



WHL·NEWSLETTER

News from the World Hypertension League (WHL).
A division of the International Society of Hypertension, and in official relations with the
World Health Organization.

No. 62, December 1998

Profile



Dr. Philip Yu-An Ding

The Taiwan Society of Cardiology which was founded in 1960, is a non-profit civil association governed by the Civil Code of Taiwan, Republic of China. The objectives of the Society are to promote and encourage the advancement of scientific research and knowledge and

its application to cardiovascular diseases. Currently there are 227 regular members and 704 special members. A regular member must be a board-certified internist, general surgeon, or pediatrician. A regular member may become a special member once he/she fulfills the requirement of two-year fellowship training in the fields of cardiology, cardiovascular surgery, or pediatric cardiology and pass the special board examination (including written and oral tests) held by the Society.

The Society achieves its mission of hypertension control and research through the Council of Hypertension. The members of the Council are designated by the President of the Society. Recently the council contributed significantly to the publication of national guidelines for hypertension treatment, organized by our Department of Health, The Executive Yuan, Taiwan.

Dr. Philip Yu-An Ding was elected the new President of the Taiwan Society of Cardiology for the period 1997-1999. He is the incumbent Professor and Chief of the Division of Cardiology, Veterans General Hospital-Taipei. Academically he has long been recognized as an outstanding researcher in the basic science of hypertension. His current interest is the relationships among platelets, nitric oxide and

WHL News

First Congress of the Yugoslav Hypertension League

Two congresses, the **1st Congress of the Yugoslav Hypertension League** and the **1st Congress on Pharmacotherapy of Cardiovascular Disease** with 500 attendees each, took place from October 4-7, 1998 at the hotel Inter Continental, Belgrade.

The presidents of the scientific committees were Dr. Maksimilijan Kocijancic and Draganja Andolkovic. The 1st congress of the Yugoslav Hypertension League had 15 plenary lectures and 83 abstracts presented on posters. One of the most relevant lectures was "The Yugoslav Hypertension Study" which described scientific research started last spring in six Yugoslav centers with a total of 12,000 patients.

At the 1st Yugoslav Congress on Pharmacotherapy of Cardiovascular Diseases 14 plenary lectures were presented and 36 abstracts were on posters. In addition, 37 lectures on various pharmaceutical products were given during 10 satellite symposia, organized by relevant foreign and domestic pharmaceutical companies.

continued on page 2

Contents	Page
- Profile	
The Taiwan Society of Cardiology	1
- WHL News	
1st Congress of the Yugoslav Hypertension League	1
- Scientific News	
Highlights on Multi-national Trials	3
- WHL Material	2
- People	4
- Calendar	4

Profile continued

Awareness, Treatment, and Control of Hypertension in Taiwan

The First Nutrition and Health Survey in Taiwan was conducted in 1993-1996. By employing a stratified, multi-stage, cluster sampling design, 9,707 subjects, aged 4 years and older, (4,836 men and 4,873 women) were selected from 21 townships in a season-balanced manner. Information regarding the history of hypertension, use of antihypertensive medication, and blood pressure while sitting was collected by trained health teams during house visits.

According to the World Health Organization's (WHO) criteria of hypertension (systolic blood pressure 160 mmHg or greater, diastolic blood pressure 95 mmHg or greater, or taking anti-hypertensive medication), the prevalence of hypertension in subjects aged 19 years and older was 14.3% in men and 12.0% in women. The awareness, treatment, and control rates were 42.5%, 30.6% and 14.5% in men, and 58.4%, 44.9% and 21.9% in women, respectively. The prevalence of hypertension in subjects aged 45 years and older was 27.5% in men and 28.2% in women. The corresponding awareness, treatment, and control rates were 54.8%, 43.7% and 21.5% in men, and 65.8%, 53.9% and 27.1% in women, respectively.

If hypertension is defined as systolic blood pressure 140 mmHg or greater, diastolic blood pressure 90 mmHg or greater, or taking anti-hypertensive medication, the prevalence of hypertension among adults above 18 years would be 28.5% in men and 19.6% in women. The awareness, treatment, and control rates would be 24.8%, 16.9% and 2.7% in men, and 39.3%, 29.7% and 5.1% in women, respectively.

