Lake Como, gathering sixteen personalities from eight countries. Professor Detlev Ganten, one of the future Presidents of the WHL, was among the participants. The concept of a European league against hypertension was formulated at this inspiring conference.

A second conference was hosted by Franz Gross and the German League in Düsseldorf in 1980, which reinforced the idea of co-operation between the existing national leagues and WHO. t the third conference, co-organized in Geneva in 1982 by the WHO and the International Green Cross, the concept of a wider association of anti-hypertension leagues was clearly defined, with aims “to be complementary to WHO's hypertension control activities". As stated in the minutes of the conference, "A periodical newsletter ... would be the best medium for circulating information among the member leagues and societies." Drs. Gross and Strasser were assigned the task of drafting a blueprint of the bylaws. These were revised and supplemented by Drs. L. Hansson and J. Ménard and then circulated to all national hypertension leagues and societies, including those outside of Europe.

Seven months later, on June 1, 1983, the Fourth Conference of the Anti-Hypertension Leagues and Societies held in Milan, accepted the third draft of the Statutes, and concluded "to proceed with the establishment of the World Hypertension League when at least seven national leagues (societies, committees) have declared the intention to join".

Objectives:

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)

Candidates for membership quickly exceeded the magic number of seven, and with the financial support of the International Green Cross, WHL was registered in Geneva as a non-profit international organization on January 4, 1984.

The first annual conference of the now officially established WHL took place in Geneva on June 22, 1984, in the presence of the chairmen of fifteen national hypertension leagues and societies (Dr. R.L. Hodge (Australia), Dr. A. Amery & Dr. G. Rorive (Belgium), Dr. J. McKenzie (Canada), Dr. M.A.D.H. Schalekamp (Denmark), France, Dr. A. Distler (Germany), Dr. A.A. Jensen (Holland), Hungary, Dr. A.E. Doyle (ISH), Dr. T. Tosenthal (Israel), Dr. C. Bartorelli (Italy), Dr. C. Rosendorff (South Africa), Dr. M. Luque-Otero (Spain), Dr. L. Hansson (Sweden), Dr. S. Bothig [(WHO], Dr. J. Handler

[International Green Cross] & Dr. H. Brunner (Switzerland), Dr. C. Lenfant [NHLBI] & Dr. M. Moser (United States). WHL then developed steadily to attain, in 1994, the number of 49 regular members, covering a major part of the globe, as well as 7 associate and 13 supporting members.

Obituaries

Cesare Bartorelli 1911-1991

Cesare Bartorelli was born in Parma, Italy. From 1936-40 he was an assistant professor at the Institute of Human Physiology in Bologna and spent a year at the University of Zurich under Walter Rudolph Hess, the Nobel Laureate. From 1955-66 he was professor of internal medicine at the University of Siena and from 1966-81 at the University of Milan. He was director of the postgraduate school of cardiology at the University of Milan until 1986, past president of the Italian Cardiac Society, and honorary president of the Italian Society of Hypertension. Bartorelli was a pioneer in research, particularly on neural and reflex mechanisms in hypertension. He was a leader in the early therapeutic work that made hypertension a manageable condition and his name is associated with important papers on the use of ganglion blocking agents, guanethidine, thiazide diuretics and diazoxide. His continuing interest in therapeutic development in more recent years is evident from his work on beta-blockers and the introduction of calcium antagonists into the antihypertensive armamentarium. In his early approach to antihypertensive therapy he was closely associated with other eminent physicians and therapists such as Lord Rosenheim [Munk's Roll, Vol.VI, p.394], Sir George Pickering [Munk's Roll, Vol.VII, p.464] and Nora Zaimis [Munk's Roll, Vol.VII, p.628]. He was among the founding fathers of the International Society of Hypertension and a member of its first scientific council, 1966-74. In 1968, he founded the Instituto di Ricerche Cardiovasculari - now the Centro di Fisilogia Clinica e Ipertensione - at the Ospedale Policlinico in Milan. In 1981, after his retirement from the chair of clinical medicine at the University of Milan, he founded the cardiological centre Fondazione Monzino, to which he gave his attention and affection until the end.

Franz Gross 1913 – 1984 – Franz Gross was editor in chief of the Supplements for Journal of Cardiovascular Cardiology. He was raised in Leipsic, Germany where he began his scientific career in 1938. In those early days he was among the first to perform continuous blood pressure recordings on his own self. After his training in internal medicine he worked at the Institute of Physiology in Berne, Switzerland where he became interested in the adrenal gland. During the research department of the Ciba he was deeply involved in the development of drugs for controlling high blood pressure. He was one of the first to show that the renin system was important in the control of aldosterone secretion from the adrenal gland. He was a highly respected scientist and played an important role in founding the WHL.

Tom Strasser, M.D., Ph.D. 1922 – 2001: Born November 8, 1922 in Sombor, Yugoslavia. Belgrade University 1940. During German occupation of Yugoslavia he was in various Hungarian camps, escaped in 1944 and joined Yugoslav Army.

Resumed medical studies in 1945. Obtained M.D. in 1950. Worked one year on epidemiology of endemic syphilis in Serbia. Specialization in cardiology Belgrade University in 1956. Ph.D. on thermophysiology in 1960. Professor of Medicine at Belgrade University between 1963-1969. Joined WHO CVD Unit in 1969 and was responsible for several cooperative international studies on community control of hypertension, rheumatic fever and clofibrate trial, excelling in epidemiology. Took part in Ancel Keys seven-country studies in 1962 and spent a year in Key's laboratory in Minneapolis, MN. Retired from WHO in 1982.

Founding Certificate of the WHL

WORLD HYPERTENSION LEAGUE

une Association, conformément aux articles 60 et suivants du Code Civil Suisse dont les personnes susvisées sont les seuls fondateurs, et arrêter les statuts de cette Fondation tels qu'ils sont ci-annexés.

Les comparants en leurs nom et qualités, déclarent et confirment par les présentes que Messieurs Thomas STRASSER, Franz GROSS, Martin DOLL, et Joseph HANDLER ont été nommés membres du premier Conseil de l'Association.

DONT ACTE

Et après lecture faite, les comparants ont signé le présent acte avec le Notaire.

(Signé) : Joseph HANDLER
Thomas STRASSER
Martin DOLL
Pierre-Frédéric BUHLER

Enregistré à Genève, le 6 janvier 1984
Vol. 1984 No 102 percetion 14.70
un renvois sans mot nul
(Signé) : Yves RUAUX

J. H.
T. S.
Martin Doll

ADMINISTRATION DE L'ENREGISTREMENT GENÈVE
06 JAN. 1984

PIERRE F. BUHLER NOTAIRE A GENÈVE

Y. Ruaux

Visés et paragraphés "ne varietur" par les parties, en présence du Notaire soussigné, pour demeurer annexés à l'acte constitutif de l'association "World Hypertension League" dressé par Me Pierre-Frédéric BUHLER, Notaire à Genève, soussigné, le présent jour.

Genève, le quatre janvier mil neuf cent quatre-vingt-quatre.

P. Buhler

World Hypertension League Statues

WORLD HYPERTENSION LEAGUE STATUTES

Revision 1993*

Article I

Name and Location

Bearing the name of ***WORLD HYPERTENSION LEAGUE (WHL)***, an association of public interest has been established under the provisions of Article 60 and following of the Swiss Civil Code.

The League is a division of the International Society of Hypertension (ISH).

The Office (Secretariat) of the League is officially in Geneva; this location can be changed by decision of the Board.

Article II

Objectives

The objectives of the WHL are to promote the detection, control and prevention of arterial hypertension in populations, complementing thereby the activities of ISH. To this aim, WHL promotes and assists the national leagues, societies, committees and similar bodies by:

I. Establishing liaison between these bodies;
II. Assisting the exchange of information and of experience between them;
III. Offering internationally applicable programs aimed at the control of hypertension;
IV. Circulating a Newsletter of common interest;
V. Producing other information material on hypertension control; *and*
VI. Collaborating with other related international organizations.

Article III

Membership

I. Members (member organizations) of WHL are bodies representing one or more countries, which aim at the detection, control and prevention of arterial hypertension, as well as the support of scientific activities related to hypertension, provided that their intention of joining the Association has been expressed by a declaration, signed by the president (chairman, secretary general) of any such organization.

The term *Member* (Member Organization) refers in this context to leagues against hypertension, hypertension societies or associations, hypertension committees or other organized groups of health workers and/or lay people having set hypertension control as the principle aim, provided that the activity of such an organization covers, in principle, a whole country.

II. *Associate* Members are bodies (organizations) which, though not covering a whole country, by their education or health promotional activities contribute to the control of hypertension in populations.

III. *Supporting* Members are corporations, which make logistic, financial or any other significant contribution to WHL, promoting thus hypertension control by the intermediary of WHL. Such contributions will not entail any obligation on the part of WHL.

IV. Decision on admitting to membership is delegated by the Council to the Executive Board.

Article IV

Governing Body

I. The Association is governed by its Council, consisting of one representative of each Member Organization. In principle, the Council consists of the presidents (Chairmen, Secretary-Generals, etc.) of the Member Organizations; however, this responsibility may be delegated by the respective Member Organization to its vice-president, secretary, or any other representative.

II. The Council meets once in two years as a minimum. An extraordinary meeting may be convened if judged necessary by the President and the Secretary General, or at the request of at least three member organizations.

A quorum of 40% of the Council is required.

At the direction of the Board, voting can be done by correspondence.

Article V
Executive Organ

The executive organ of the Association is its Board, elected by the Council. The Board consists of the President of the League, the President Elect, the Immediate Past President, the Vice-President, the Secretary General, elected viz. appointed by the Council, the President of ISH (ex officio), or his nominee, and a member of the Scientific Council, of the International Society of Hypertension nominated by that body. The President and Vice President are elected for a period of 3 years with normally no more than two consecutive terms; the Secretary General is appointed for a 5 year period.

Article VI

Rights and Duties of the Members

I. The rights of the Members are as follows:
- To have access to any information provided to or produced by WHL;
- To receive educational or other material relevant to hypertension control, available to WHL;
- To receive the Newsletter and other publications of the League;
- To be represented in the conferences and other meetings of WHL.

Representatives of Associate and Supporting members may attend the council in the capacity of observers.

II. Duties of the Member Organizations are:

- To support the activities of the WHL;
- To pay annual dues to the Association – except if payment of the dues has been waived by the Council. The amount of the annual dues is fixed by the Council, and is equal to all member organizations. Exceptionally, in case of foreign exchange difficulties, payment of the dues can be deposited in local currency.
- Supporting members make annual contributions according to the best of their capacity.

Article VII

Fund-raising

For the fulfillment of its objectives, fund-raising will be done by WHL, in coordination with the respective national bodies.

Article VIII

Management

The Secretary General prepares an Annual Report, including the audited financial report, to be submitted by the Executive Organ to the Council, and subsequently to the Member Organizations and to the Scientific Council of the ISH.

Article IX

Regionalization

To facilitate relationships at the international level, the Council may establish regional chapters, consisting of a sufficient number of members.

Article X
External Relationships

The Executive Board may decide to establish official relationships with organizations, agencies or other bodies related to the promotion of health, if justified by existing or expected collaboration. Organizations in Official Relations (OIOR's) are invited to delegate representatives to the Council Conference.

The Council may decide to disestablish the official relationship, if (not sooner than after 2 years) collaboration on the part of the respective organization is judged insufficient by a 2/3 majority of the Council.

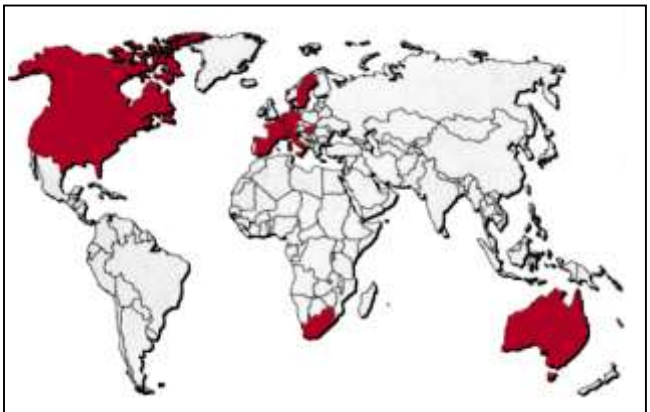
WHL is in official relations with the World Health Organization.

Article XI

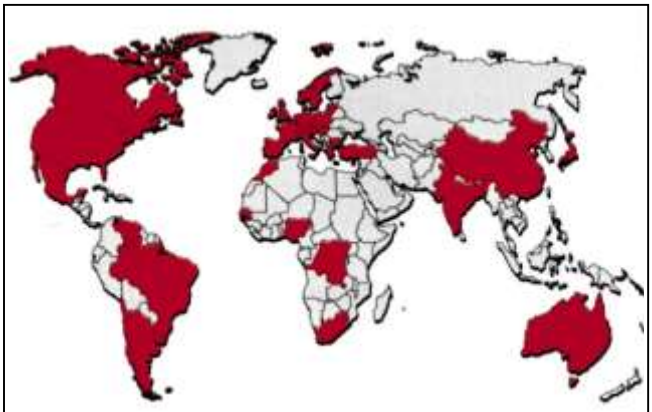
Cancellation of Membership and Dissolution of the Association

I. Any Member Organization may cancel its membership at a notice of 6 months by simple written declaration, as described in Article III.

II. Dissolution of the Association can be decided by 2/3 majority vote of the Council. Remaining assets, if any, will be put at the disposition of another organization having similar aim, to be selected in the final meeting of the Council.



WHL Members in 1984



WHL Members in 1994

The Early History of the WHL

World Conference on Hypertension Control

The first World Conference on Hypertension Control was held in Ottawa, Canada, from June 21-24, 1995 under the Presidency of Professor Detlev Ganten and with great support by the Canadian organization and colleagues. The Conference was jointly organized by the World Hypertension League and the Canadian Coalition for High Blood Pressure Prevention and Control. It was co-sponsored by the Canadian Hypertension Society and Health Canada.

The Conference was an outstanding success, attended by more than 500 participants from 67 countries. 153 oral and poster presentations were given during the three days focusing on key issues related to high blood pressure prevention programs in the community. The presentations were published in the Journal of Human Hypertension and the Canadian Journal of Cardiology.

The experiences of the Conference were summed up by a panel of experts in a Declaration which was released at the closing session. It analyzed the current situation in hypertension control in the world and identified a blueprint for action for the coming decade.

HYPERTENSION CONTROL IN THE WORLD: AN AGENDA FOR THE COMING DECADE

(The 1995 WHL Ottawa Declaration)

The changing image of hypertension

As a public-health problem hypertension is a complex concept. The higher the prevalence of cardiovascular, cerebrovascular and renal disease in a population, the greater is the importance of hypertension; conversely, the higher the blood pressure of a population, the higher is the prevalence of those diseases and the greater the public health burden they represent. Time trends in the prevalence of cardiovascular and cerebrovascular diseases convey an even greater importance to hypertension. In countries or societies where they show a rising prevalence (e.g,. in the eastern part of Europe) the need for more vigorous public-health action against hypertension is particularly urgent (1).

For an individual the risk to health of a given blood pressure is heightened by the presence of other risk factors such as obesity, diabetes mellitus, excessive alcohol use and left ventricular hypertrophy. No doubt, epidemiological studies would demonstrate

this association also at population level. Since faulty nutrition, smoking, alcohol misuse, and physical inactivity are primarily determined by societal factors, the fact that hypertension affects populations jointly with these risk factors emphasizes its societal character.

The distribution of blood pressure values differs considerably among various populations. For example, the ninetieth percentile of systolic blood pressure varies between 146 mmHg and 176 mmHg, resulting in wide differences in the proportion of people having "hypertension" in various parts of the world (2). With cooperative worldwide projects, such as MONICA (2) and INTERSALT (3), the subject of high blood pressure/hypertension is moving towards anthropology and sociology, as shown by Epstein and Eckhoff in 1967 (4), and confirmed recently by new information in INTERSALT (5).

Worldwide Perspectives

Hypertension is ubiquitous, though the public health burden it represents, both absolutely and relatively, differs from country to country. Its ubiquity as a major public health problem is the justification for the present World Conference.

There are many approaches to the prevention or reduction of the damage caused by hypertension in the world's populations, and in most of them populations have roles to play. This conference has enabled WHL to obtain a truly global view of the approaches, difficulties and solutions associated with the control of hypertension, which should benefit all participants and societies. Indeed, this is the role of WHL, its raison d'être.

International experience is of great value for the establishment of national policies, as is the communication of national experience to international bodies, such as the World Hypertension League. A review of selected national programs of hypertension control and cardiovascular disease prevention has shown the importance of mobilizing broad segments of society, including medical and lay organizations acting in partnership (6, 7). Hypertension control programs must include provision for their own evaluation, with regard to process and outcome, as well as to impact on the levels of blood pressure of the populations or communities for which the programs are designed (8, 9, 10). International communication and comparison of the impact of such programs should help to define the best approaches (11). Developing countries may need specific consideration in this regard. Much can be achieved with modest means, if there is adequate societal support. Hypertension control measures should be firmly based in primary health care. Health education and, especially in the rural environment, even promotion of literacy can be powerful support measures (12).

Tasks for WHL

Priority on the agenda for hypertension control must go to primary prevention of hypertension, and of cardiovascular disease in general. The agenda is focused, in this respect, on the behavior of people, particularly of the young. In Australia, for example, higher-risk children show greater responses to lifestyle intervention programs (13). In the United States of America, primary prevention of hypertension has already been recognized (14). In developing countries, primary prevention may be the only practicable approach to hypertension control at the level of the population (15).

New partners must be sought for population based approaches. For instance, because 80% of sodium intake in developed countries comes from processed food, the food industry should be requested to reduce gradually the sodium content of such food (16).

Barriers to the control of hypertension and to the prevention of cardiovascular disease need to be identified and overcome. Besides the economic barriers (17), non-adherence to both non-pharmacological and drug therapy calls for special attention (7, 18). Analysis of the impact of various guidelines and consensus papers, e.g., the reports of the U.S. Joint National Committee, shows that they are very influential in promoting hypertension control (17). Obviously, the treatment of hypertension must remain at the heart of hypertension control. Research continues to produce better drugs.

