



WHL • NEWSLETTER

News from the World Hypertension League (WHL).
In Official Relations with the International Society of Hypertension and the
World Health Organization

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Note from the Editor



Dr. Dan Lackland

While the Pandemic has certainly taken a toll on global health, efforts for global hypertension control have stayed on course, and it is with great pleasure that we present some of that progress in this issue of the Newsletter.

The [link](#) is provided for the supplement 'Global Cardiovascular Disease Prevention and Management' reported studies, generated from the U.S. Centers for Disease Control and Prevention (CDC), the Lancet Commission on Hypertension Group, Resolve to Save Lives, and the World Hypertension League mentorship collaboration initiative to support authors from low- and middle-income countries.

In the newly established **Education Resource Section** is the [link](#) for an exciting potential high impact online certificate course on blood pressure measurement. In keeping with the WHL mission that blood pressure is important at all ages, the [Children's Art Contest](#) will again be a feature along with awareness activities across the globe.

This issue continues the recognition of excellence and achievement in global hypertension control. As [World Hypertension Day](#) was shifted to **October 17** this year, we look forward to receiving the reports from around the world describing the hypertension and blood pressure initiatives implemented in the face of the COVID-19 Pandemic.

Dan Lackland

President's Column



Dr. Zhang Xin-Hua

The delayed [World Hypertension Day](#) on 17 October 2020 is approaching! **The theme of WHD2020 is "Measure Your Blood Pressure, Control It, Live Longer"**. It emphasizes accurate measurement, effective control and a healthy long life! Join with us to share the message with health care providers, patients, and health policy makers, and join the actions to measure and control blood pressure for everyone.

The WHD2020 theme is also part of the core activities of WHL during the next 3 years. We shall continue working with our partners to promote validated devices and correct methods to help measure blood pressure accurately through online certificate courses and tests. We will also continue working with our partners to implement the HEARTS technical package in primary care settings to help capacity building for prevention and control of hypertension and other risk factors as well as major noncommunicable diseases.

Most of the year is over, and COVID-19 is still there. But the same as hypertension, we know how to control it, we just need to do it properly!

Xin-Hua Zhang

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WORLD HYPERTENSION DAY 2020 OCTOBER 17th

Measure Your Blood Pressure, Control It, Live Longer!

This year’s theme focuses on accuracy in blood pressure measurement. Hypertension awareness and early control has become even more crucial as managing hypertension reduces the risk of COVID-19 adverse events and mortality. To continue to reduce the burden of hypertension globally, we hope our members can celebrate WHD 2020 creatively this year, in as many virtual ways as possible given the changed COVID-19 realities, by promoting BP screenings and bringing greater awareness of this year’s theme via media outlets.

Choosing this year’s theme is based on global statistics, indicating that less than - 50% of adults with hypertension (SBP \geq 140 mm Hg, DBP \geq 0 mm Hg, or treatment with antihypertensive medication), worldwide, were aware that they had high BP (<40% in low- and middle-income countries). In some populations, awareness is very low, being <10%. To increase awareness of hypertension, there are two critical components: (1) establish high-capacity community screening programs for recognition of high BP in those at risk, and (2) promote routine measurement of BP by health-care professionals at all clinical encounters.

An important initial step for control of hypertension and achievement of the United Nations 2025 goal for a 25% reduction in uncontrolled hypertension is

to improve hypertension diagnosis. Enhanced BP screenings through activities of the WHD will contribute to achieving this goal. WHL, with their member organizations and partners for national programs, will work to implement WHD screenings globally.



The WHL encourages all members and affiliated organizations to contribute reports on BP screenings recorded between April - October 2020. **A reporting form is available [here](#).** Participants are asked to provide general information on their team, location, number screened, and NCD education provided. Where or when feasible, participants may also report on proportion of known treated hypertensive people screened whose BPs are “controlled” (<140 mm Hg systolic and <90 mm Hg diastolic).