WHL News continued

At the end of the congress the organizing committee gave two awards to the most successful young attendees, an award to the company taking the best care in preventing of hypertension among its employees, and two awards for the best nutritious products, appropriate for a healthy diet for the prevention of hypertension.

Professor Maksimilijan Kocijancic
President, Yugoslav Hypertension League

Profile continued

The prevalence of hypertension among adults above 45 years would be 44.4% in men and 41.8% in women. The corresponding awareness, treatment, and control rates would be 38.9%, 28.2% and 4.9% in men, and 48.3%, 38.3% and 7% in women, respectively.

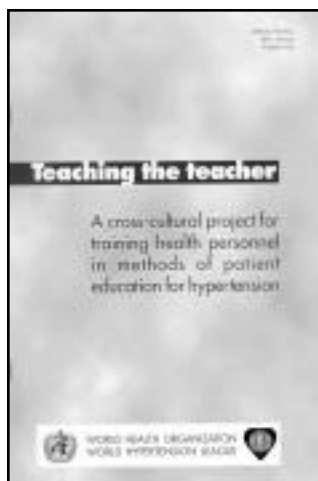
The results reflect only slight improvement in hypertension control compared to the data from a local survey in Taipei City conducted in 1982 among adults above 40 years. Based on the WHO criteria, the awareness, treatment, and control rates were 66.1%, 33.3% and 17.6%, respectively. The current data can be generalized for national hypertension control policy making.



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WHL Material



The **WHL** and the **WHO** published a new report on the "Teaching the Teacher" project. This WHO/WHL project was designed to assess the impact of training health personnel in the methods of patient education upon the control of hypertension in the six participating countries.

The PEP (Patient Education Project) strategy is applicable in various socioeconomic and cultural settings and in different health care delivery systems.

Copies may be obtained from:

Dr. Porfirio Nordet
Medical Officer, Cardiovascular Diseases
Division of Noncommunicable Diseases
World Health Organization

Scientific News continued

Highlights from the 6th International Symposium on Hypertension in the Community (continued)

As reported in Newsletter No. 61, the **6th International Symposium on Hypertension in the Community** was held in Geneva on February 8-11, 1998. It was organized by Professor Talma Rosenthal, Past President of the Israel Society of Hypertension.

Multi-national Trials

SYST EUR: This study on elderly patients with isolated systolic hypertension was carried out on patients 60 years of age and older, who had systolic blood pressure of 160-219 mmHg and diastolic pressure less than 95 mmHg. It was ended a few months before the present symposium. The protocol called for nitrendipine in step 1, followed by addition of enalapril in step 2, followed by addition of hydrochlorothiazide in step 3, compared with patients receiving placebo. The number of cardiovascular events, strokes and severe arrhythmias was more than double in the placebo group.

HOT: The Hypertension Optimal Treatment study, finished in August 1997 was conducted in 26 countries around the world. 19,193 men and women, 50 to 80 years of age, were enrolled to assess the impact of three levels of target diastolic blood pressure: <90, <85 and <80 mmHg on cardiovascular morbidity and mortality in hypertensives. The 5-step protocol began with 5 mg felodipine, followed in step 2 by the addition of a low dose ACE inhibitor or beta-blocker. In step 3, the felodipine was doubled and in step 4 the dose of ACE inhibitor or beta-blocker was increased. In step 5, step 4 drugs were continued but with a different ACE inhibitor or beta-blocker, and a diuretic was added. All patients were randomized also to receive either a low dose of Aspirin (75mg daily) or placebo.

Controlled Onset Verapamil Investigation of Cardiovascular Endpoint (**CONVINCE**). *Fakouhi* described this study as an international, multicenter, prospective, randomized clinical trial which compares the effect of two antihypertensive regimens (one beginning with a physician-directed choice of atenolol or hydrochlorothiazide, and the other, a new chronobiologically-based novel formulation of verapamil) on the occurrence of myocardial infarction, stroke or cardiovascular disease related death in hypertensive patients aged 55

years or more with at least one additional cardiovascular risk factor. Enrollment continues until the goal of 15,000 patients (from 9 countries and three continents) is reached. Although the control of BP is optimized and quality of life is enhanced by the verapamil chronotherapy, results of the international CONVINCE trial are awaited to assess the validity of the chronotherapeutic approach in the clinical management of hypertension.