The education of patients is a crucial issue. It is fundamental to train physicians and other workers in methods of educating patients. Communication with populations, whether in developing or developed countries, calls for efficient use of communication technology (19). In a developing country such as Brazil, television has been shown to be a potent medium for increasing awareness of hypertension among the population; it reaches 96% of the population and has an important role in the life of the family (20).

As funds are scarce, the economics of hypertension control needs particular attention. Cost-effective methods of hypertension control need to be promoted. Social endorsement of hypertension control needs to be strengthened. Much can be learned from the past on how to establish national leagues or societies for the control of hypertension as well as national control programs.

In this regard, the World Hypertension League has gained considerable experience in its first decade of existence. The prospect of affiliation with the League seems to act as an additional stimulus for the establishment of new national leagues or societies. Financial support from industry for their establishment is a useful health investment. Older national hypertension societies, even if mainly research-oriented, are increasingly involved in teaching and public health. This is the principal commitment of national leagues against hypertension.

Finally, the application of research findings to public health action needs to be fostered. Translating scientific knowledge into community action is a permanent task. This applies, in particular, to epidemiological studies of health risk profiles of populations. Hypertension may be used as a lever for reducing numerous health risks of populations.

An outline for action, the conclusions of the World Conference on Hypertension Control may be summed up as follows:

- The goals of the World Hypertension League should continue to be emphasized and supported.

- The establishment and building up of national leagues and societies in developing countries and in other countries with economic constraints needs particular attention.

- The commitment of national leagues and societies to the control and prevention of hypertension should be stimulated. National societies, concerned mainly with research into hypertension and the communication of research findings, might benefit from including in their programs practical aspects of hypertension control. Coalitions of national associations and leagues dedicated to hypertension prevention and control should be fostered, and should advance the concept of hypertension control as an important component of health promotion.

- Cooperative international projects, concerned, for example, with assessing the quality and impact of hypertension control programs, or promoting the education of patients, are concrete approaches to the advancement of hypertension control. Through such programs and similar activities, the World Hypertension League complements the work of the International Society of Hypertension, the International Society and Federation of Cardiology, and the World Health Organization.

By emphasizing that hypertension control programs should be continued with comprehensive cardiovascular and health risk reduction, the World Hypertension League can contribute to the improvement of general health in populations throughout the world.

Dr. Thomas Strasser

Farewell to WHL

Persons of my age are familiar with the emotions one experiences when children, having grown up, leave the home. It is a mixture of gratification and regret, a sensation of joyful loss.

I have a similar feeling in responding to the Editor's invitation to write a farewell message to WHL.

During its 12 years of existence, WHL has reached majority, even maturity, as shown at the recent World Conference on Hypertension Control in Ottawa. From the initial seven, membership has increased to nearly seventy, and most of the members are actively committed to hypertension control. The WHL Newsletter is distributed in some 14 thousand copies. WHL symposia have tackled pragmatic issues: hypertension control in developing countries, patient education, economics, communication, and auditing of care. Self-measurement, weight control, exercise, alcohol, combinations of non-drug interventions have been in the focus of WHL's statements for the practitioner and for the lay public.

So, what next? The time has come to put more emphasis on preventing hypertension. Newer insight into the epidemiology of hypertension -I am tempted to say, into the anthropology of blood pressure - shows how closely blood pressure depends on social determinants. Is it preposterous to say that primary prevention of hypertension belongs to the domain of social engineering, and that it is up to WHL to take the lead? It is easier to pay lip-service to primary prevention than to tackle it; but, in the field, there seems to be real commitment to this goal.

In conclusion, without being overly optimistic: may WHL contribute as significantly to the prevention of hypertension as it did to the improvement of care.

All the best!

Thomas Strasser

Dr. Detlev Ganten
Past President

Dr. Detlev Ganten

Serving as President for an international organization such as WHL means taking on a lot of responsibility and commitment. I did this with great pleasure, knowing that I could rely on the help and advice of the Executive Board and the member organizations of our League.

During my presidency from 1990 - 1995, WHL had taken a very successful development: membership increased very rapidly, and covered more than two-thirds of the world population. WHL initiated valuable programs and organized meetings on specific issues of hypertension control in populations. The Council Conferences offered the important opportunity of direct exchange of experience between our members.

We established the WHL Newsletter as an important means of communication within and outside our League - with the language editions in Portuguese, Italian, and Chinese, it was circulated to about 50,000 opinion leaders and health care professionals worldwide. The International Art Competition had grown into a popular project. The first World Conference on Hypertension Control, jointly organized with our Canadian friends, was without doubt one of the most successful WHL meetings.

WHL is not a basic research organization, but science has to be the basis of community programs. The application of research findings to public health action needs to be fostered especially in view of the new possibilities emerging from molecular medicine.

I am convinced that the new President, Dr. Peter Sleight, and the new Secretary General, Dr. Patrick J. Mulrow, will develop WHL into an even more important organization.

I would like to thank you all for the support I have experienced from you, and I would ask you to extend this support to the new President, Dr. Peter Sleight, and to the new Secretary General, Dr. Patrick J. Mulrow. These colleagues and WHL deserve and also need your support and assistance to fulfill the noble goals of the World Hypertension League!

Detlev Ganten

Purpose of the Newsletter

The publication of the first WHL Newsletter and its continuous editions resulted from activities initiated in the 1970's, when the concept of a population-oriented approach to hypertension control was suggested by the WHO and the U.S. National High Blood Pressure Education Program. The starting point of these considerations was the perceived lack of practical application of the enormous research progresses made in clinical hypertension research.

As stated in the minutes of the founding conference of the World Hypertension League, "A periodical newsletter should be the best medium for circulating information among the member leagues and societies". As the WHL steadily began to increase in members, the WHL Newsletter project was further advanced.

WHL·NEWSLETTER

News from the World Hypertension League (WHL).
An organization in official relations with the World Health Organization

No. 1, October 1988

Editorial

Another Newsletter, Another League?

WHL-News

Contents

In October 1988, the first WHL Newsletter (see picture 1) was sent out to its worldwide audience. The Newsletter started out with a circulation of 2,000 copies, which steadily increased to 14,000 printed copies in 2005 (figure 1). Together with its Portuguese, Italian and Chinese translations, the WHL Newsletter reaches health care professionals, opinion leaders and national institutions in over 130 countries all over the world.

The **Newsletter** was another way to educate the membership. Many Presidents of the member leagues/societies, especially in the underdeveloped countries, wrote articles describing hypertension activities in their country, which helped us learn about their specific regional needs.

"Above all, the League is committed to the fostering of contacts, among people and among organizations. Meetings, though important, are not necessarily the best way of achieving this aim. We hope our newly born Newsletter will develop into a solid vehicle of information, perhaps the prime instrument for bringing together all those aiming to promote hypertension control in the world. This is its raison d'etre, and it is with this preamble that we offer the reader the first issue of WHL Newsletter." Tony Amery and Tom Strasser, **WHL Newsletter** No. 1, October, 1988

A **"Servier Lecture"** was established in 2005. Servier had sponsored the WHL Newsletter since 1988 and decided to renew its corporate partnership with the WHL. The WHL would link Servier on our website, Servier would be invited to the WHL

Executive Board Annual Dinner (which Servier funded), and a Servier Lecture, given by a speaker chosen by WHL in agreement with Servier, would be organized every two years during the WHL Council Conference.

Dr. Liu Lisheng was the first Servier Lecturer in Beijing in 2005.

Since its beginning, the WHL Newsletter serves three main goals.

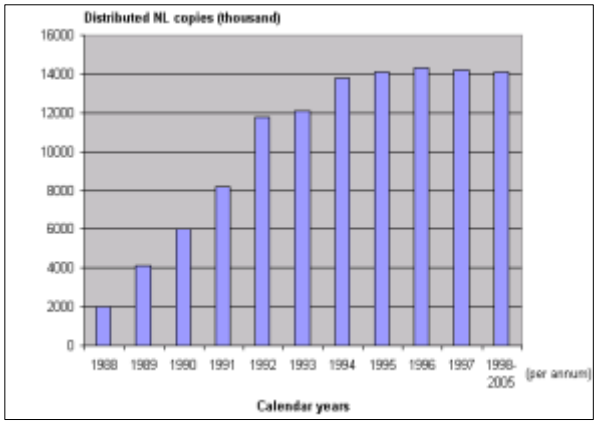
First, it is a communication forum for the WHL member organizations, spreading news from the member leagues such as activity reports, national data on hypertension, up-coming meetings and conferences, as well as people news, e.g., newly elected presidents.

Second, up-to date reports on relevant topics related to hypertension research, epidemiology and public health are featured, written from renowned experts in the field.

Third, the WHL Newsletter is the mouthpiece of the WHL board, allowing its officials to communicate the activities of the WHL to its members, e.g., invitations to the WHL council conferences, information about WHL workshops, or announcement of the International Art Competition.

The WHL Newsletter is a product of close collaboration between the Newsletter editors and the WHL board and its president. The jointly established conceptual framework and the content wise formulation were and are the basis of the successful continuation of the WHL Newsletter.

A Newsletter project of this magnitude, organized by a non-profit organization, is only possible with generous financial support from outside the organization. Therefore, gratitude goes to the initial sponsor of the WHL Newsletter, Les Laboratoires Servier (1988-1996) and to OMRON Healthcare (1997-2015). Without this financial support, the WHL would not be able to continuously provide its Newsletter - the core communication module of its activities.



Finally, we wish to thank all scientists and public health workers who have contributed to the WHL Newsletter by writing articles about their research or about current topics in hypertension prevention and control.

Newsletter Office Work Force

The WHL Newsletter office was located from the beginning in Heidelberg and strongly supported by the German Hypertension League and Prof. Ganten at the Department of

Pharmacology in Heidelberg. It then moved in 1991 to the Max Delbrück Center for Molecular Medicine (MDC), Berlin-Buch. Additional grants were obtained from various sources. Dr. Rolf Badenhoop was the first editor, acting from 1988 to 1990, followed by Dr. Reinhard Baildon who served until 1992.

Dr. Jörg Pötzsch

He was followed by Dr. Joerg Poetzsch, who continued the editorial work between 1993 and 1999. He later on was serving as Communications Advisor to the WHL Board.

From the year 2000 to 2010, Dr. Anja Kroke has been serving as the WHL Newsletter Editor.

The editorship of the WHL NEWSLETTER then was taken over by Dr. Daniel Lackland.

Dr. Anja Kroke

Erika Pisch

Erika Pisch served as a most efficient editorial assistant for many years from 1991 to 2015, giving irreplaceable support for the production of each WHL Newsletter and keeping communication going between the changing officers of WHL and the member leagues. Without her, this important project of WHL would not have been so successful.

Additional Data

WHL Newsletter Delivery:

1988–2009 bi-monthly edition of printed version (NL 1 – NL 125)
2007–2009 bi-monthly edition of printed version & electronic format (NL 113-125)
Since 2009 quarterly edition of E-Newsletter (starting with NL 126)

WHL Newsletter Print Out:
2005: 14,000 copies
2009: 10,000 copies

2014: 1.671 mailshot results E Newsletter

WHL International Art Competition

The tree of life is evergreen
by Luo Zhenru from China

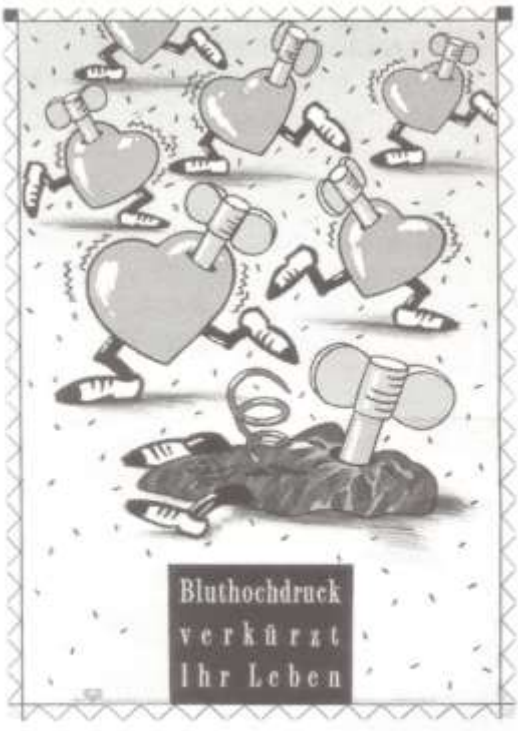
On April 7th, the World Health Organization celebrated World Health Day 1992 under the slogan Heartbeat - the Rhythm of Health.

The ceremony in Geneva included the International Award Ceremony of the WHL Art Competition; the winning artists attended the ceremonies.

The WHL had chosen communication through art to illustrate the benefits of a healthy lifestyle to a larger audience because, compared with verbal communication alone, art offers new chances to promote health. The goal of the Art Competition was to raise public awareness of the need to prevent, detect and control hypertension as one of the major risk factors for cardiovascular diseases and also to illuminate some of the possibilities of achieving these goals.

Project outline

In 1987 the German National High Blood Pressure Program organized a poster contest amongst students of the Stuttgart Academy of Arts. The entries received at that time were shown in a travelling exhibition throughout Germany. Based on the experience from this project, the WHL organized from 1990-1996 similar competitions in nine more countries. The WHL national member organizations in Argentina, Australia, Brazil, China, Hungary Israel, Italy, Spain and United States participated.



High blood pressure will shorten your life
by Karin Kocher from Germany

Students from art academies were invited to submit posters concerned with cardiovascular disease, high blood pressure and the prevention, detection and control of this condition. The artists were asked to emphasize positive aspects of hypertension control and the benefits to be gained from a healthy lifestyle. The WHL member leagues chose the national winners and organized a national award ceremony. For the international competition all entries were sent to the WHL. The international jury consisted of representatives of the WHL and WHO. The posters were exhibited in the WHO building in Geneva on World Health Day, April 7th, 1992. On that day the three international winners were also

presented their awards by the Secretary General of the WHO, Dr. Nakajima.

During the month of May, the posters were on display for the General Assembly of the WHO in the Palais des Nations in Geneva.

As a follow-up activity to the WHL Art Competition, a travelling exhibition of the 46 posters was organized.

Experience from the project

The WHL International Art Competition has shown that art can be used to communicate to health care professionals, patients and the general public about the chances and possibilities in the prevention, detection and control of hypertension as one of the major risk factors of cardiovascular disease. To avoid misconceptions by the artists, thorough information before the contest is necessary. This is best done through personal contact between a local expert, such as a representative of the WHL member league, and the art school in question. Our experience also suggests that one should stress the positive aspects of prevention to avoid receiving overly negative or scary images. A clear statement of the messages to be conveyed, such as reducing overweight, avoiding excess alcohol and salt, exercising regularly and taking medication as prescribed makes it easier for artists to translate these into visual images. Nevertheless, tapping the creativity of artists opened novel ways of communication and also served to provide new impetus to the participating WHL members. The contest was one step in making high blood pressure an issue in the affected population and can easily be integrated into other continuing efforts of the hypertension societies involved. Making the contest international provided extra visibility to the national efforts and enabled countries in which no national competition had been organized to participate.

Don't beat your heartbeat
by Galit Aka-Maurer from Israel

The Award Ceremony of the **Second International Art Competition** took place at the 15th Scientific Meeting of the International Society of Hypertension (ISH) in Melbourne, Australia.

An international jury had judged the 38 poster entries from the five participating countries in order to determine the winners of the International Competition. This consisted of the WHL Executive Board, representatives of the participating Leagues and of the ISH, and the Director of the Berlin Art School. The judging criteria were artistic impression, the clarity of the message the posters conveyed, design/technique, and the expected impact on the viewer. To judge the posters was not easy, and the WHL would

like to thank all the artists who participated in the competition for their efforts. All 38 posters were exhibited during the Meeting in the World Congress Center in Melbourne.

The WHL and the ISH had invited the winners of the International Competition to receive their certificates at the Awards Ceremony in Melbourne.

The Award Ceremony of the **Third International Art Competition** was held at the 16th Scientific Meeting of the International Society of Hypertension (ISH) in Glasgow, UK (President: Peter Sleight).

In May 1996 a jury of 13 members rated the posters that were sent from the United States and China. The first prize was awarded to the poster “Your Heart is in Your Hand” by Emily Artz from the US. She attended the Award Ceremony in Glasgow.

World Hypertension League History According to Dr. Claude Lenfant

I began my career at the US National Institutes of Health (NIH) on September 15, 1970 following a position as Professor of Medicine, Department of Medicine, University of Washington, Seattle. My position at the NIH was Associate Director for Lung Programs in the National Heart and Lung Institute, renamed from the National Heart Institute November 10, 1969. The reason for the creation of my position was to develop and sponsor an official research and training program against lung diseases.

In July 1972, the National Heart and Lung Institute officially created the National High Blood Pressure Education Program (NHBPEP). Within a few months the National Heart and Lung Institute became the National Heart, Lung, and Blood Institute with the creation of three divisions focusing on research and training for heart, lung and blood diseases. I was named Director, Division of Lung Diseases. It is worth noting the origin of the NHBPEP was a confluence of events. Mary Lasker, a noted philanthropist, was approached by Dr. Edward Fries, a clinical investigator at the US Department of Veterans Affairs (VA), with the results of his startling clinical trial showing the clear and unequivocal benefits of lowering severe hypertension. Yet, physicians were slow to adapt these findings to medical practice. She used her influence and arranged a meeting with Secretary of Health, Education and Welfare, Elliott Richardson, whose father, a noted surgeon at Harvard University, succumbed to a career-ending stroke due to severe hypertension. Years ago, as a young family doctor I saw first-hand the harm severe and malignant hypertension caused patients and the devastation on their families. Anti- hypertension medications had not been developed, we had little to offer, and the results were not satisfactory. Although my work was on the pulmonary side of the circulatory system, it was good news to know finally there was effective treatment available to control hypertension. The VA trial also provided solid science challenging the medical dogma of the day followed by some-raised arterial pressure was needed to profuse the organs of the body and physicians should not tamper with lowering it. In fact, blood pressure was defined by some as being 100 plus ones age.

