



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. 119, June 2008

WHL News

Activities of the Nepal Hypertension Society



Dr. M.R. Pandey

The **Nepal Hypertension Society** was established in January 2004 by doctors and social workers. It was founded to provide awareness of the prevalence, causes, prevention and treatment of hypertension and its complications. The Society became a member of World Hypertension League in September 2004.

In Nepal, hypertension is a rapidly increasing and relatively neglected problem. Almost one in three adults in our population suffer from it.

The objectives of the Nepal Hypertension Society are:

- To make the people of Nepal aware of the dangers of the disease and the importance of prevention and treatment to goal by lifestyle measures and, wherever necessary, supplemented by medications.
- To conduct meetings, seminars and conferences for the prevention and control of hypertension.
- To initiate health camps for identifying and treating hypertensive patients.
- To perform studies and research on hypertension.

Currently, the main activities of our Society are:

- Awareness programs
- Celebration of World Hypertension Days
- Research, surveys and health camps

Hypertension Day 2006 and 2007 were celebrated with several activities such as talk pro-

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WHL News

To promote a stronger platform for research and education in vascular medicine, and to benefit of the patients, the **Swedish Society of Hypertension** and the **Swedish Society of Angiology** have merged into one organization:



The Swedish Society of Hypertension, Stroke and Vascular Medicine (SVM)

Prof. Thomas Kahan from the Karolinska Institutet, Stockholm, Sweden, is the President.

For more information, please see last page. ■

Electronic Newsletter Delivery



<http://www.worldhypertensionleague.org> ■

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Nepal Hypertension Society continued

grams, interaction programs, awareness programs and other activities in Kathmandu as well as in major cities of Eastern and Western Nepal. A hoarding board was prepared illustrating the importance of hypertension and was displayed at a very prominent place in the heart of Kathmandu. A calendar displaying the hoarding board was also prepared and distributed throughout Nepal. We translated the leaflets supplied by WHL into Nepali language and they have been distributed to different places in the country.

Further activities included:

- Publication of articles in national and regional daily newspapers/ magazines
- Talk programs on television/radio channels
- Organization of press meetings at various places
- Distribution of calendars, leaflets, posters, pamphlets, BP record booklets etc.

In addition, a press conference and public meeting was held. Chief Guest was Mrs. Chitralkha Yadav, Vice Chairman of Parliament. Presenters – Dr. Jagadish Agrawal, Dr. Gopal Acharya, Dr. M. R. Pandey (see photograph below). A similar meeting was organized in Dhulikhel, Kavre district by Dr. Rajendra Koju, presenter was Dr. M. R. Pandey.

The research activities have focused on collection and analyses of survey data. The first hypertension survey in Nepal was done in 1982 by Mrigendra Samjhana Medical Trust (MSMT). The prevalence rate was 6% according to the old WHO criteria (160/95). After 25 years, a repeat



Press conference and public meeting on World Hypertension Day 2007 in Kathmandu, Nepal

scientific survey was done by Nepal Hypertension Society in collaboration with MSMT in 2007. We found that the prevalence of hypertension was 33.8% according to the JNC 7 criteria. This means that the prevalence rate of hypertension in the same rural community of Nepal has tripled in the last 25 years.

In addition to the significant rise in hypertension prevalence, significant increases in several risk factors were observed (table1).

Comparison between the two periods showed that salt intake and obesity have significantly increased, whereas tobacco use has significantly decreased. No significant changes in sedentary life style were observed.

Multivariate logistic regression analysis of risk factors showed that hypertension was significantly associated with salt intake, sedentary lifestyle, abdominal obesity and alcohol intake. However, no significant association was found with tobacco use (table 2).

A further analysis of data from hypertensive patients showed that although hypertension awareness has increased from 4.8% to 31.8% and treatment increased from 4.8% to 23.5%,

Table 1: Comparison of prevalence of hypertension and risk factors in 1982 and 2007, rural Kathmandu, Nepal

Indicators	Year		P-value
	1982 (n=1405)	2007 (n=1218)	
Hypertension*	84 (6%)	221 (18%)	<0.001
Salt intake (> 5 gms)	785 (56%)	1090 (90%)	<0.001
Broca's Index (>100)**	169 (12%)	526 (43%)	<0.001
Physical inactivity	157 (11%)	123 (10%)	0.37
Tobacco user	954 (68%)	480 (39%)	<0.001

*According to the old WHO criteria (160/95)
 **Broca's Index = Weight in kg/Height in cm-100 X 100

Table 2: Multivariate logistic regression analysis for risk factors associated with hypertension. Nepal hypertension survey, 2007