To assist sites in individual screenings, the WHL has developed a series of resources to aid community-based BP screening, available [here](#). In addition to screening protocols, a Train the Trainer module for establishing an evidence-based BP screening site, supporting PowerPoint slide sets and YouTube videos, are available. The WHL has also developed a [policy statement](#) to strongly encourage the use of automated BP devices rather than manual BP readings in nearly all screening and clinical settings.

WHL recognizes that there are complex challenges to the prevention and control of hypertension globally, and, in most settings, efforts to prevent and control hypertension are not comprehensive nor coordinated. To help counter this, the WHL challenges all members and partners to participate virtually in this year’s WHD celebration with rigorous BP measurement and NCD awareness efforts in the community and clinical settings, and to report the results of your activities.

We look forward to everyone's participation and to publishing the results of World Hypertension Day 2020 in upcoming newsletter issues.

HYPERTENSION INSIGHTS FROM 2020 EXCELLENCE AWARDEES

Priorities for Hypertension Prevention and Management in the coming 5 years

By Prof. Yingqing Feng, PhD
Recipient, Liu Lisheng Excellence Award in
Population Cardiovascular Risk Factor Control



Yingqing Feng, PhD, Professor of Cardiovascular Medicine; Director, Department of Hypertension; Director, Center for Cardiovascular Disease Guangdong General Hospital, Guangzhou, P.R. China

With the increasing incidence and prevalence of hypertension in young populations, more studies are needed to help better manage hypertension and reduce its associated cardiovascular events. As well, more studies are needed to better understand the risk factors and the most cost-effective approaches to reduce the burden of hypertension in developing countries.

Considering gender disparities in the management of hypertension globally, more efforts are needed to understand the underlying reasons and develop specific interventions to narrow these disparities by gender.

Recognizing the unresolved questions in terms of the optimal blood pressure targets for populations with diabetes mellitus or chronic kidney disease, more population-level studies and randomized controlled trials are urgently needed to address these questions.

With ageing populations, how to better control blood pressure while reducing the potential risk associated with antihypertensive therapy is a top priority of hypertension management.

The Fight Against Hypertension

By Sonya Y. Angell, MD, MPH
Recipient, Norman Campbell Excellence Award
in Population Hypertension Prevention & Control



Sonya Y. Angell, MD, MPH, State Public Health Officer & Director of the California Department of Public Health (CDPH)

As communities around the world respond defensively to the global pandemic of COVID-19, I am reminded daily how relevant our fight against hypertension has been and remains. Pre-COVID-19, we recognized hypertension as the leading risk factor for death. We rallied to design, implement, measure and disseminate models that would prevent raised blood pressure and save lives. The World Hypertension League has been a key global ally in this effort.

Today, as we battle COVID-19, we have learned that severe outcomes from infection are more likely in those with hypertension and underlying chronic diseases. Higher rates of mortality due to COVID-19 is associated with those populations where the underlying prevalence of chronic diseases are higher, and those populations are already our most disadvantaged. In California in the United States, where I serve as the Director of the State Department of Public Health, Blacks, Latinos, and Native Hawaiian and other Asian Pacific Islanders experience disproportionate deaths from COVID-19 compared with their representation in the State. In short, the resilience of our communities against this pandemic of infectious diseases, and our battle against health inequities in our pandemic world, depends upon us continuing the fight against chronic diseases. Yes, hypertension remains very

relevant today. I could not be more proud to receive the honor of this award, the 2020 WHL Norman Campbell Excellence Award in Population Hypertension Prevention and Control, at this moment in history.