In addition to my work with a variety of respiratory diseases, eventually, and indirectly, I became involved with hypertension and the huge interest that the NHBPEP generated worldwide - there was treatment to save lives, a national campaign was bringing science to clinic and doctors office. In 1973, I was invited by the World Health Organization to attend and participate in a conference in Geneva, Switzerland focusing on Primary Pulmonary Hypertension. While in Geneva, I met Dr. Thomas Strasser who wanted to learn about the NHBPEP. His motivation was that, in his opinion, the NHBPEP had similar interests and goals of the World Hypertension League (WHL) which, at this time, was not yet officially created but, nonetheless, was receiving significant interest from many nations. My interest in science extended beyond knowledge acquisition to knowledge dissemination, especially to use new knowledge to improve patient care. The NHBPEP and WHL were recognized by Dr. Tom Strasser and others, including me, as one vehicle to do this.

In the following years, I again met Dr. Strasser on the occasion of several other trips to the World Health Organization (WHO). I also met Drs. Cesare Bartorelli and Franz Gross who were members of a WHO Committee. We had several conversations about the WHL and the NHBPEP, and their respective goals. In the United States, the goals to best address the problem of hypertension were outlined by Secretary Richardson on the occasion of the inauguration of the National High Blood Pressure Program in June 1972:

> *"We need to emphasize the importance today in the United States…of keeping well as opposed to treating the sick….The initiatives that are now about to get under way in the field of hypertension can reap enormous dividends in terms of the prevention of illness and death, stroke, and cardiovascular diseases.*
>
> *"I am convinced that we now have enough knowledge about hypertension to make a resolution to put that knowledge into practice throughout our country. During the 1970's, physicians will become more proficient in knowing when and how to treat hypertension, and more and more Americans will fully understand that hypertension is a most serious risk factor for cardiovascular disease."*

During my conversations with Drs. Bartorelli and Gross in the seventies, it was clear that the goals of the NHBPEP were identical to the goals of the WHL. Furthermore, they hoped that the WHL nation members would develop their programs of education in association with the WHO. The stated goals of the WHL at that time were:

> *"Hypertension is common in most populations of the world, and its control should be improved. Research has made successful treatment of hypertension a reality and, hopefully, its prevention will also become increasingly successful in the future; but scientific advances in this field must be widely applied in order to realize all the benefits they offer, a process that should be encouraged and vigorously promoted."*

In June 1982, I was appointed Director, National Heart, Lung, and Blood Institute. This appointment facilitated my relationship with the WHL because hypertension had become my responsibility. By then the WHL was working very hard to associate with National Hypertension Leagues to become "members" of the World Hypertension League. In 1983, the NHBPEP organized and held a conference in Chicago, Illinois. Representatives from some foreign organizations and National Hypertension Leagues attended, including a significant delegation from Germany led by Dr. Detlev Ganten. In January 1984, shortly after the meeting in Chicago, the WHL became a legal registered association in Geneva, Switzerland. The first result of this registration was that many national leagues and/or hypertension associations – including several attending the Chicago meeting - became members of the WHL, including the USA. Dr. Antoon Amery

(Leuven, Belgium) was President and Dr. Detlev Ganten (Berlin, Germany) was President-Elect.

In the next 15 years I was involved in a variety of WHL activities serving, for a portion of time, as Vice President. The League's activities began to expand with annual Council Conferences, Symposia, In Focus Statements, Newsletters, a WHL Yearbook, and an International Art Poster Contest. Modeled after the international contest, an art poster contest was conducted among school children in the states of North Carolina and Georgia, two states residing in the Stroke Belt, which had the highest stroke mortality in the US. Racial and regional variations in hypertension became an interest of mine and this concept was explored by other nations who also observed differences in prevalence and severity of hypertension in their member countries. Many scientists worked to explain these differences, but from the WHL and NHLBEP perspective, it was more important that treatment was available.

In October 2000, I became the President of the WHL following Dr. Peter Sleight. My term ended late in 2006, three years after I retired from my position as Director, National Heart, Lung, and Blood Institute. During my Presidency, the WHL continued to hold regular meetings of its Executive Board. The website was redesigned permitting more information to be conveyed to the Leagues. This saved the WHL developmental costs. Thereafter, the WHL website began posting important activities and educational materials from other organizations, which were congruent with the League's mission. This highly leveraged activity extended the WHL reach and saved it considerable funds.

The management of controlling HBP was improving as drug development increased. A number of large scale clinical trials from Europe, the US and China were being reported demonstrating the benefits of controlling hypertension in the elderly, those with diabetes, renal disease, heart failure and other risk factors. Studies comparing drugs class efficacy were being produced. There seemed to be a very large amount of new information to improve patient care. Yet, much of that knowledge was not being applied, which was troubling. The NHBPEP used mass media to get messages out to the public, alerting them of the benefits of treatment. These strategies were shared and would be used by League members, voluntary organizations, and the pharmaceutical industry. The objective was to get the public interested in blood pressure control. Newspaper articles encouraging people to get their BP measured were appearing and BP messages were being posted in airports, train stations and busses in many of the member League's countries. Clinical guidelines were being developed by several member nations and by European societies with the objective of providing the latest science to treat hypertension to the busy physician. In my view and the view of others, these well-designed and well-conducted clinical trials would be useless unless the results were applied to patient care. The was, and remains, a major issue for the WHL and member nations. The guidelines of member nations were shared and translated into various languages. All this increased attention on hypertension caused it to become a household word in many parts of the world. The cost of drugs was often discussed at WHL and member nation symposia. For some nations the cost of newer drugs were priced beyond the reach of people. Even the older and generic drugs were

costly for some. Dr. Strasser conducted a study among a number of WHL members, surveying the relative cost of antihypertensive drugs against the cost of goods and services rather than local currency. He showed that a one month prescription of then a brand ACE inhibitor would cost the equivalent of 17 pairs of shoes in one country, but only one pair in another. The choice of drug and their relative cost were global issues that would affect adherence to the medication and ultimately HBP control rates. We knew then that some nations could not afford expensive drug treatment; their priorities were with more immediate problems. Yet cardiovascular disease remained a leading cause of death and disability in most countries.

While serving as Vice President and shortly before becoming President of WHL, , new evidence was emerging indicating that HBP could be prevented, that is keep BP from rising and that BP could be controlled with lifestyle changes- A landmark report was produced called, **The Primary Prevention of Hypertension**. This concept was attractive because lowering BP with drugs does not reverse the risk of future cardiovascular events to zero, drugs are expensive, often have unwanted side effects and patients often fail to remember to take their medications. In the NHBPEP hypertension clinical guidelines of 2003, a landmark report, five non-drug therapy modalities were shown to reduce BP: weight reduction, reduction of dietary salt consumption, Increase physical activity, adaption of the DASH Diet and moderation of alcohol consumption. The issue facing the WHL was how to incorporate lifestyle changes to reduce BP in so many different cultures and societies.

One way to do this was to focus on one issue of particular interest- the role of obesity in hypertension and its prevention. Meetings were held in Washington DC and Prague to address the obesity epidemic in many nations and what to do about it. Educational packages were developed for use in tracking health professionals in communities of developing countries. This was part of a bigger concern that a partnership between the physicians and their patients be developed and maintained. Another issue the WHL discussed as a public health problem was salt in the food supply. This was a challenge. Salt is useful in food making. It is used as a preservative, masks bitterness of some foods, shortens the processing time of some foods, and is relatively inexpensive. But, there were good populations studies demonstrating that salt intake is associated with a rise in BP, many nations consume more salt than is physiologically necessary, and most (80%) salt consumed is derived from processed foods. “Use less salt” and “read food labels” were messages provided to most hypertensive patients by their doctors. The WHL encouraged these messages to be sent by the member nations. This concept remains difficult to do because salt is ubiquitous in the food supply throughout the world. Nevertheless, excessive salt consumption remains an important public health issue and some member nations became more active in working with the food industry to change the amount of salt added to food.
T
The WHL also recommended the concept of a World Hypertension Day to be celebrated during one day each year.

The WHL web site was again revamped and became a more useful tool especially as the technology improved and internet services became available to many more nations. Newsletters and communication among member League nations no longer required postal service.

Following the last meeting I attended in Madrid, Spain in June 2006, I was replaced by Dr. Liu Lisheng from Beijing, China.

HISTORY OF THE WORLD HYPERTENSION LEAGUE DURING

DR. PATRICK J. MULROW'S TENURE AS SECRETARY GENERAL, 1995-2006

How Dr. Mulrow Became Involved in the WHL

After nearly 20 years as Chairman of the Department of Medicine at the Medical College of Ohio, Dr. Mulrow retired from that position in 1995. Dr. Detlev Ganten, the second President of the World Hypertension League (WHL), and Dr. Mulrow were personal friends and Dr. Ganten knew of Dr. Mulrow's interest in hypertension. He advised Dr. Mulrow to consider becoming the second Secretary General of the WHL.

In June, 1995, the First World Conference on Hypertension Control was held in Ottawa, Canada. It was organized by the WHL and the Canadian Coalition for High Blood Pressure Prevention and Control. The WHL Ottawa Declaration was written at this meeting. The Declaration emphasized that hypertension is a worldwide epidemic and programs controlling hypertension in populations should be established along with the reduction of other cardiovascular risk factors. A consensus statement, called the Ottawa Statement, was developed and published in the J of Human Hypertension 10: (Suppl 1), 1996.

At this meeting the Council elected Dr. Peter Sleight (Oxford, England) as President for a 3-year term. Dr. Mulrow was appointed Secretary General for a 5-year term to replace Dr. Thomas Strasser, the first Secretary General and co-founder of the WHL. Tom retired as Secretary General because of poor health, but stayed on the Board as a Special Advisor. He was a great help in transferring the WHL office from Geneva to Toledo, Ohio USA. Dr. Mulrow had visited Tom in his office in Geneva and he convinced Dr. Mulrow that he should accept the nomination by Dr. Ganten for Secretary General. Dr. Mulrow appointed Georgiann Monhollen as his Administrative Assistant. She was highly experienced as a medical administrator at the Medical College of Ohio and had excellent people skills, which was important in dealing with international people and organizations.

Following his appointment as Secretary General, Dr. Mulrow transferred the Secretary General's office from Geneva, Switzerland to the Department of Medicine on the campus of the Medical College of Ohio (MCO), located in Toledo, Ohio USA. The Medical College of Ohio (MCO) provided rent-free office space, secretarial supplies, a state-of-the-art computer, mail and local phone service, all free of charge. The Secretary General's office was only required to pay for a part-time secretary-administrator. To assist us in establishing the WHL as a not-for-profit organization in Toledo, we hired a lawyer, Joseph Pilkington, and an accountant, Greg Hendel. We transferred the WHL bank accounts from the Swiss Bank Corporation (SBC) in Geneva to the Fifth Third Bank in Toledo, Ohio. This was a very smooth and uneventful transition from Switzerland to the U.S. Later, we dealt with the Union Bank of Switzerland after the SBC merged with the Union Bank of Switzerland (UBS) due to the institution of euros. The UBS was located in Zurich, and Dr. Mulrow met with a few of these bankers on occasion, when in Switzerland. Eventually, we closed the account in

Zurich and only dealt with our U.S. bank, which was located near the medical school campus. The Secretary General of WHL-US carried out the activities of the WHL-Global from our offices in Toledo, Ohio USA.

Include budget sheet

The WHL, under the leadership of Past President, Detlev Ganten, and Past Secretary General, Tom Strasser, made significant strides in collating the hypertension societies in various countries.

In 1994 there were 49 regular members, 7 associate members and 13 supporting members of the WHL. By the end of Dr. Mulrow's term as Secretary General (2006), Dr. Sleight's term as President (1995-2000) and Dr. Lenfant's term as President (2000-2006) there were 83 member organizations and 5 supporting members, for a total of 88 WHL member organizations.

Early Years in Office

With Presidents, Dr. Peter Sleight (1995-2000) and Dr. Claude Lenfant (2000-2006), the WHL continued its productivity. Frequently, officers of the WHL were invited to participate in meetings of the member hypertension societies. This visiting professorship of the Secretary General and other members of the Board was an important activity that improved the friendship of the hypertension society members and the WHL Board.

In December 13-15, 1995, Dr. Mulrow was an invited speaker for the First Joint Meeting of the Egyptian Hypertension League and the WHL in Cairo. Dr. Mulrow participated in a round-table discussion on basic, clinical, and epidemiologic hypertension research in developing countries, barriers to hypertension research in developing countries and priorities in hypertension research for third-world countries.

Continental Airlines, through In-Flight Media, solicited Dr. Mulrow to record a video on hypertension education and the proper way to measure blood pressure, which was played on all Continental Airline flights during the months of August, September and October, 1995.

Website

In 1996 a website, at no cost to the WHL, was created in Toledo for easy/economical and international access by the WHL membership. The Medical College of Ohio covered the cost of creating and maintaining the website, which was a significant advantage for the WHL budget and membership, especially for the economically challenged countries. The website was "managed" from the Secretary General's office on campus.

Many educational and informational documents were loaded on our website, including a step by step instructional video by Dr. Mulrow on how to properly measure your blood pressure. Dr. Mulrow routinely asked his colleagues to write specialized articles for the

WHL website, and he also wrote many articles for the website. The WHL Fact Sheet* was completed, printed professionally, and loaded on the website, as well as mailed to the membership.

In 2004 it was suggested at one of the Executive Committee Meetings that the WHL website needed restructuring and updating. With the help of the Medical College of Ohio's Information Technology (IT) Department, Joerg Poetzsch, and the Secretary General's office, this was accomplished. Joerg introduced the WHL to **Go Daddy**, a powerful search engine, and the World Hypertension League became an easily accessible hypertension research tool for the whole world. The website has been a strong asset to the League since its modest inception in 1996 thanks, in part, to the vision of the leaders at that time.

WHL International Art Competition, 1996 and 2003

As mentioned previously in 1996 the Third WHL International Art Competition was launched. Teaching through art was the theme of the WHL International Art Competition. The first place winner was from the United States. Her name was Emily Artz and she was from Troy, Ohio. She was invited to accept her award at the WHL Board Meeting in Glasgow, UK on June 22, 1996, all expenses paid. The title of her poster was "Your Heart Is In Your Hands." First and second place went to the USA and third place went to China. Some of this artwork has been posted in the **Newsletter** and on the website in the past.

In 2003 we launched another WHL International Art Competition. This time we chose a specific theme (Hypertension and Obesity) because we wanted to promote community awareness of hypertension and obesity through art.

First place went to Miao Yin-tang of China, second place went to both Karen Matchette of the USA and He Wei of China, third place went to Omolodun Francis Gbolahan, of Nigeria. This artwork is on a disk.*

Dr. Mulrow served on the following Boards:

- American Heart Association
    - President of the Council for High Blood Pressure Research
- Inter-American Society of Hypertension

Participation by Secretary General in the Meetings of Local Member Organizations

This was a way of improving communication between the WHL Executive Board and the member organizations.

1995

- Along with other members of the Executive Board Dr. Mulrow participated in the Ottawa Statement (helped organize, coordinate, write and review). World

Conference on Hypertension Control. Ottawa Conference. Ottawa, Canada, June, 1995.

- Treatment of hypertension: a) Recent advances; b) Diabetes and hypertension. First Uruguayan Conference on Hypertension, Montevideo, Uruguay, 1995

- Collaborative research in hypertension between established and developing countries: Basic concepts in the cellular biology of hypertension. Egyptian Hypertension Society – World Hypertension League Joint Meeting, Cairo, Egypt, December, 1995.

1996

- ISH Scientific Meeting. Glasgow, UK, June, 1996. Chaired a session.

- New Trends in the Treatment of Arterial Hypertension. Romanian Society of Cardiology Symposium of Arterial Hypertension, Bucharest, Romania, October, 1996.

- Diabetes and hypertension: New concepts in pathogenesis and management. 4th Congress of the Argentine Society of Hypertension, Buenos Aires, Argentina, November 21-23, 1996.

- Detection and control of hypertension in the population. USA experience. Workshop on Treatment of Arterial Hypertension in Populations. Paris, France, December, 1996.

1997

- Chaired Simultaneous Session. Studies of risk factors for stroke. 4th International Conference on Preventive Cardiology, Montreal Canada, June, 1997.

- Chairman, Council Conference. 17th WHL Council Conference and Workshop on Hypertension and Congestive Health Failure. Montreal, Canada, June, 1997.

- The role of renin systems in the regulation of aldosterone production. 100th Anniversary of the Discovery of Renin by Dr. R. Tigerstedt, Stockholm, Sweden, September, 1997.

- Hypertension lecture and television appearance. 4th Congress of Internal Medicine of Yugoslavia, Igalo, Yugoslavia, October, 1997.

- Hypertension in the nineties: Its epidemiology and advances in our understanding; b) What is hypertension? First National Symposium of Hypertension, Karachi, Pakistan, November, 1997.

1998

- Hypertension: A Worldwide Epidemic. Grand Rounds, Medical College of Ohio, January 22, 1998.

- The Search for Secondary Hypertension – Moderator of Breakfast Workshop, 17th Scientific Meeting of the ISH, Amsterdam, The Netherlands, June 8, 1998.

- One Hundred Years of Renin Research – Chairman of the First Session of a Satellite Symposium, Rotterdam, The Netherlands, June 12, 1998.

1999

- Hypertension in the Elderly. A Worldwide Epidemic. Grand Rounds, Medical College of Ohio, January 21, 1999.

- Mechanisms Causing Hypertension in the Elderly. 18th WHL Council Conference and Workshop on Hypertension in the Elderly, Buenos Aires, Argentina, May 7, 1999.

- Mechanisms of Hypertension, XIIIth Scientific Meeting of the Inter-American Society of Hypertension, Buenos Aires, Argentina, May 9, 1999.

- Co-Chairperson of symposium entitled, Treatment of Hypertension in Special Populations, XIIIth Scientific Meeting of the Inter-American Society of Hypertension, Buenos Aires, Argentina, May 11, 1999.