Variables	OR	95% CI for OR		P-value
		Lower	Upper	
Salt intake	1.68	1.09	2.59	0.019
Sedentary lifestyle	2.23	1.52	3.29	<0.001
Abdominal obesity	2.23	1.64	3.04	<0.001
Tobacco	1.20	0.93	1.55	0.166
Alcohol intake	1.34	1.01	1.78	0.042

Table 3: Hypertension awareness, treatment and control. Nepal hypertension survey, 2007; N= 412 cases

Hypertension*	n	%
Aware	131	31.8
Treated	97	23.5
Controlled	39	9.5

*According to JNC7 criteria

the hypertension control rate is still low, just 9.5% (table 3). Therefore, greater emphasis should be given to 'Treat to Goal.'

Future plans of the Nepal Hypertension Society are:

- To increase awareness programs in all the 75 districts.
- To persuade the Ministry of Health to give priority to this important, rapidly increasing problem.
- To develop partnerships with other organizations at different levels regarding detection, treatment and control of hypertension.

Our main challenges to be solved are to recruit further financial and man power resources.



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People

At the last General Assembly of the **Peruvian Society of Hypertension**, Dr. Alfonso Bryce was elected President of the Society. Vice President is Dr. Jaime Villena and Secretary General is Dr. José Zelaya. The address remains the same: José del Llano Zapata 331 Of. 704, Miraflores, Lima, Peru.

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World Hypertension Day 2007

Activity Report from Bulgaria

A campaign in the general population for measuring Arterial Blood Pressure (ABP) was held in all Bulgarian university cities on May 17, 2007. The action was organized by the proposal of the University Clinic of Cardiology in Plovdiv and under the leadership of Professor Svetla Torbova, M.D., D.Sci – President of the **Bulgarian League of Hypertension**. This idea of identifying hypertensive patients was born on the base of the great number of newly found or not controlled cases who registered in the Clinic of Cardiology – Plovdiv by its head Ass. Professor Fedya Nikolov, M.D., PhD.

After the 2007 WHD campaign, the population was systematically followed up in summer, autumn and winter covering over 4 000 patients. The newly found hypertensive patients were directed to specialists. The results were made publically known by the media. The project is covering half of the territory of Bulgaria. The idea is to systematically identify hypertensive patients, but not within a campaign, by education and opportunities for adequate ABP measuring at home. The system includes frequently held screenings and medical offices for arterial hypertension.

Offices for every day measuring BP free of charge, situated in some of the municipal polyclinics, were opened. Free of charge courses for population education of self BP measuring at home are organized at these offices. Information about arterial hypertension as a problem, its complications and treatment is included too.

We are pleased by the fact that our last year focus on BP self control and BP measuring at home is the motto of World Hypertension Day 2008. We believe that currently held screenings, population education and BP measuring at home will make it easier to identify and control people with hypertension.

Prof. Svetla Torbova, MD, PhD, DSci
Head of the Bulgarian League of Hypertension

Assistant Prof. Fedya Nikolov, MD, PhD
Head of Clinic of Cardiology – Medical University, Plovdiv

People continued

Professor Thomas Kahan has been elected President of the **Swedish Society of Hypertension, Stroke and Vascular Medicine (SWV)**. Dr. Lisa Kurland is the Secretary: Uppsala University Hospital, Dept. of Medical Sciences, S-751 85 Uppsala, Sweden.

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The address of the **Southern African Hypertension Society (SAHS)** has changed: Ms. Zelda van Schalkwyk, Secretary to Prof. Potgieter, University of Pretoria, Dept. of Internal Medicine, Private Bag X169, Pretoria 0001, South Africa.

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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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The WHL Newsletter is published bimonthly by the World Hypertension League
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ISSN 1013-1639 Production and distribution:
 Georg Thieme Verlag Stuttgart New York

The WHL Newsletter is published with the support of



Calendar

20th Anniversary of NAH Program in the People's Republic of China

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16th Annual World Congress of the International Society for the Study of Hypertension in Pregnancy (ISSHP)

September 20–24, 2008
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Artery 8

September 26–27, 2008
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 113-119 High Street, Hampton Hill
 Middlesex TW12 1NJ, UK
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 E-mail: artery@hamptonmedical.com

2nd World Congress on Controversies in Diabetes, Obesity and Hypertension (CODHy)

October 30 – November 2, 2008
 Barcelona, Spain
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Joint International Conference of the Indian Sections of International Society for Heart Research (SHR) and International Academy of Cardiovascular Sciences (IACS)

December 13–15, 2008
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