ALLHAT: The Antihypertensive and Lipid Lowering Treatment to Prevent Heart Attack Trial was described by *Davis*. This, the largest clinical trial in hypertension ever undertaken, is a randomized, double-blind trial in 40,000 high risk hypertensive patients designed to determine whether the combined incidence of fatal coronary heart disease and non fatal myocardial infarction differs among persons randomized to chlorthalidone treatment or one of three alternative treatments - amlodipine, lisinopril or doxazosin. Lipid lowering is being conducted in a subset of ALLHAT patients with cholesterol levels believed to confer an increased risk of coronary heart disease.

The **HANE** Study headed by *Philipp* included 948 patients with essential hypertension treated with hydrochlorothiazide (HCT), atenolol (ATE), nitrendipine (NIT) or enalapril (ENA). In subgroup analysis, elderly patients responded better to HCT and NIT than younger ones. Females responded to ENA better than males. However in each subgroup the highest responder rate was achieved with ETA.

INSIGHT (International Nifedipine Study Intervention as a Goal in Hypertension Treatment): Patients were enrolled if they had a blood pressure above 150/95 mmHg or isolated systolic hypertension above 160 mmHg and if they had at least one more risk factor such as: hypercholesterolemia, smoking, family history of myocardial infarction, diabetes, left ventricular hypertrophy (LVH), stable angina, previous myocardial infarction, peripheral vascular diseases, ST-T changes or proteinuria. 6,452 patients were randomized in 9 countries to a five step strategy based on nifedipine or on diuretics (hydrochlorothiazide + co Amiloride).



Talma Rosenthal
Past President, Israel Society of Hypertension

People



The **Czech Society of Hypertension** was recently established from the former Working Group on Hypertension of the Czech Society of Cardiology. The new President is Dr. Renata Cifková, Vídenská 800, 140 21 Prague 4.

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89

New Phone and Fax Numbers

The WHL Newsletter Office of Publications in Berlin-Buch changed its telephone and fax numbers:

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89

Impressum

The objectives of the WHL are to promote the detection, control and prevention of arterial hypertension in populations. The World Hypertension League (WHL) is a federation of leagues, societies and other national bodies devoted to this goal. Individual membership is not possible. The WHL is a division of the International Society of Hypertension (ISH), and is in official relations with the World Health Organization (WHO).

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Calendar

48th Annual Scientific Sessions of the American College of Cardiology

March 7-10, 1999

New Orleans, LA, USA

Information: ACC, 9111 Georgetown Rd
Bethesda, MD 20814-9845, USA

World Hypertension League 18th Council Conference and Workshop on Hypertension in the Elderly

May 7, 1999

Buenos Aires, Argentina

Information: Dr. Patrick J. Mulrow, Secretary
General, World Hypertension League
Medical College of Ohio, PO Box 10008
Toledo, OH 43699-0008, USA
e-mail: gmonhollen@mco.edu

Fourteenth Annual Scientific Meeting of the American Society of Hypertension

May 16-19, 1999

New York, NY, USA

Information: American Society of Hypertension,
515 Madison Avenue, Suite 1212
New York NY 10022, USA

9th European Meeting on Hypertension

June 11-14, 1999

Milan, Italy

Information: Dr. Zanchetti, Centro di Fisiologia
Clinica e Ipertensione, Ospedale Maggiore
Università di Milano, Via F. Sforza 34
20122 Milan, Italy
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International Conference on Heart Health in Developing Countries

October 10-14, 1999

New Delhi, India

Information: All India Institute of Medical
Sciences, Anasri Nagar
New Delhi 110 029, India

12th Asian-Pacific Congress of Cardiology

October 17-21, 1999

Lahore, Pakistan

Information: Pakistan Cardiac Society
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