- Modern Concepts in Arterial Hypertension in the Elderly, XIIIth Scientific Meeting of the inter-American Society of Hypertension, Buenos Aires, Argentina, May 11, 1999.

- The Role of the Endothelium in Cardiovascular Disease. II Uruguayan Congress of Hypertension, Montevideo, Uruguay, September, 1999.

- The Renin-Angiotensin-System in Hypertension. II Uruguayan Congress of Hypertension, Montevideo, Uruguay, September 1999.

2000

- Antihypertensive Drugs. (Update of Hypertension Course), Abu Dhabi, UAE, February 6, 2000

- Chairman of Workshop, Management of the Diabetic Hypertensive patient, Abu Dhabi, UAE, February 6, 2000.

- Hypertension in the Year 2000. (Session on Epidemiology of Hypertension Worldwide), Abu Dhabi, UAE, February 7, 2000.

- Management of Hypertension in the Elderly. (Session on Evaluation and Treatment of Hypertension in the Elderly), Abu Dhabi, UAE, February 8, 2000.

- Satellite meeting - Genetics Symposium, Genetics of Human and Experimental Hypertension at the Medical College of Ohio (August 17-18, 2000), prior to the ISH/WHL Genetics of Hypertension Symposium meeting in Chicago, August, 2000. This meeting was organized by Dr. Mulrow and was a great success.

2001

- Regional meeting, 5th Annual Scientific Meeting, Egyptian Hypertension Society, January 24-26, 2001

- Third International Symposium on Hypertension and Related Diseases, Beijing, October 18-21, 2001

- Dr. Mulrow made a video for Pakistan, with the help of the MCO technical department (which was shown on Pakistani TV, and an article was put in the local newspaper from an earlier trip to Karachi)

2002

- February 5-9, 2002, Abu Dhabi

- WHL Conference, Hypertension and Obesity, June 22, 2002, Prague ISH/WHL Meeting, June 25-27, 2002

2003

- WHL Regional meeting and Executive Board Meeting, Cairo, April 8, 2003

- Chairman of session, "Guidelines for Treatment of Hypertension and Cardiovascular Disease", Inter-American Society of Hypertension Conference, San Antonio, Texas, April 29-30, 2003.

- Scientific Advisor, Organizing Committee: Joint Euro-Africa Initiative for High Blood Pressure Control, Brussels, Belgium, May 10-12, 2003.

- Organizer of WHL International Art Competition, which ends June 15, 2003. Teaching hypertension awareness through art.

- Co-Organizer of the WHL Regional Meeting with the Chinese Hypertension League, Beijing, China, October 16-18, 2003.

- Chairman, WHL Strategic Planning Meeting, Geneva, Switzerland, November 20-21, 2003.

2004

- Co-Chairman, WHL / Brazilian Hypertension Society Satellite Symposium, Sáo Paulo, Brazil, February 15-19, 2004.

- Epidemiology of Hypertension, Diabetes and Obesity in Developing Countries, Sao Paulo, Brazil, 2004 (ISH Satellite Symposium in collaboration with the Brazilian Hypertension Society)

- Invited Speaker: "Role for tissue renin angiotensin system in hypertension and cardiovascular diseases," Adrenal RAS Breakfast Workshop 20th Scientific Meeting of the International Society of Hypertension, Sáo Paulo, Brazil, February 15-19, 2004.

- Co-Chairman, WHL Council Conference, Prague, Czech Republic, April 24, 2004.

- Co-Chairman: Community Control of Hypertension With Special Emphasis on Central & Eastern Europe. Organized by the World Hypertension League along with the Czech Society of Hypertension, Prague, Czech Republic, April 24, 2004.

- Scientific Committee, First African Scientific Meeting on Hypertension, to be held in Yaoundé, Cameroon, October, 2005.

- Control of Hypertension at the Community Level, Prague 2004 (in collaboration with the Czech Society of Hypertension)

- Regional Meeting in Beijing with 6th International Symposium on Hypertension and related diseases. October 15-17, 2004

Management of a US Not for Profit Organization

- Set up initial transfer of WHL office from Geneva to Toledo, Ohio USA
- Set up not-for profit organization (WHL – US).
- Filed U.S. taxes and budget reports with the Medical College of Ohio, the World Hypertension League, the State of Ohio Attorney General, and the United States Internal Revenue Service.
- Managed Medical College of Ohio budget accounts, as well as US and Swiss bank accounts.
- Involved in the management of the WHL finances.
- Assisted with the travel of the Board and members, when possible.
    - Monies were solicited from pharmaceutical companies without any promises or required involvement of that company in the management of the meeting or conference.

Preliminary Studies Carried out by Drs. Sleight and Mulrow:

Drs. Sleight and Mulrow - "A Survey of the Status of Hypertension by the members of the World Hypertension League."

Hypertension Audit Project – an assessment of the level and quality of hypertension control in various European populations and is carried out jointly with WHO. We were involved in the Hypertension Audit Project, developed by Dr. Tom Strasser, along with the WHO.

Booklets and Brochures for WHL Members

- WHL Yearbook, 1997, Editors, P.J. Mulrow, J. Poetzsch, and P. Sleight. Included in this publication were reports from member organizations, an address directory of the WHL, a survey of the status of hypertension by members of the WHL, abstracts from Montreal meeting written by participating members.

- Drs. Sleight and Mulrow wrote a brochure on behalf of the WHL on "How to measure blood pressure reliably", which was funded and printed by Omron and a copy was sent to all WHL member organizations. When an organization made an inquiry or a new organization joined the WHL, they were sent these brochures, 1999.

- Report of the 18th WHL Council Conference and Workshop on Hypertension in the Elderly, Buenos Aires, May 7, 1999, along with abstracts.

- WHL Yearbook 2000-2001. Fighting hypertension into the next millennium. Editor P.J. Mulrow. This included the following: Important names and addresses of Executive Board and membership; summary of strategic planning meeting in Geneva in 1999, minutes, report and abstracts from the 18th WHL Council Conference and Board Meeting in Buenos Aires in May, 1999; abstract reports from the WHL Regional Meeting in Beijing, China, October 10, 1999 and WHL Regional Meeting in Cairo, Egypt, January 2001; report from the Office of Publications/**WHL Newsletter**.

- World Hypertension Initiative - 2000
    - World Hypertension Initiative (Drs. Lenfant and Mulrow), conducted and coordinated by the WHL

- Dr. Strasser died March 9, 2001 in Geneva, Switzerland.
    - In 2001, after Dr. Strasser passed away, the WHL established an **Invited Lectureship**, called the Tom Strasser Lectureship, proclaiming it at the Council Meeting.

- P.J. Mulrow. The importance of lowering systolic blood pressure in hypertensive patients: the role of diuretics. Hypertension Hotline, Servier. At risk hypertensive patients: your choices, their lives, 2003.

- World Hypertension Day Booklet - 2005
  - Printed member's abstracts and pictures in booklet after World Hypertension Day.

- World Hypertension Day Booklet – 2006
  - Printed member's abstracts and pictures in booklet after World Hypertension Day

Strategic Planning Meetings

- November 15-16, 1999 in Geneva, Switzerland
- November 20-21, 2003 in Geneva, Switzerland

  - **Goals**: To promote the detection, control and prevention of arterial hypertension in populations.

  - **Action**: Assist in the development of national hypertension societies; develop educational guidelines comparable to the hypertensive guidelines.

  - **Statement**: Education of health professionals, patients, and the public is critical to the prevention and control of hypertension. This is a complex problem and involves general principles as well as specific regional requirements; for example, illiteracy can influence the type of educational materials for the public.

The WHL has been successful in simulating many countries to establish national societies or leagues. These societies serve as a focal point for the developing of local programs and the dissemination of information for controlling hypertension. More societies need to be established and nurtured, especially in the underdeveloped world.

Developing epidemiological studies will help local societies to advertise the scope of the hypertension problem and influence governments to support their activities.

Abbreviated History of the World Hypertension League

The World Hypertension League (WHL) is an amazing organization that has saved countless lives and prevented numerous cardiovascular complications through its programs for the prevention and control of hypertension in populations. Although individual subjects who benefitted from WHL actions cannot be identified, a positive response "a priori" can be expected. The WHL accomplished these goals by educating the public on the dangers of hypertension and the importance of preventing hypertension from developing. Furthermore, the WHL coordinated the educational programs of national societies in order that successful programs could be exchanged among countries.

How did the WHL begin?

Around 1975 three European scientists: Drs. Franz Gross (Germany), Cesare Bartorelli (Italy) and Tom Strasser (Geneva/WHO) began informal discussions regarding establishing an organization that would develop programs for the prevention and control of hypertension in populations. Following several meetings and multiple informal discussions with other hypertension experts, a final draft of the statutes was accepted and the WHL was registered as a nonprofit international organization in Geneva, Switzerland on January 4, 1984. The WHL became a division of the ISH and has official relationships with the WHO. An administration was set up with a President, Board, and other officers. WHL membership increased rapidly. Membership was not for individuals, but for national organizations and societies engaged in the control of hypertension in populations.

Different educational programs were more effective in certain countries, thus requiring different media to be employed. For example, in the early 2000's, over 95% of Brazilian households had televisions; therefore, to have a successful educational program on hypertension in Brazil required the development of a hypertension curriculum that uses television. Although the WHL was listed as a division of the ISH initially the two organizations had different functions - the ISH focusing on hypertension research while the WHL focused on control of hypertension in populations. But over the years the activities overlapped.

The WHL used a variety of media to educate the population about hypertension. Here are some of the highlighted programs:

Newsletter: A regularly published newsletter was founded in October 1988 and rapidly increased in circulation to 14,000 printed copies and, in addition, the Newsletter was translated into several different languages. The Newsletter helped to spread the "gospel" of hypertension around the world. The Newsletter also kept its members informed about the advances in hypertension. Frequently, members from different countries would submit an abstract describing anti-hypertensive programs in their countries.

WHL Website: In 1996 a website was created with the support of the Medical College of Ohio (MCO), Toledo, USA. Many informative and educational documents were downloaded on the website and the information was available to the public. The use of the website was extensive and needed frequent upgrading.

International Art Exhibit: Three separate art exhibitions with a theme related to hypertension were held by the WHL. The art was displayed in several countries and the winners received their awards at the international conferences held by the WHL. The art was a successful way of presenting concepts of hypertension to the public. One example was art submitted by the Chinese on obesity and hypertension. The artists portrayed the importance of exercise in preventing obesity.

World Hypertension Day: This important worldwide activity was created by the WHL, and with the help of patent lawyers the WHL legally obtained an official trademark for World Hypertension Day (WHD).

The first landmark WHD was held on May 14, 2005. The main theme was: Know Your Numbers!" WHD was a resounding success with 24 countries participating. Many of the other members participated but did not submit a report. A 93 page booklet was printed and distributed to members. World Hypertension Day has been a yearly event.

Booklets and Brochures: were printed and distributed to the membership. Some of the topics were the WHL Yearbook 1997 & 1999; booklet report of the WHL Council Conferences.

Conferences: The WHL organized numerous conferences on hypertension to disseminate the hypertension advances that are being pursued around the world. These conferences involved satellite symposia, national, regional and international meetings. The WHL encouraged council members to present abstracts and exchange ideas regarding their hypertension programs. A few examples of the location and titles of the main topic of WHL conferences are: Montreal, Canada (hypertension and congestive heart failure), Buenos Aires, Argentina (hypertension in the elderly), Prague, Czech Republic (hypertension and obesity).

At least once every two years the council meets in a member country. Council members from all over the world participate in governance, as well as in hypertension activities.

The WHL continues to be highly effective and to play an important role in the control of hypertension in populations.

All of this was accomplished by a handful of volunteers and on a limited budget.

World Hypertension Day

***WHL Principle**: Advancement of hypertension prevention and control through joint efforts of national leagues and societies.*

Hypertension is a worldwide epidemic affecting both developed and developing countries. Estimates indicate there may be more than 1.5 billion people with hypertension. In many countries more than 50% of the people over 60 years of age have hypertension. Only one-third of hypertensive persons are treated and approximately 12% of those treated are controlled.

The purpose of World Hypertension Day (WHD) is to communicate to the lay public the importance of hypertension and its serious medical complications, and to provide information on prevention, detection and treatment. To do this requires cooperation of health care professionals, media, volunteer organizations and government in each country.

Detection of hypertension is the first step in controlling hypertension. This goal can be accomplished by organizing blood pressure measurement activities in various locations, such as shopping centers, schools, churches, mosques and synagogues. Each WHL member organization should establish such a program in their country and health professionals should cooperate with blood pressure detection programs in their community.

Remember - high blood pressure is a *silent killer*. There are no symptoms until the pressure is too high, or it causes damage to vital organs, such as the heart or kidney.

Everyone should have their blood pressure measured.

Prevention of Hypertension

Lifestyle changes are an effective and inexpensive way of preventing or reducing blood pressure. Educational programs should be instituted, which emphasize:

- ♥ Weight reduction
- ♥ Low sodium diet
- ♥ Minimize alcohol intake

Regular exercise

Remember, a decrease in only a few mmHg blood pressure can significantly reduce the incidence of stroke.

The WHL Board requests that all WHL member societies actively participate in promoting the first World Hypertension Day. Each society should develop programs specific for its country. Societies that participate in World Hypertension Day will receive a special certificate commemorating their participation.

Remember – **prevention-detection-treatment** are the cornerstones for any successful hypertension program.

2005 Know Your Numbers

World Hypertension Day (WHD) was, in part, established by Drs. Claude Lenfant, Patrick Mulrow and Sue Lenfant as they casually discussed future activities of the WHL. Plans were put in place, Board members approved, advertising initiated, a brochure created, and a WHD logo created by the Secretary General's office, along with some help from Dr. Lenfant's staff. Dr. Lenfant, along with Dr. Mulrow's office, legally obtained an official Trade Mark for WHD. Dr. Lenfant was required to deal with patent lawyers in New York. This was done after WHD 2005.

The first annual WHD was held worldwide on May 14, 2005, which was a resounding success. Twenty-four countries reported their activities and participation: Australia, Bangladesh, Belgium, Botswana, Bulgaria, Canada, China, Costa Rica, Croatia, Cuba, Czech Republic, France Germany, India, Iran, Italy, Lithuania, Myanmar, Paraguay, Peru, Slovakia, Slovenia, Thailand and the United States. Many additional members participated in World Hypertension Day, but they did not submit a report.

A 93-page booklet was printed and distributed with pictures and stories of the activities of the participating member organizations.

2006 Treat to Goal

World Hypertension Day 2006 was held worldwide on May 15, 2006, with 19 countries reporting their WHD activities: Argentina, Bangladesh, Belgium, Botswana, Bulgaria, Canada, China, Egypt, Georgia, Iran, Korea, Lithuania, Nepal, Nigeria, Pakistan, Slovakia, Slovenia, Thailand, and Turkey. Many additional members participated in World Hypertension Day, but they did not submit a report.

A booklet was printed and distributed with pictures and stories of the activities of the participating member organizations.

Milan, June 16, 2005

Arun Chockalingam was appointed Secretary General at this meeting in Milan in June, 2005. However, Dr. Mulrow and Arun agreed that the transfer of the office from Toledo, USA to Canada would most likely take until December 2005.

Due to the many difficulties that Arun had in getting the Canadian office set up as a non-profit WHL entity in Canada, no money could be legally transferred from the US to Canada. However, this was finally approved by the Canadian and U.S. Governments on September 6, 2007 and the transfer was allowed to be completed 15 months later.

HISTORY OF THE WORLD HYPERTENSION LEAGUE DURING DR. LISHENG LIU'S PRESIDENCY, 2006– 2013

DR. LISHENG LIU - 5TH PRESIDENT OF WHL

It was in 1960, while leading a large-scale survey of blood pressure among workers and college students in Beijing that Dr. Lisheng Liu first became keenly aware of the fact that hypertension as an epidemic and a risk factor of cardiovascular diseases calls for organized efforts to promote its detection, control and prevention among populations, and that in China, the largest developing country with over 1.37 billion people, such efforts are tremendous and urgently needed.

Dr. Liu was at the time serving as physician-in-charge in the Dept. of Internal Medicine at Fu Wai Hospital of the Chinese Academy of Medical Sciences. Even after the survey was completed, Dr. Liu, together with her colleagues, continued to work at the hypertension clinic of the Hospital which emphasized patient education and self-care, known at the time as "to bring the subjective initiative of the patient into play." It then came as no surprise that when she was offered a WHO scholarship she chose the Hypertension Research Center at the Medical College of Alabama University in Birmingham, USA, where she received her post-doctorate research training, 1980-1981. While in Birmingham, Professor H.P. Dustan gave her a chance to see patients in the local community even during her highly intensive work on SHR rats. Ever since then, while serving as Professor of Medicine, head of the Department of Internal Medicine, then Vice-President of the Fu Wai Hospital, and later as Vice-Director of the National Center for Cardiovascular Diseases in China under the Ministry of Health (2004 --- 2010) and Director of the Beijing Hypertension League Institute (since its founding in 1999 till present, she has never slackened her efforts at promoting public awareness of hypertension as a risk factor of CVD and the ways and means to prevent and control it.

In view of the importance of the prevention and control of hypertension in China as the largest and most populous developing country in the world, Professor Tom Strasser (then a WHO officer) and Professor A. Amery (then President of WHL) expressed on different occasions to Dr. Liu the hope to see China represented in the World Hypertension League. In 1986, Dr. Lisheng Liu of Beijing and Dr. Lansheng Gong of Shanghai, together with some other senior investigators in hypertension and cardiovascular diseases, jointly proposed the establishment of a national academic institution aiming at the prevention and control of hypertension and adopting international practices and standards. This proposal was warmly supported by their colleagues all over the country and was approved by the Ministry of Foreign Affairs and the Ministry of Health. On October 25, 1989, the Chinese Hypertension League (CHL) was officially established, with Dr. Liu as president and Dr. Gong as Vice-president. And in the same year the Chinese Hypertension League became a member of the World Hypertension League.

At the 39th Meeting of the WHL Executive Board held in Madrid, Spain on June 14, 2006, serious difference of opinion came up among board members, which was followed by the resignation of Dr. Claude Lenfant, then President of WHL. On August 1st Dr. Detlev Ganten, during a business trip to Beijing, had a long talk with Dr. Liu (Vice-President of WHL since 1998), persuading her to take full charge of the League. Later, he also wrote to Dr. Liu, assuring her that it was the consensus of all other board members that she was the right person to head the League in the absence of an elected President. Dr. Liu thus began to serve as Acting President of the League until Oct.6, 2006 when she was formally elected President of the League, and Dr. Lawrence Beilin of Australia as Vice-President at the 40th Meeting of its Executive Board held in Fukuoka, Japan on Oct. 14, 2006. At the 50th Executive Board meeting held in Milan, Italy on June 13, 2009, Dr. Liu and Dr. Beilin began their second term as President and Vice-President of WHL, which ended at the 58th meeting of the Executive Board held in Sydney, Australia on September 30, 2012 when Dr. Norman Campbell of Canada was elected President of the League.

Throughout her presidency (2006 -2013), Dr. Liu worked in close cooperation with Vice-President Dr. Beilin and Secretary General Dr. Arun Chockalingam in leading the Organization to realize faithfully its aims and objectives as set down by the founding fathers. As representatives of the Board, they participated together and separately in various meetings around the world, including Council meetings, Board meetings and meetings held by national league members in all continents, giving talks, offering advice and spreading advanced experience. In performing her various heavy and important duties in the WHL and CHL over the years, she also had the precious support and assistance of her secretary, Ms. He Xinye.

In the past twenty odd years of service in the Chinese Hypertension League and the World Hypertension League, Dr. Liu has been personally involved in the massive and arduous efforts of WHL and its national league members all over the world to promote the detection, control and prevention of arterial hypertension in populations. “Massive and arduous efforts” – Yes, but the results are more than worth the efforts, since they benefit numerous ordinary people in rich and poor countries alike throughout the world. From her personal involvement and participation in what the League and its national league members have done in training grass-roots medical workers, in promoting public awareness of hypertension as a risk factor of CVD and the ways and means of its prevention and control, as well as in the management of chronic diseases, she is more convinced than ever that WHL has accomplished and is accomplishing far more than just a non-profit academic institution can ever accomplish, and the Organization is indispensable in the international organized efforts against hypertension.

The New WHL Members since 2006:

2007	Turkish Society of Hypertension and Renal Diseases
2008	Saudi Hypertension Management Society (SHMS)

	Botswana Heart Foundation (BHF)
2009	Malaysian Society of Hypertension
2010	American Society of Hypertension
	Hypertension Society of India
	The Jordanian Atherosclerosis and Hypertension Society
	Macau Hypertension Alliance (Associate Members)
2012	The Ukraine Heart of Nation
	Azerbaijan Heart and Health Association (AHHA)

The WHL co-sponsored the following national conferences throughout the world:

2008	China
2009	Egypt, Cuba, Turkey, Greece, China and Uruguay
2010	China, Pakistan, India, Greece, Portugal and Turkey, Spain
2011	India, China
2012	Cuba, India
2013	China, Cuba, India, Pakistan, Turkey and U.S.A. , Argentina, Azerbaijan, India and Slovak Republic

Participation by the Delegates from WHL Board Member:

2006 Meeting of The International Society of Hypertension WHO/ISH Joint Liaison Committee	Fukuoka, Japan	October 18, 2006	Dr. Lisheng LIU
The 4th Mediterranean Meeting on Hypertension and Atherosclerosis	Dalaman, Turkey	May 12 , 2007	Dr. Lisheng LIU:
2007 Meeting of the International Society of Hypertension WHO/ISH Joint	Milan, Italy	16 June, 2007	Dr. Lisheng LIU

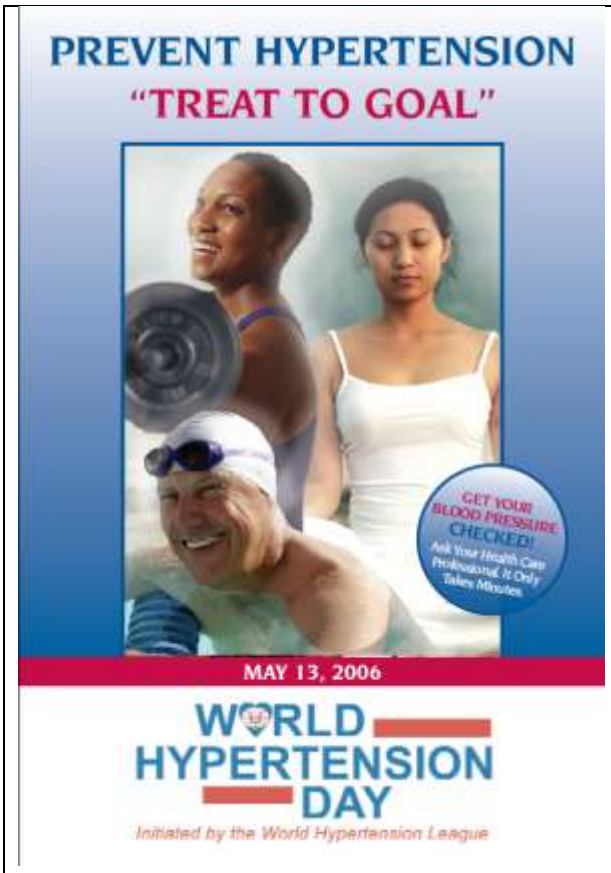
Liaison Committee			
1st International Congress on "Prehypertension and Cardiometabolic Risk	Prague, Czech Republic	April 2-5, 2008.	Dr. Lisheng LIU
Revision of WHO Definition of Myocardial Infarction	WHO, Geneva	April 16-17, 2008	Dr. Lisheng LIU
WHO Multicentre Project on the Polypill for Prevention of CVD	WHO, Geneva	July 1-2, 2008	Dr. Lisheng LIU
A Prioritized Research Agenda for Prevention and Control of Noncommunicable Diseases	WHO, Geneva	August 25-26, 2008	Dr. Lisheng LIU Dr. Arun Chockalingam
7th Asian-Pacific Congress of Hypertension 2009	Kuala Lumpur, Malaysia	February 19-22, 2009	Dr. Lisheng LIU
WHO WPRO General Meeting	Hong Kong, China	May, 2009	Prof. Xinhua Zhang
11th PanHellenic Congress on Arterial Hypertension	Athens, Greece	March 5-7, 2009	Dr. Lisheng LIU
Pan-Arabian Hypertension Symposium	Beirut, Lebanon	December 1-4, 2009	Dr. Lisheng LIU
The annual scientific meeting of the Indian Society of Hypertension	Madurai, Tamilnadu, India	November 13-15, 2010	Dr. Arun Chockalingam
U.S.-China Hypertension and Stroke Research: Past Success, **Present Achievements, and Future Opportunities**		October 13-14th, 2010	Dr. Lisheng Liu Prof. Xinhua Zhang
The PreventIndia, a public health meeting with special emphasis on CVD prevention health policy	Hyderabad, India	February, 2011	Dr. George Fodor & Arun Chockalingam
18th Asian Pacific Congress of Cardiology (APSC 2011)	Kuala Lumpur, Malaysia	May 5-8, 2011	Dr. Lisheng LIU:

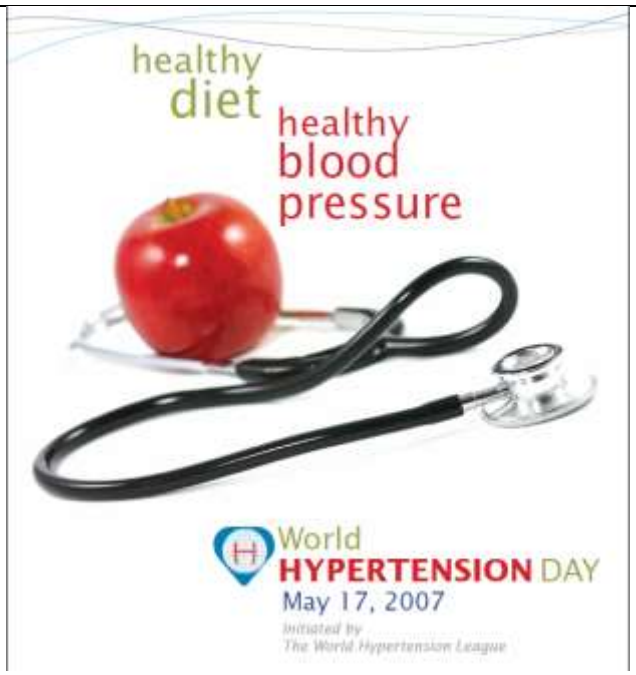
The UNHLM	New York, USA	September 19-20, 2011	Dr. Arun Chockalingam
WHO WPRO PEN consultation in Beijing	Beijing, China	October 2012	Prof. Xinhua Zhang
22nd Annual Scientific Meeting of ESH	London, UK	April 26-29, 2012	Dr. Lawrie Beilin
The Annual scientific meeting of Cuban National Committee for the Study of Hypertension	Santa Clara, Cuba	May 10, 2012	Prof. Xinhua Zhang.
2012 Scientific Sessions of the American Society of Hypertension (ASH)	New York City, USA	May 19-22, 2012	Dr. Daniel T. Lackland
The 4th World Health Summit. "Tackling Non-Communicable Diseases to Enhance Sustainable Development""Berlin meets Beijing – German-Chinese Dialogue in Health" during the World Health Summit	Berlin, Germany	October 23rd, 2012	Dr. Lisheng LIU Dr. Xinhua ZHANG
BPCON 2012 meeting.	Mumbai, India	November 3, 2012	Dr. Arun Chockalingam, Dr. V.V. Muthusamy Dr. Xinhua ZHANG
'The causes and consequences of hypertension, the need for people have healthy behaviours to prevent hypertension, the need for regular blood pressure checks, and the need for governments to create healthy environments that would assist in preventing hypertension'	WHO, Geneva	April 3-5, 2013	Dr. Liu Lisheng, Dr. Norman Campbell Dr. Arun Chockalingam Dr. Xin-Hua Zhang
The World Congress of Nephrology	Hong Kong	May 31- June 3rd 2013.	Dr. Lisheng LIU Prof. Xinhua Zhang

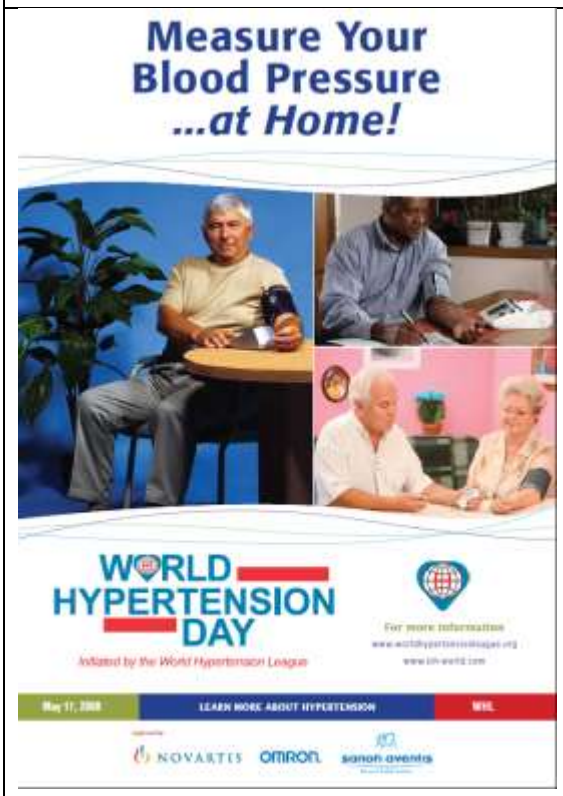
World Hypertension Day

WHD Theme (2005-2015)

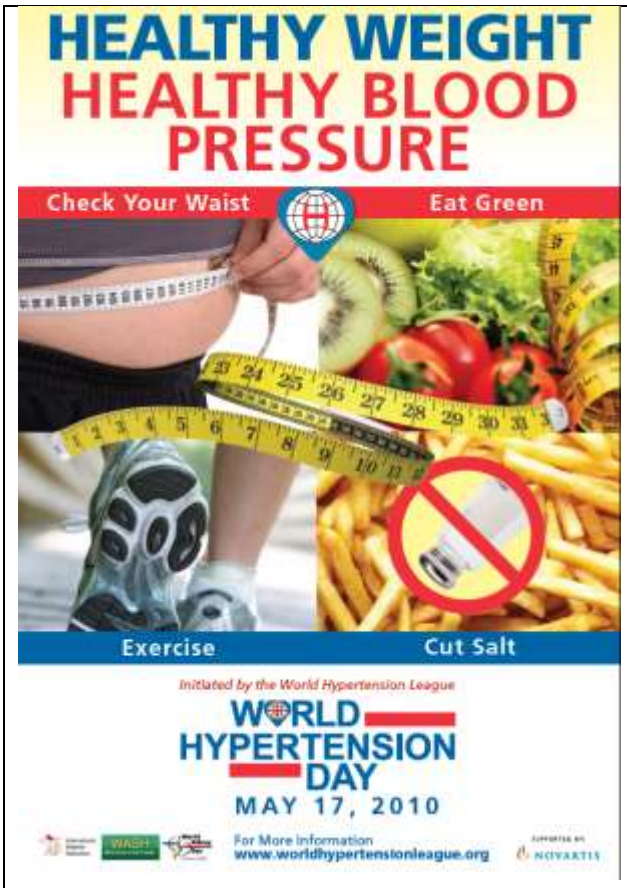
No	Year	Theme
1	2005	*High Blood Pressure - Get The Facts, Know Your Risk!*
2	2006	Prevent Hypertension “Treat to Goal”
3	2007	Healthy Diet Healthy Blood Pressure
4	2008	Measure Your Blood Pressure...at Home!
5	2009	Salt and High Blood Pressure: Two Silent Killers
6	2010	Healthy Weight – Healthy Blood Pressure
7	2011	**Know Your Numbers and Target Your Blood Pressure**
8	2012	Healthy Lifestyle-Healthy Blood Pressure
9	2013	Healthy Blood Pressure-Healthy Heart Beat
10	2014	Know Your Number
11	2015	Know Your Number

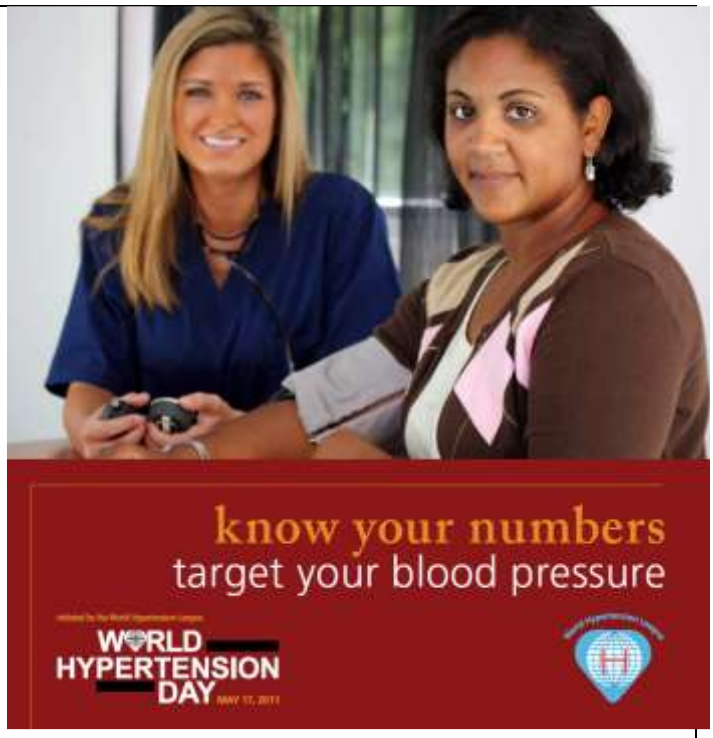

PREVENT HYPERTENSION
"TREAT TO GOAL"
GET YOUR BLOOD PRESSURE CHECKED!
Ask Your Health Care Professional. It Only Takes Minutes.
MAY 13, 2006
WORLD HYPERTENSION DAY
Initiated by the World Hypertension League

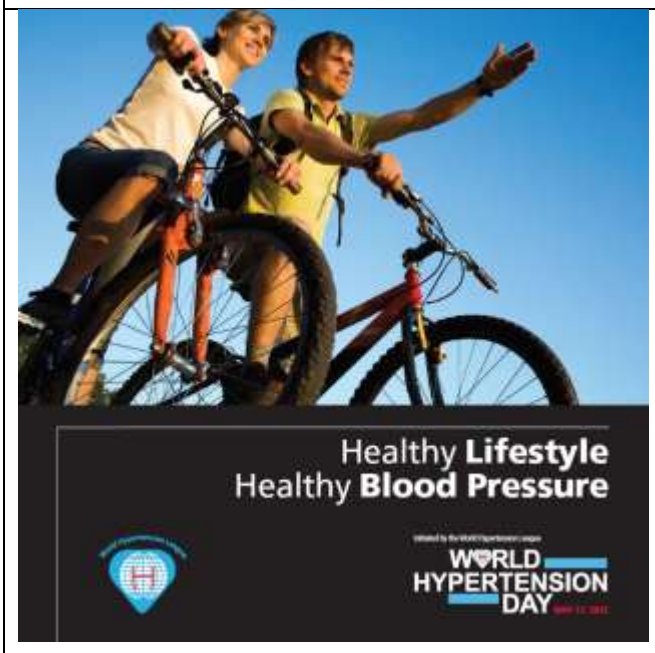

healthy diet
healthy blood pressure
World HYPERTENSION DAY
May 17, 2007
Initiated by
The World Hypertension League

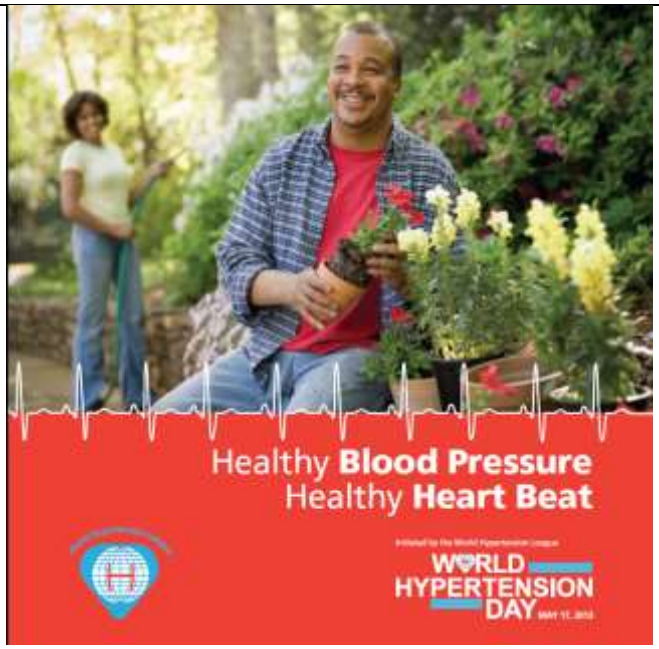

Measure Your Blood Pressure ...at Home!
WORLD HYPERTENSION DAY
Initiated by the World Hypertension League
For more information
www.worldhypertensionleague.org
www.ish-world.com
May 17, 2008
LEARN MORE ABOUT HYPERTENSION
WHL
NOVARTIS
OMRON
sanofi-aventis

WHD 2009
WORLD HYPERTENSION DAY
May 17, 2009
Initiated by the World Hypertension League
Salt and High Blood Pressure:
Two Silent Killers


HEALTHY WEIGHT
HEALTHY BLOOD PRESSURE
Check Your Waist
Eat Green
Exercise
Cut Salt
Initiated by the World Hypertension League
WORLD HYPERTENSION DAY
MAY 17, 2010
For More Information
www.worldhypertensionleague.org
NOVARTIS


know your numbers
target your blood pressure
WORLD HYPERTENSION DAY


Healthy Lifestyle
Healthy Blood Pressure
WORLD HYPERTENSION DAY


Healthy Blood Pressure
Healthy Heart Beat
WORLD HYPERTENSION DAY

New Governance, Structure, and Activities of the WHL

The WHL is now registered in Canada under "Societies Act of British Columbia", as a non-profit organization. A bank account with the Canadian Imperial Bank of Commerce is established.

Relationship with WHO: The WHL enjoys the status of 'in official relation with WHO'. To maintain the status we report our activities on an annual basis, our work plans – particularly relating to collaboration with WHO, and our financial statements.

I
In April 2010, the US Institute of Medicine released a major report entitled "Promoting Cardiovascular Health in the Developing World. This report recognized the contributions of WHL on global awareness of hypertension and assigned a few responsibilities.

The United Nations' High Level Meeting (HLM) in New York, September 19-20, 2011 mandated the WHO with responsibility to identify target and indicators and to report to the UN in December 2012. The WHL collaborated in three important areas such as hypertension control, salt reduction and tobacco. Both Graham MacGregor and Arun Chockalingam are serving as part of a WHO expert panel on population reduction of dietary salt/sodium. It is important to have someone in WHL involved in the blood pressure target.

Each year World Health Organization celebrates the World Health Day on April 7th to commemorate the formation of WHO. This year is 65 years since the creation of WHO. The theme of 2013 is hypertension on April 4th.

Worksite CVD Prevention Program: The Workplace High blood pressure control project, developed and carried out by Dr. George Fodor in three Eastern and Central European Countries (Austria, Hungary and Slovakia) has been reviewed and adopted by the Board at its Cairo meeting in April 2008. Subsequently Dr. Fodor and SG modified the protocol for adoption by many member countries. The project protocol was modified to examine the risk of hypertension, hyperlipidemia, diabetes and obesity at the workplaces. An attempt was made to secure collaboration/endorsement from WHO. With Professor Liu Lisheng as the Principal coordinating Investigator, four sites in China and at least one site in Hong Kong with dedicated local Principal Investigators, the Worksite BP Control Task Force in China was established. The Task force met in Beijing on November 15, 2008.

The WHL is hosting a workshop on "CVD Prevention in Workplace" in Bratislava, Slovak Republic on April 24th 2009 under the leadership of Professor George Fodor, a member of the WHL Executive Board. It was partly funded by the Canadian Institutes of Health Research. An international long-term collaborative project is underway. The participating countries are: Austria, Canada, Slovak Republic, Czech Republic, India, China, Latvia, Hungary, Poland and Ukraine.

This study is now replicated in more centers under the name **"InterPrevent"**.

Do You Know Your Numbers (DYKYN) Survey: The Board approved, in April 2008, the launch of DYKYN Survey around the World Hypertension Day 2008. It was a WHL initiative. But funded by Novartis and carried out by Ruder Finn in 15 countries. The WHL owns the data and has the right to publish while Novartis may use the information for its marketing purposes. As a consequence, the Ruder-Finn turned in all accumulated data to the OSG. The result manuscript has been submitted to the "Health Promotion International" Journal.

The 5 Actions: Achieving blood pressure goals globally: five key actions for healthcare professionals, a worldwide call to action.
The 5 core actions are:

- Detect and prevent High Blood Pressure
- Assess Total Cardiovascular Risk
- Create an Active Partnership with the Patient
- Treat Hypertension to Goal
- Create a Supportive Environment

WHL-ISH-ESH Sponsored Hypertension Teaching Seminar in Africa: To supporting training program in Africa, to build capacity in that continent is quite relevant to our mission. WHL is pleased to join as a contributing partner of the ISH led hypertension teaching seminars in Africa from 2009~2012——Abudja, Nigeria in September 17-18 2009, Kinshase, D.R.. Congo, Africa in May 5-6, 2010, Maputo, Mozambique, Africa in October 6-7 2011, Douala and Cameroon in October 25-27 2012 . This seminar is the dedicated effort of Dr. Robert Fagard from Leuven, Belgium. Previous seminars were held in Maputo, Mozambique, September 21-22 2006, and in Douala, Cameroon, March 13-14 2008. The arrangement is to alternate seminars in English and in French. WHL contributed 15,000 Euros every from 2009 ~ 2012. Dr. Liu Lisheng through the Chinese Hypertension League contributed to WHL an equivalent of 15,000 Euros (2009) and 10000 USD (2010) to cover WHL's obligation to WHL-ISH-ESH partnership in this important initiative.

The WHL made strategic partnership with a number of international societies during the past year. We have jointly promoted:

- World Kidney Day (WHD)---WHL with International Society of Nephrology(ISN) and International Federation of Kidney Foundations (IFKF) jointly run the WKD since 2006.;
- World Salt Awareness Week with World Action on Salt and Health (February 2009)
- Salt and Health Consultation meeting with Pan American Health Organization (PAHO) and the Public Health Agency of Canada (PHAC) in Miami, Florida, USA in January 2009.
- "Dialogue on Salt reduction with Food manufacturers and other stakeholders", jointly with the US National Forum on Heart disease and

Stroke Prevention, March 20, 2009 in Washington, DC.

- World Diabetes Day (November 14,2010) with International Diabetes Federation (IDF).
- World Salt Awareness Week (March 21 - 28, 2010)) with World Action on Salt and Health (WASH).
- And, in turn, the IDF, ISN/IFKF, and WASH promoted World Hypertension Day through their memberships and networks
- Collaboration with Blood Pressure Canada (BPC): To endorsement them to produce a "Home Blood Pressure Monitoring Video"
- International Society of Hypertension (ISH)
- World Heart Federation (WHF)
- US National Forum (NF)

Collaboration with Private Public Institutions: The World Hypertension Day 2009 bears the theme "Salt and high blood pressure: Two silent killers". To promote this agenda, WHL has partnered with the US National Forum (NF) on Heart Disease and Stroke Prevention, the Pan American Health Organization (PAHO), Public Health Agency of Canada (PHAC), as well as the conglomerate of eight major global food manufacturers with a single aim to lower dietary salt, worldwide. To this effect, there are three upcoming events in which WHL will play a major leadership role: (a) PAHO/PHAC experts conference on "Mobilizing for dietary salt reduction policies and strategies in the Americas: Expert and Country consultations", January 13-14, 2009 in Miami; (b) NF's annual meeting in Washington DC March 18-20, focused session on "Salt: Seizing the opportunities to take action" – a 3 hour session on March 20, 2009; and (c) a strategic consultation meeting with global food manufacturers (thanks to Dr. Derek Yach for facilitating this event), PAHO, PHAC, Canadian sodium reduction strategy, who and WHF on the afternoon of March 20th following the NF meeting in Washington DC. Dr. Graham MacGregor has been invited to participate in all these three events as well as the SG. All these strategies will pave way for a successful campaigning of both the 'World Salt Awareness Week' initiated by the WASH and our own WHD in May.

WHL Website: The WHL website (www.worldhypertensionleague.org) is on-line in 2008. We constantly update the website with new and current information.

The website also serves as a focal point to receive WHL Newsletter directly by registering on-line.

Corporate Support for the League: The League continues to enjoy the support from Omron, Servier and Novartis. With many companies either merging or going out of hypertension related activities will be a continuing concern for both WHL and ISH.

Executive Board 1988-2014

1988-1990	
President	Dr. Antoon Amery
Vice President	Dr. Claude Lenfant
Secretary General	Dr. Thomas Strasser
1990 - 1992	
President	Dr. Detlev Ganten
Vice President	Dr. Claude Lenfant
Secretary General	Dr. Thomas Strasser
1992 - 1995	
President	Dr. Detlev Ganten
Vice President	Dr. George Fodor
Secretary General	Dr. Thomas Strasser

1995- 1998	
President	Dr. Peter Sleight
Vice President	Dr. George Fodor
Secretary General	Dr. Patrick J. Mulrow
1998 - 2000	
President	Dr. Peter Sleight
Vice President	Dr. Lisheng Liu
Secretary General	Dr. Patrick J. Mulrow
2000 - 2006	
President	Dr. Claude Lenfant
Vice President	Dr. Lisheng Liu
Secretary General	Dr. Patrick J. Mulrow
2006 - 2012	
President	Dr. Liu Lisheng
Vice President	Dr. Lawrence Beilin
Secretary General	Dr. Arun Chockalingam
2012 - 2013	
President	Dr. Lisheng Liu
Secretary General	Dr. Arun Chockalingam
2013-2014	
President	Dr. Norman

President Elect **Secretary General**	Campbell Dr. Daniel Lackland Dr. Arun Chockalingam
2014-	
President **President Elect** **Chief Executive Officer**	Dr. Norman Campbell Dr. Daniel Lackland Dr. Mark Niebylski

Executive Board of WHL for 2006 - Lisheng

President	Liu Lisheng	Beijing, China
Past President	Peter Sleight	Oxford, UK
Vice President	Lawrence Beilin	Perth, Australia
Secretary-General	Arun Chockalingam	Vancouver, Canada
Board Member	George Fodor	Ottawa, Canada
	Detlev Ganten	Berlin, Germany
	Michael Alderman	New York,USA
Advisors to the Board	Patrick Mulrow	Toledo, USA
	Mohsen Ibrahim (Developing Countries)	Cairo, Egypt
	Joerg Peotzsch (Communications)	Berlin, Germany
Editor, WHL Newsletter	Anja Kroke	Berlin, Germany
ex-officio representing ISH	Lars Lindholm	Västerbotten, Swede

Executive Board of WHL from 2009~2013 - Lisheng

President	Liu Lisheng	Beijing, China	2009.10.1~2012.9.30
Vice President	Lawrence Beilin	Perth, Australia	2009.10.1~2012.9.30

Secretary-General	Arun Chockalingam	Vancouver, Canada	2006.10.1~2011.9.30
Officers at Large	George Fodor	Ottawa, Canada	2009.10.1~2012.9.30
	Zhang Xinhua	Hong Kong	2009.10.1~2012.9.30
	Bruce Neal	Australia	2009.10.1~2012.9.30
	Anita Rieder	Austria	2009.10.1~2012.9.30
	Alfredo Duenas	Cuba	2008.10.1~2010.9.30
	Istemihan Tengiz	Turkey	2011.10.1~2014.9.30
	V.V. Muthusamy	India	2011.10.1~2014.9.30
	Norman Campbell	Canada	2012.10.1~2015.9.30
	Peter Nilsson	Sweden	2012.10.1~2015.9.30
	Graham McGregor	London, England0	2009.10.1~2013.9.30
	Adel E. Berbari	Lebanon	2010.10.1~2013.9.30
Editor, WHL Newsletter	Anja Kroke	Berlin, Germany	2008.10.1~2010.9.30
	Daniel T. Lackland	USA	2010.10.1~2013.9.30
ex-officio representing ISH	Ernesto Schiffrin	Montreal, Canada	2012.10.1~2014.9.30
	Stephen Harrap	Australia	2010.10.1~2014.9.30
	Anthony Heagerty	UK	2008.10.1~2012.9.30
	Lars Lindholm	Västerbotten, Swede	2008.10.1~2010.9.30
Elected President	Norman Campbell	Canada	2013~

List of Officers 1988 – 2014

1988
A. Amery (Leuven), President
D. Ganten (Heidelberg), President Elect
C. Lenfant (Bethesda), Vice President
T. Strasser (Geneva), Secretary General

A. Lever (Glasgow)
J. L. Rodicio (Madrid)
M. Safar (Paris)

Editorial Office: R. Badenhoop, German Institute for High Blood Pressure Research, Heidelberg (FRG)

Dec 1990

D. Ganten (Heidelberg), President;
C. Lenfant (Bethesda), Vice President;
A. Amery (Leuven), Past President;
T. Strasser (Geneva), Secretary General;

J.L.Rodicio (Madrid); M. Safar (Paris), members.

Editorial Office: German Institute for High Blood
Pressure Research, Heidelberg (FRG)
R. Baildon, Editor; D. Jilg, Editorial Assistant

Aug 1992

D. Ganten (Berlin-Buch), President;
P. Sleight (Oxford), President Elect;
G. Fodor (St. John's), Vice President;
A. Amery (Leuven), Past President;
T. Strasser (Geneva), Secretary General;

H. Ibsen (Glostrup), member.

Editorial Offrce: German Institute for High Blood Pressure Research, Heidelberg (FRG).
R. Baildon, Editor; E. Pisch, Editorial Assistant

Feb 1993

D. Ganten (Berlin-Buch), President;
P. Sleight (Oxford), President Elect;
G. Fodor (St. John's), Vice President;
A. Amery (Leuven), Past President;
C. Lenfant (Bethesda), Special Adviser
T. Strasser (Geneva), Secretary General;

Aug 1994

D. Ganten (Berlin), President
P. Sleight (Oxford), President Elect
G. Fodor (St. John's), Vice-President
A. Amery (Leuven), Past President
C. Lenfant (Bethesda), Special Advisor
T. Strasser (Geneva), Secretary General

K. Arakawa (Fukuoka), K. H. Rahn (Münster), members.

Editorial Offrce: Max Delbrück Center for Molecular Medicine (MDC), Berlin
J. Pötzsch, Editor; E. Pisch, Editorial Assistant

Aug/Oct 1995

P. Sleight (Oxford), President
D. Ganten (Berlin-Buch), Past President
G. Fodor (Ottawa), Vice-President
P. J. Mulrow (Toledo, Ohio), Secretary General

C. Lenfant (Bethesda), Special Adviser
T. Strasser (Geneva), Adviser, Intemational Liaison
A. Chockalingam (Ottawa), Adviser, Patient Education
Project

K. Arakawa (Fukuoka), K.H. Rahn (Münster), members

1996 DEC

P. Sleight (Oxford), President
D. Ganten (Berlin-Buch), Past President
G. Fodor (Ottawa), Vice-President
P.J. Mulrow (Toledo, Ohio), Secretary General

C. Lenfant (Bethesda) Special Adviser
T. Strasser (Geneva) Adviser, International Liaison
A. Chockalingam (Ottawa), Adviser, Patient Education Proiect
M.M. Ibrahim (Cairo), Adviser, Developing Countries

J.N. Cohn (Minneapolis), K..H. Rahn (Münster), members.

Dec 1998

P. Sleight (Oxford), President
D. Ganten (Berlin-Buch), Past President

G. Fodor (Ottawa), Vice-President
P.J. Mulrow (Toledo, Ohio), Secretary General

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

June 1999

P. Sleight (Oxford), President
C. Lenfant (Bethesda), President Elect
D. Ganten (Berlin-Buch), Past President
L. Lisheng (Beijing), Vice-President
P.J. Mulrow (Toledo, Ohio), Secretary General

G. Fodor (Ottawa), Special Adviser
T. Strasser (Geneva), Adviser, International Liaison
A. Chockalingam (Ottawa), Adviser, Patient Education Project
M.M. Ibrahim (Cairo), Adviser, Developing Countries

K.H. Rahn (Münster), member

2000

Claude Lenfant (Bethesda), President
Liu Lisheng (Beijing), Vice-President
Peter Sleight (Oxford), Past President
Patrick J. Mulrow (Toledo), Secretary General
J. George Fodor (Ottawa),
Detlev Ganten (Berlin-Buch)
Jay N. Cohn (Minneapolis), K.H. Rahn (Münster)

Advisors to the Board:
Thomas Strasser (Geneva), International Liaison
Arun Chockalingam (Ottawa), Patient Education Project
M. Mohsen Ibrahim (Cairo), Developing Countries
Jörg Pötzsch (Berlin-Buch), Communications

Anja Kroke. Editor: Erika Pisch. Editorial Assistant

2005 – DEC

Claude Lenfant (Gaithersburg), President
Liu Lisheng (Beijing), Vice-President
Peter Sleight (Oxford), Past President

Arun Chockalingam (Vancouver), Secretary General

Members:
J. George Fodor (Ottawa), Detlev Ganten (Berlin)
Lawrence Beilin (Perth), Michael Alderman (New York)

Advisors to the Board:
Patrick J. Mulrow (Toledo)
M. Mohsen Ibrahim (Cairo), Developing Countries
Jörg Pötzsch (Berlin), Communications

Anja Kroke, Editor; Erika Pisch, Editorial Assistant

2006 – DEC

Liu Lisheng (Beijing), President
Lawrence Beilin (Perth), Vice-President
Peter Sleight (Oxford), Past President
Arun Chockalingam (Vancouver). Secretary General

Members:
J. George Fodor (Ottawa), Detlev Ganten (Berlin)
Michael Alderman (New York)

Advisors to the Board:
Patrick J. Mulrow (Toledo)
M. Mohsen Ibrahim (Cairo), Developing Countries
Jörg Pötzsch (Berlin), Communications

Anja Kroke, Editor; Erika Pisch, Editorial Assistant

2007 DEC

Liu Lisheng (Beijing), President
Lawrence Beilin (Perth), Vice-President
Peter Sleight (Oxford), Past President
Arun Chockalingam (Vancouver), Secretary General

Members:
J. George Fodor (Ottawa), Detlev Ganten (Berlin)
Michael Alderrnan (New York)

Advisors to the Board:
Patrick J. Mulrow (Toledo)
M. Mohsen Ibrahim (Cairo), Developing Countries
Jörg Pötzsch (Berlin), Communications

Anja Kroke, Editor; Erika Pisch, Editorial Assistant

2008 Oct

Liu Lisheng (Beijing), President
Lawrence Beilin (Perth), Vice-President
Peter Sleight (Oxford), Past President
Arun Chockalingam (Vancouver), Secretary General

Members:
J. George Fodor (Ottawa), Graham MacGregor (London)

Advisors to the Board:
M. Mohsen Ibrahim (Cairo), Developing Countries
Jörg Pötzsch (Berlin). Communications

ISH Representation:
Tony Heagerty (Manchester,UK), Lars Lindholm (Umeä, Sweden)

Anja Kroke, Editor; Erika Pisch, Editorial Assistant

Oct 2009

Lisheng Liu (Beijing), President
Lawrence Beilin (Perth),Vice-President
Peter Sleight (Oxford), Past President
Arun Chockalingam (Vancouver), Secretary General

Members:
J. George Fodor (Ottawa), Graham MacGregor (London), Dr. Alfredo Dueñas (Havana)

Advisors to the Board: M. Mohsen Ibrahim (Cairo), Developing Countries
Jörg Pötzsch (Berlin), Communications

ISH Representation: Tony Heagerty (Manchester, UK); Lars Lindholm (Umeå, Sweden)

Anja Kroke, Editor; Erika Pisch, Editorial Assistant

Dec 2010

Dr. Liu Lisheng (Beijing, China), President
Dr. Lawrence Beilin (Perth, Australia), Vice-President
Dr. Arun Chockalingam (Washington, DC), Secretary General

Members:
Dr. Adel E. Berbari (Beirut, Lebanon)
Dr. J. George Fodor (Ottawa, Canada)
Dr. Graham MacGregor (London, UK)
Dr. Bruce Neal (Sydney, Australia)
Dr. Anita Rieder (Vienna, Austria)
Dr. Xin-Hua Zhang (Hong Kong)
Dr. Daniel T. Lackland (Charleston, SC), Editor, WHL Newsletter

ISH Representation:
Dr. Stephen Harrap (Melbourne, Australia), Dr. Tony Heagerty (Manchester, UK)

March 2011

Dr. Liu Lisheng (Beijing, China), President
Dr. Lawrence Beilin (Perth, Australia), Vice-President
Dr. Arun Chockalingam (Washington, DC), Secretary General

Members:
Dr. Adel E. Berbari (Beirut, Lebanon)
Dr. J. George Fodor (Ottawa, Canada)
Dr. Graham MacGregor (London, UK)
Dr. Bruce Neal (Sydney, Australia)
Dr. Anita Rieder (Vienna, Austria)
Dr. Xin-Hua Zhang (Hong Kong)
Dr. Daniel T. Lackland (Charleston, SC, USA), Editor WHL Newsletter

ISH Representation:
Dr. Stephen Harrap (Melbourne, Australia)
Dr. Tony Heagerty (Manchester, UK)

March 2012

Dr. Liu Lisheng (Beijing, China), President
Dr. Lawrence Beilin (Perth, Australia), Vice-President
Dr. Arun Chockalingam (Washington, DC), Secretary General

Members:
Dr. Adel E. Berbari (Beirut, Lebanon)
Dr. J. George Fodor (Ottawa, Canada)
Dr. Graham MacGregor (London, UK)
Dr. V.V. Muthusamy (Tamilnadu, India)
Dr. Anita Rieder (Vienna, Austria)
Dr. Ĭstemihan Tengiz (Izmir, Turkey)
Dr. Xin-Hua Zhang (Hong Kong)

Dr. Daniel T. Lackland (Charleston, SC), Editor WHL Newsletter

ISH Representation:
Dr. Stephen Harrap (Melbourne, Australia)
Dr. Tony Heagerty (Manchester, UK)

March 2013

Dr. Liu Lisheng (Beijing, China), President
Dr. Norman Campbell (Calgary, Canada), President-Elect
Dr. Arun Chockalingam (Washington, DC), Secretary General

Members:
Dr. Adel E. Berbari (Beirut, Lebanon)
Dr. Graham MacGregor (London, UK)
Dr. V.V. Muthusamy (Madurai, India)
Dr. Peter Nilsson (Malmö, Sweden)
Dr. Anita Rieder (Vienna, Austria)
Dr. Ĭstemihan Tengiz (Izmir, Turkey)
Dr. Xin-Hua Zhang (Beijing, China)
Dr. Daniel T. Lackland (Charleston, SC), Editor WHL Newsletter

ISH Representation:
Dr. Ernesto Schiffrin (Montreal, Canada)
Dr. Stephen Harrap (Melbourne, Australia)

Sept 2013

Dr. Norman Campbell (Calgary, Canada), President
Dr. Daniel T. Lackland (Charleston, USA) President Elect & WHL Newsletter Editor
Dr. Liu Lisheng (Beijing, China), Past President
Dr. Arun Chockalingam (Washington, DC), Secretary General

Members:
Dr. V.V. Muthusamy (Madurai, India)
Dr. Peter Nilsson (Malmö, Sweden)
Dr. Anita Rieder (Vienna, Austria)
Dr. Ĭstemihan Tengiz (Izmir, Turkey)
Dr. Xin-Hua Zhang (Beijing, China)

ISH Representation:
Dr. Ernesto Schiffrin (Montreal, Canada)
Dr. Stephen Harrap (Melbourne, Australia)

Erika Pisch, Editorial Assistant,

Dec 2013

Dr. Norman Campbell (Calgary, Canada), President
Dr. Daniel T. Lackland (Charleston, USA) President-Elect & WHL Newsletter Editor
Dr. Liu Lisheng (Beijing, China), Past President
Dr. Arun Chockalingam (Washington, DC, USA), Secretary General
Dr. Mark Niebylski (Clancy, MT), CEO

Members:
Dr. V.V. Muthusamy (Madurai, India)
Dr. Peter Nilsson (Malmö, Sweden)
Dr. Anita Rieder (Vienna, Austria)
Dr. Ĭstemihan Tengiz (Izmir, Turkey)
Dr. Xin-Hua Zhang (Beijing, China)

Advisors to the Board:
Dr. Krassimira Hristova (Bulgaria)
Dr. Daniel Lemogoum (Cameron)
Dr. Marcelo Orias (Argentina)

ISH Representation:
Dr. Ernesto Schiffrin (Montreal, Canada)
Dr. Stephen Harrap (Melbourne, Australia)

Erika Pisch, Editorial Assistant
Max Delbrück Center for Molecular Medicine (MDC), Berlin-Buch

March 2014

Dr. Norman Campbell (Calgary, Canada), President
Dr. Daniel T. Lackland (Charleston, USA) President-Elect & WHL Newsletter Editor
Dr. Liu Lisheng (Beijing, China), Past President
Dr. Arun Chockalingam (Toronto, Canada), Secretary General
Dr. Mark Niebylski (Clancy, MT), CEO

Members:
Dr. V.V. Muthusamy (Madurai, India)
Dr. Peter Nilsson (Malmö, Sweden)
Dr. Anita Rieder (Vienna, Austria)
Dr. Ĭstemihan Tengiz (Izmir, Turkey)
Dr. Xin-Hua Zhang (Beijing, China)

Advisors to the Board:
Dr. Krassimira Hristova (Bulgaria)
Dr. Darwin Labarthe (USA)

Dr. Daniel Lemogoum (Cameroon)
Dr. Marcelo Orias (Argentina)

ISH Representation:
Dr. Ernesto Schiffrin (Montreal, Canada)
Dr. Stephen Harrap (Melbourne, Australia)

June 2014

Dr. Norman Campbell (Calgary, Canada), President
Dr. Daniel T. Lackland (Charleston, USA) President-Elect & WHL Newsletter Editor
Dr. Liu Lisheng (Beijing, China), Past President
Dr. Xin-Hua Zhang (Beijing, China), Secretary General
Dr. Peter Nilsson (Malmö, Sweden), Treasurer

Members:
Dr. Krassimira Hristova (Sofia, Bulgaria)
Dr. Daniel Lemogoum (Douala, Cameroon)
Dr. V.V. Muthusamy (Madurai, India)
Dr. Marcelo Orias (Cordoba, Argentina)
Dr. Anita Rieder (Vienna, Austria)
Dr. Ĭstemihan Tengiz (Izmir, Turkey)

Interim Board Member: Dr. Mark Gelfer (Vancouver, BC, Canada)

Special Advisor to the Board:
Dr. Darwin Labarthe (Chicago, USA)

ISH Representation:
Dr. Ernesto Schiffrin (Montreal, Canada)
Dr. Rhian Touyz (Glasgow, UK)

Secretariat:
Dr. Mark Niebylski (Clancy, MT, USA), CEO
Kimbree Redburn, Office Secretary

Erika Pisch, Editorial Assistant
Max Delbrück Center for Molecular Medicine (MDC), Berlin-Buch

Sept 2014

Dr. Norman Campbell (Calgary, Canada), President
Dr. Daniel T. Lackland (Charleston, USA) President-Elect & WHL Newsletter Editor
Dr. Liu Lisheng (Beijing, China), Past President
Dr. Xin-Hua Zhang (Beijing, China), Secretary General
Dr. Peter Nilsson (Malmö, Sweden), Treasurer

Members:
Dr. Krassimira Hristova (Sofia, Bulgaria)
Dr. Daniel Lemogoum (Douala, Cameroon)
Dr. V.V. Muthusamy (Madurai, India)
Dr. Marcelo Orias (Cordoba, Argentina)
Dr. Anita Rieder (Vienna, Austria)
Dr. Ĭstemihan Tengiz (Izmir, Turkey)

Interim Board Member:
Dr. Mark Gelfer (Vancouver, BC, Canada)

Special Advisor to the Board:
Dr. Darwin Labarthe (Chicago, USA)

ISH Representation:
Dr. Ernesto Schiffrin (Montreal, Canada)
Dr. Rhian Touyz (Glasgow, UK)

Secretariat:
Dr. Mark Niebylski (Clancy, MT, USA), CEO
Kimbree Redburn, Office Secretary

Dec 2014

Dr. Norman Campbell (Calgary, Canada), President
Dr. Daniel T. Lackland (Charleston, USA) President-Elect & WHL Newsletter Editor
Dr. Liu Lisheng (Beijing, China), Past President
Dr. Xin-Hua Zhang (Beijing, China), Secretary General
Dr. Peter Nilsson (Malmö, Sweden), Treasurer

Members:
Dr. Krassimira Hristova (Sofia, Bulgaria)
Dr. Daniel Lemogoum (Douala, Cameroon)
Dr. Marcelo Orias (Cordoba, Argentina)
Dr. Anita Rieder (Vienna, Austria)

Interim Board Member:
Dr. Mark Gelfer (Vancouver, BC, Canada)

Special Advisor to the Board:
Dr. Darwin Labarthe (Chicago, USA)

ISH Representation:
Dr. Ernesto Schiffrin (Montreal, Canada)
Dr. Rhian Touyz (Glasgow, UK)

Secretariat:
Dr. Mark Niebylski (Clancy, MT, USA), CEO
Kimbree Redburn, Office Secretary

Erika Pisch, Editorial Assistant
Max Delbrück Center for Molecular Medicine, Berlin-Buch

World Hypertension League Council Meetings, 1995 - 2004

The WHL is governed by its Council, consisting of one representative of each Member Organization.

16th Conf., WHL Council World Conference on Hypertension Control	Ottawa, Canada	June 21, 1995
17th WHL Council Conference and Workshop on Hypertension and Congestive Heart Failure	Montreal, Canada	June 28, 1997
18th WHL Council Conference and Workshop on Hypertension in the Elderly	Buenos Aires, Argentina	May 7, 1999
19th WHL Council Conference and Workshop on Hypertension & Obesity	Prague, Czech Republic	June 22, 2002
20th WHL Council Conference and Symposium: Community Control of Hypertension with Special Emphasis on Central and Eastern Europe. Organized by WHL & Czech Society of Hypertension	Prague, Czech Republic	April 24, 2004

WHL Council (Regional) Conferences since 2006:

World Hypertension Congress (2009)	Beijing, China	October 29-November 1, 2009

World Hypertension Congress (2013)	Istanbul, Turkey	June 27-30, 2013
WHL Regional Meeting **with Chinese Hypertension League**	Beijing, China	October 16, 2005
WHL Regional Meeting **with Chinese Hypertension League**	Beijing, China	November 14, 2008
WHL Regional Conference 2011 **with the Chinese Hypertension League**	Beijing, China	November 3, 2011
21st WHL Symposium *on "Prevention and Control of Hypertension: A focus on the Asian Countries"*	Fukuoka, Japan	October 14, 2006
22nd Council Conference *on Chronic Disease Prevention: from evidence to action*	Beijing, China	November 16, 2007
23rd WHL Council Conference *on the Renin Angiotensin Aldosterone System*	Beijing, China	October 29,2009
WHL/APSH/ISH breakfast workshop during ISH 2012 meeting "Research on a Shoestring" *Research in Low- and Middle-Income Countries (LMIC) with little or no resources*	Sydney, Australia	September 30, 2012

<u>WHL Executive Board Meetings, 1995-2006</u>

The Executive organ of the WHL is its Board, elected by the Council, consisting of the President, President Elect, Immediate Past President, Vice President, Secretary General, President of the International Society of Hypertension (ISH), and a member of the Scientific Council of the ISH. Frequently, the WHL Executive Board met in conjunction with the ISH or other organizations involved in the control of hypertension.

22nd Meeting of WHL Exec. Board Ottawa, Canada June 20, 1995

World Conference on

Hypertension Control		
Dr. Peter Sleight was elected as new President and Dr. Patrick Mulrow appointed as Secretary General.		
23rd Meeting of WHL Exec. Board	Orlando, FL	March 24, 1996
45th Annual Scientific Session of the American College of Cardiology		
24th Meeting of WHL Exec. Board	Glasgow, UK	June 22, 1996
16th Scientific Meeting of the International Society of Hypertension		
25th Meeting of WHL Exec. Board	Paris, France	December 10, 1996
Workshop on the Treatment of Raised Blood Pressure in the Population		
26th Meeting of WHL Exec. Board	Montreal, Canada	June 27, 1997
17th WHL Council Conference and Workshop on Hypertension and Congestive Heart Failure		
27th Meeting of WHL Exec. Board	Geneva, Switzerland	February 11, 1998
International Symposium on Hypertension in the Community		
28th Meeting of WHL Exec. Board	Amsterdam, The Netherlands	June 7, 1998
17th Scientific Meeting of the ISH		

29th Meeting of WHL Exec. Board	Oxford, UK	September 15, 1998
1998 Annual Scientific Meeting of the British Hypertension Society, Keble College		
30th Meeting of WHL Exec. Board	Buenos Aires, Argentina	May 6, 1999
18th WHL Council Conference and Workshop on Hypertension in the Elderly		
31st Meeting of WHL Exec. Board	Geneva, Switzerland	November 15-16, 1999
Strategic Planning Meeting		
32nd Meeting of WHL Exec. Board	Chicago, IL	August 20, 2000
18th Scientific Meeting of the ISH (ISH 2000)		
There was a Satellite meeting - Genetics Symposium, Genetics of Human and Experimental Hypertension at the Medical College of Ohio (August 17-18, 2000), prior to the ISH/WHL Genetics of Hypertension Symposium meeting in Chicago, August, 2000. We chartered a bus and transported the people to Chicago from Toledo for the ISH 2000 Meeting.		
33rd Meeting of WHL Exec. Board	Orlando, FL	March 18, 2001
American College of Cardiology Scientific Sessions		
34th Meeting of WHL Exec. Board	Washington, D.C.	April 10, 2002

National Conf. on Cardio-vascular Health For All: Meeting the Challenge of Healthy People 2010		
35th Meeting of WHL Exec. Board	Prague, Czech Republic	June 21, 2002
19th Scientific Meeting of the ISH and 19th WHL Council Conference and Workshop on Hypertension & Obesity		
36th Meeting of WHL Exec. Board	Chicago, IL	November 17, 2002
Meeting coincided with American Heart Association Scientific Sessions		
37th Meeting of WHL Exec. Board	Geneva, Switzerland	November 20 & 21, 2003
Strategic Planning Meeting		
38th Meeting of WHL Exec. Board	Prague, Czech Republic	April 23, 2004
Community Control of Hypertension with Special Emphasis on Central and Eastern Europe. Organized by WHL and Czech Society of Hypertension		
39th Meeting of WHL Exec. Board	Milan, Italy	June 16, 2005 June 17, 2005 w/ISH Board

World Hypertension League Board Meeting 2006-2013 - Lisheng

40th WHL Executive Board Meeting	June 14, 2006	Madrid, Spain

ESH 2006		
41st WHL Executive Board Meeting 21st Scientific Meeting of ISH	October 14, 2006	Fukuoka, Japan
42nd WHL Executive Board Meeting ESH 2007	June 17, 2007	Milan, Italy
43rd WHL Executive Board Meeting 6th Asian-Pacific Congress of Hypertension	November 16, 2007	Beijing, China
44th WHL Executive Board Meeting 12th Annual Scientific meeting of the Egyptian Hypertension Society (EHS)	April 8, 2008	Cairo, Egypt
45th WHL Executive Board Meeting	May 19, 2008	Teleconference Call
46th WHL Executive Board Meeting 22nd Scientific Meeting of ISH	June 17, 2008	Berlin, Germany
47th WHL Executive Board Meeting	September 25, 2008	Teleconference Call
48th WHL Executive Board Meeting	December 16, 2008	Teleconference Call
49th WHL Executive Board Meeting	April 28, 2009	Teleconference Call
50th WHL Executive Board Meeting ESH 2009	June 13, 2009	Milan, Italy
51st WHL Executive Board Meeting World Hypertension Congress 2009	October 29, 2009	Beijing, China
52nd WHL Executive Board Meeting	February 23, 2010	*Teleconference Call*
53rd WHL Executive Board Meeting	April 28, 2010	*Teleconference Call*
54th WHL Executive Board Meeting 23rd Scientific Meeting of ISH	September 25, 2010	Vancouver, CANADA
55th WHL Executive Board Meeting 13rd Annual Congress of Turkish Association of Hypertension Control	May 5, 2011	Izmir, Turkey

56th WHL Executive Board Meeting World Hypertension League Regional Congress 2011	November 3, 2011	Beijing, China
57th WHL Executive Board Meeting	February 13, 2012	*Teleconference Call*
58th WHL Executive Board Meeting 24th Scientific Meeting of ISH	September 30, 2012	Sydney, Australia
59th WHL Executive Board	April 14, 2103	*Teleconference Call*
60th WHL Executive Board Meeting	May 27, 2103	*Teleconference Call*
61st WHL Executive Board Meeting World Hypertension Congress 2013	June 27, 2013	Istanbul, Turkey

#143 – NL – Abstract the restructuring of the WHL

WHL NEWSLETTER 143/2014
Dr. Norm Campbell
President's Column

Restructuring the WHL

The Executive of the League will be proposing a restructuring of the bylaws and function of the league. It will be proposed to have both,a Treasurer and a Secretary General, to increase the work capacity of the executive and specifically to focus more attention on financial accountability and fund raising. The Chief Executive Officer and the President Elect of the WHL are based in the United States which is also the location of many of the best funding opportunities. Hence it will also be proposed to move the League's office to the United States. Finally, the bylaws will be proposed to include the position of the Chief Executive Officer. Any proposed changes to the bylaws should be indicated the executive as soon as possible.

Journal of Clinical Hypertension

The WHL executive has approved a formal relationship with the *Journal of Clinical Hypertension* under Dr. Dan Lackland's leadership. The journal will have specific sections to foster the mandate of the League to prevent and control hypertension and include manuscripts that highlight the learning of those who are awarded the WHL certificates of excellence. The Journal is an open source online journal that provides articles free of charge. It is hoped all WHL member organizations will encourage their membership to sign up for the monthly notifications of published article and will also submit key articles that relate to the prevention and control of hypertension. The League will work closely with the journal to ensure the journal becomes the world's best scientific, clinical and public health resource on prevention and control of hypertension and that its readers are well armed to support the mandate of the WHL.

Chief Executive Officer

Dr. Mark Niebylski has been working constantly on behalf of the WHL since his appointment January 20, 2014. I express my great admiration for his instant adoption of the WHL mandate, vision and his strong work ethic. The future of the WHL is bright. Space precludes more extensive outlines in WHL activities but members can expect many changes and greatly enhanced activities. Welcome to the WHL, Dr. Niebylski.

Dr. Norman Campbell
President, WHL

#144 – NL – Jan – June update – include this in the history

WHL NEWSLETTER 144/2014

Dr. Norm Campbell

President's Column

The World Hypertension League (WHL) is continuing to expand to address the critical need to enhance hypertension prevention and control efforts globally. More details on our recent efforts can be found on theWHL 2014 semi-annual report that is posted on the WHL website:
http://www.whleague.org/images/2014_WHL_semi_annual_report_July_19_2014.pdf.

Governance and Administration: Following Executive and Board approval, the WHL council approved revised by-laws for the WHL in June 2014 which may be viewed at:
http://www.whleague.org/images/Approved

_WHL_Constitution_and_By_Laws_Amended _June_2014.pdf.

The highlights include an amendment to ensure any future changes to by-laws requires the council's approval in addition to the WHL board approval, the addition of a new Treasurer position, the addition of a Chief Executive Officer (CEO) position, clarification that the WHL is currently an independent entity that is moving WHL offices to the United States. The WHL is in official working relations with the International Society of Hypertension (ISH) and the World Health Organization (WHO) and has plans to strengthen and enhance both of these collaborations. The Executive is working to draft travel, conflict of interest, and other governance documents that will be posted on the WHL website. Kimbree Redburn has joined the administration of the WHL assisting our CEO, Mark Niebylski. Kimbree has a M.A. in International Economics and Development (WHL Population Health and Economics Specialist kimbree.redburn@gmail.com).

New WHL board members: The WHL welcomes Peter Nilsson (Sweden) as Treasurer and new board members Daniel Lemogoum (Cameroon), Krasimira Hristova (Bulgaria), and Marcelo Orias (Argentina). Rhian Touyz is joining Ernesto Schiffrin as one of the ISH Board representatives. The WHL leadership can be viewed at:

http://www.whleague.org/index.php/feature s/module-positions

The new WHL website (http://www.whleague.org): The website was launched in June 2014. Please review the website and provide us feedback on how it can be improved to best suit your needs. We would like the website to ultimately provide up to date resources and information to aid prevention and control of hypertension as well as to inform viewers about the WHL. Those experienced and interested in assisting with or contributing to or posting on the website can contact the WHL.

World Hypertension Day, May 17th, 2015, with the theme 'Know Your Blood Pressure' will be retained at least until 2018 to emphasize the need for all adults to have their blood pressure (BP) measured. Screening is a critical first step in identifying people who are at risk from hypertension and may benefit from drug therapy. In 2014, over 300,000 people had BP screened related to World Hypertension Day with a summary report available at:

http://www.whleague.org/index.php/j- stuff/world-hypertension-day-report-draft.

For 2015, the aim is to have one million people screened. We welcome everyone to join the effort!

Screening for hypertension: New standardized WHL resources are now on the WHL website to aid community based BP screening programs to develop. New supporting resources are being developed, including a powerpoint slide set and video instructions.

Recruiting new members and reconnecting with old WHL members. The WHL is making concerted efforts to reconnect with new and previous member organizations. Please see if your organization is listed on the WHL web site and if the information is current. If not, send us your up to date information. All WHL members should expect to receive an individualized mailing in the coming weeks. To better address regional needs, the WHL is also pleased to announce the Chinese regional office of the World Hypertension League. Other regional offices are being considered.

Improving World Hypertension League: Recognizing the burgeoning challenge in preventing and controlling hypertension, the Executive of the WHL welcomes suggestions on how it can be improved.

Contact the World Hypertension League:

kimbree.redburn@gmail.com;

admin@whleague.org

Norm Campbell, President, WHL

The Journal of Clinical Hypertension is the Official Journal of the World Hypertension League

Even though *The Journal of Clinical Hypertension* (*JCH*) is based in the United States it has always enjoyed a broad international exposure. It is read in almost every part of the World, and we continue to be delighted that investigators and authors from so many countries submit their new research and commentaries to the Journal. So it is

particularly appropriate that *JCH* has become the official journal of the World Hypertension League. Many issues relevant to the WHL have regularly been addressed in our Journal, including innovative methods for hypertension screening, dietary health policies, and strategies for improving access to care in communities with limited resources. Our relationship with WHL will strengthen this commitment. Indeed, official statements by WHL on these and similar subjects have appeared, or will soon appear, in the Journal. As well, we will soon publish the WHL's authoritative Hypertension Fact Sheet.

Recently, the Journal and the WHL started planning regular contributions to Medscape, the Website widely used by physicians around the World to access new developments in medicine. As this program develops we will be sure to keep our readers and the members of WHL informed about the news items, interviews, and other content we will be posting on Medscape.

In January of this year *JCH* published the *Clinical Practice Guidelines for the Management of Hypertension in the Community.* This major work was a joint commitment of the American Society of Hypertension and the International Society of Hypertension, two organizations with which WHL has strong connections. And in keeping with WHL's mission, these guidelines are being translated into several languages and will be formatted to serve as a curriculum for teaching the practice of hypertension that is relevant to all clinical settings, regardless of local resource levels.

The Journal has been growing rapidly. Downloads of our articles have reached exceptional numbers across all countries of the World. I strongly urge all those who are connected to WHL to regard *JCH* as *your* Journal. Access it frequently and download all articles of interest (this service is free!) and – most important – please submit your articles to us. As a major journal, we observe rigorous adherence to the peer review process, but continue to value submissions on all aspects of clinical hypertension.

One last thing: To keep abreast of what has been published in the Journal and to enable downloading, please sign up to receive emails of table of contents alerts from *JCH*. You can easily do this by visiting our Web site (see below), creating a free Wiley Online Library account, and following the prompts after selecting *Get New Content Alerts.*

My personal regards to you all.

Michael A. Weber, MD Editor-in-Chief, JCH
JCH Web site:
http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1751-7176
Editorial office:
Brittany White, Brittany@jjeditorial.com

Reflections on a Presidency - 2013-2015.

To have been President of the World Hypertension League (WHL) from Sept 2013 to Sept 2015 is a true honour and represents the pinnacle of my career. I have greatly enjoyed working with and learning from many highly committed individuals and especially the executive, board, council and work group members of the WHL. With the support of the WHL executive and board, the WHL has had a paradigm shift from being a conduit of knowledge and expertise between hypertension organizations to striving to be a driving force for the creation and implementation of strategic approaches to control hypertension and the creator of tools and resources for hypertension prevention and control. The need and opportunity for such a transition is provided in the global overview of hypertension provided by the World Health Organization on World Health Day 2013 and in the focus on dietary salt and hypertension in the United Nations targets to reduce uncontrolled hypertension 25% and reduce dietary salt (sodium) 30% by 2025. In the last two years, the WHL has had many transitions and faced many challenges but the WHL council, workgroups, board and executive have prevailed.

To increase capacity, efficiency and to take advantage of financial opportunities, the WHL has had several governance changes. The league 1) moved its' office from Canada to United States, 2) restructured to have a board that represents the major World Health Organization global regions, 3) now has a staff with a Chief Executive Officer (Mark Niebylski) and a Population Health and Economics Specialist (Kimbree Redburn), 4) separated the financial responsibilities from the Secretary General position with a new Executive Treasurer position, 5) updated bylaws, governance policies on conflicts of interest, travel and publications 6) updated mission, vision, values, objectives and goals statements 7) more clearly defined roles and responsibilities of the executive and board have been more clearly defined and 8) initiative regional offices of the WHL. A constantly updated work plan is maintained by the WHL staff. Official working relations with the World Health Organization (WHO) were renewed. Regional offices of the WHL have been opened in China (East Asia), Sub Sahara Africa, Latin America and India to better address culture and languages and expand capacity. There are discussions about regional offices in the Middle East and Eastern Europe.

The WHL has increased efforts for partnership and works in collaboration with member organizations, partner organizations (especially the International Society of Hypertension (ISH)) and various work groups. A needs assessment of global WHL member organizations was undertaken as well as a specific needs assessment of member organizations in Sub Sahara Africa. Several hypertension resources were developed with international partner organizations.

To increase its impact, the WHL has focused on **strategic planning for hypertension control**, **increasing awareness of having a hypertension diagnosis** and on **reducing dietary salt/sodium.**

The WHL developed a template for strategic planning, a global call to action and fact sheet as well as a Sub-Sahara Africa call to action and fact sheet, a manuscript on how to develop a regional/national call to action and fact sheet, a slide deck on strategies to prevent and control hypertension, a slide deck on the fact sheet, a compellation of various national and regional hypertension strategies, and presented workshops and talks on strategic planning. Several of the resources were co-sponsored by the ISH. WHL executive members work to identify best practices in hypertension prevention and control to highlight in the Journal of Clinical Hypertension.

A blood pressure screening work group developed videos, slide decks, written tools and resources to promote blood pressure screening, a policy statement supporting the transition from manual blood pressure assessment to automated blood pressure assessment and is assisting in pilot testing the blood pressure screening resources in multiple countries with diverse economies. The working group is developing a three level certification program for 1) assessing blood pressure in screening programs, 2) for running a blood pressure screening program and 3) for training people to run blood pressure screening programs. Developing a standardized training program for blood pressure measurement and teaching blood pressure measurement to be used in health care professional training programs is also planned. World Hypertension Day (May 17th) has been dedicated specifically to improving awareness of the hypertension diagnosis and to promote screening of blood pressure from 2013 to 2018. Each year the WHL will seek to increase blood pressure screenings for World Hypertension Day. The 2014 World Hypertension Day goal was to screen 100,000 people and over 300,000 were screened. The Goal in 2015 was 1 million people screened and over 2.4 million people were screened. The WHL was excited to establish a partnership with the ISH on WHD moving forward.

A separate WHL working group developed recommended standards for analyzing blood pressure surveys.

To support reduction in dietary salt/sodium, the WHL in partnership with multiple international organizations lead the development of a call to action and fact sheet on dietary salt/sodium. Other WHL resources and actions include development of recommendations for standardized nomenclature on dietary salt/sodium, a call for quality research, collaboration in a weekly Medline science of salt update, development of a process to set recommended dietary salt/sodium research standards, development of power point slide sets to support WHL positions and resources, and critic of weak research studies on dietary salt/sodium. The WHL is also supporting a new regular update of literature on dietary salt in the Journal of Clinical Hypertension. Several of the resources were co-sponsored by the ISH and other international and national partner organizations. The WHL and the ISH support the WHO recommendations for dietary salt to be less than 5 g (sodium 2000 mg)/day (with lower amounts in children proportional to their lower energy requirements) and the United Nations target of a reduction in dietary salt sodium of 30% by 2025.

For communications, the WHL was very excited to establish official relations with the Journal of Clinical Hypertension (JCH)) which has a rapidly increasing impact factor. The monthly electronic JCH was made available to access free of charge to support broad global dissemination of high quality evidence. WHL also has a new editor of our newsletter (Lawrie Beilin), reestablished connections with 25 WHL member organizations, and recruited 15 new member organizations. With the assistance of Past Presidents and Secretary Generals, Georgiann Monhollen and Erika Pisch, the history of the WHL from its inception has been written. A new comprehensive website (WHLeague.org) has been established that hosts the growing number of WHL resources as well as links to many other important resources for hypertension prevention and control. Numerous publications, eight slide sets and two videos have been developed to support key WHL topics.

To recognize people and organizations who have had a substantive impact on preventing and controlling hypertension and in reducing dietary salt sodium, the WHL developed a recognition program. Awards of notable achievement and excellence have been provided since 2014 to global leaders in all regions of the world. The WHL is also planning a Global Leaders Program to facilitate knowledge exchange and best practices between global hypertension leaders.

The conduct of and indiscriminate publicity around low quality controversial research on dietary salt/sodium was an ongoing challenge endangering millions of lives each year and unnecessarily challenging global public health efforts. Excess dietary salt was estimated to cause 300 million people to have hypertension. Much of the controversy appeared commercially influenced and driven by a small number of highly vocal dissident scientists, some of whom are financially conflicted or had conducted weak research and none of whom had substantive public health expertise. Although controversial research had been repeatedly dismissed by the careful systematic processes that develop national and international dietary salt/sodium guidance, it generated much publicity and confused the public, policy makers and even scientists and clinicians who were not familiar with the details of scientific field. In 2015, the WHL lead the formation of a coalition of international and national health organizations to develop recommended standards for conducting clinical and population research on dietary salt/sodium and that planned to oversee regular systematic reviews of the evidence. The coalition decided to have independent governance and will report recommended research standards in early 2016. Hypertension organizations were encouraged to host symposia that feature the best evidence from bench to population on dietary salt/sodium, and also the impact of low quality research and financial interests on research outcomes. Hypertension and cardiovascular organizations were also encouraged to critically examine the systematic reviews of evidence and growing literature on the harms of high dietary sodium.

The WHL continued to face financial constraints and was unable to develop a viable long term business model for ongoing operations. There are recent opportunities for global collaboration that are associated with funding that the WHL was pursuing and

hoped to announce in 2016. The WHL executive was determined to maintain the WHLs' scientific integrity and not enter commercial agreements that undermined its' ability to act in the best interests of the global population.

In Sept 2015, the World Hypertension League Executive and Board will be meeting to develop strategic plans for the organization moving forward. These plans and future transitions will build on the momentum from the Leagues past activities.

The following members of the board have worked hard on behalf of the WHL and the effort to prevent and control hypertension in the reporting timeframe: Dr Liu Lisheng, Past President, Dr Daniel Lackland, President Elect, Dr Xin-Hua Zhang, Secretary General (2014-), Dr A Chockalingam, Secretary General 2013-2014, Dr Peter Nilson, Executive Treasurer, Dr. Ernesto Schiffrin (ISH representative (2013-), Dr. Stephen Harrap (ISH representative 2013-2014), Dr Rhian Touyz (ISH representative 2014-), Dr. V.V.Muthusamy (2013-2014), Dr. Istemihan Tengiz (2013-2014), Dr. Anita Rieder (2013-), Dr. Prabakaran (2015-), Dr Krasimira, Hristova (2014-), Dr. Daniel Lemogoun (2014-), Dr Marcello Orias (2014-) and Dr.Bader Almustafa (2015-).

A special note of thanks to the boards' special advisors, Dr Mark Gelfer and Dr. Darwin Labarthe. I end this section of the WHL history with special recognition to our Chief Executive Officer, Mark Niebylski and Population Health and Economics Specialist, Kimbree Redburn, who have helped bring the WHL to new levels of productivity and impact.

Please visit the WHLeague.org for details of the WHL activities 2013-2015.

Norm Campbell, M.D.

President, World Hypertension League 2013-2015