Hypertension and Dietary Salt

By Nancy R. Cook, ScD

Recipient, Graham MacGregor Excellence Award in Dietary Salt Reduction at the Population Level



Professor, Department of Epidemiology, Department of Epidemiology, Brigham & Women's Hospital, Division of Preventive Medicine, Boston, MA, USA

Focusing on sodium research, I believe there is now a general consensus that sodium reduction lowers blood pressure, with larger reductions among those with higher levels. Whether this is enough to translate into population-wide benefits for cardiovascular disease remains controversial, though the best quality studies indicate that such reduction is beneficial. Some demand randomized trials, but these would be difficult, expensive, and nearly impossible to conduct in the general population. To provide more evidence, we could a) collect multiple 24hr urines in more cohort studies, b) conduct methodologic and physiologic research to explain the "J-shaped curve" seen in some studies, c) conduct trials with cardiovascular outcomes in high risk subsets, and d) conduct more genetic research on sodium response.

Ultimately, several aspects of diet affect both hypertension and its sequelae. We must determine the best dietary advice and implementation strategies to achieve a healthy diet that includes lower sodium.

Arterial Hypertension Prevention and Control Program - Cuba

Cuba Ministro de Salud Publica de Cuba
Recipient, Excellence Award in Population Hypertension Prevention and Control



Dr. José Angel Portal Miranda

Cuba has a free, accessible and universal public health system, with a primary health care subsystem that covers the entire country, guaranteeing a permanent health service at the community level. High blood pressure is one of the most prevalent diseases among adults and is the main risk factor for cardiovascular disease, the first cause of death in Cuba. Hypertension can be prevented and controlled, which would reduce its complications, consequent diseases, mortality and associated disability, particularly premature mortality (between 30 and 69 years of age).

The organizational structure of the Ministry of Public Health and the health directorates at all levels have departments for the control of non-communicable diseases in the provincial and municipal centers for hygiene, epidemiology and microbiology. The National Strategy for the Prevention and Control of Non-communicable Diseases and their Risk Factors 2019-2025 includes public policies and coordinated actions for the prevention and control of high blood pressure.

The programme for the prevention and control of high blood pressure in Cuba dates from the late 1970s and is regularly updated and evaluated. It is implemented at all levels of the National Health System. The fundamental actions of the programme are carried out in Primary Health Care with the direct participation of communities, Basic Health Teams, and Basic Working Groups. Hypertensive patients

are dispensed and attended to separately in consultations and in doctor's visits in the field (at home) at least three times a year, which guarantees continuous follow-up.

Medical care is coordinated between the three levels of care and the different levels of intervention: health promotion, disease prevention, early diagnosis, timely treatment and rehabilitation. The human capital is continuously developed, there is a permanent link with the University of Medical Sciences and early insertion of its students in the work with the community, with opportunities for continuing education and postgraduate studies.

The specialized work of the National Technical Advisory Commission on Arterial Hypertension and the Provincial Technical Advisory Commissions, responsible, among other actors, for updating National Guidelines for the improvement of performance, follow-up and periodic evaluation of the results of the implementation of the program, is highlighted. In 2017, the Cuban Guide to Hypertension was updated, resulting in the 2018 Annual Health Award.

The Cuban medical-pharmaceutical industry covers the requirements for access to basic medicines and technologies. There are community pharmacies that dispense antihypertensive drugs at low prices (subsidized by the Government) in a controlled and sustainable manner. Close links with the community and intersectoriality are promoted. All sectors of society are involved. For example, the National Institute of Sports and Recreation has developed the bio-healthy gymnasium initiative to promote systematic physical exercise.

The development of research and surveillance through national surveys with the participation of institutions of the National Health System, such as the National Institute of Hygiene, Epidemiology and Microbiology and the Institute of Cardiology and Cardiovascular Surgery, are other strengths, along with the use of technologies, highlighting the website on high blood pressure (<https://temas.sld.cu/hipertension/>) and mobile applications.

Cuba has the support of the Pan American Health Organization (PAHO) and the World Health Organization (WHO), with which it develops technical cooperation projects. In 2016, our country

joined the HEARTS in the Americas initiative (PAHO/WHO) and is adapting its tools based on global best practices to improve work in the community, with relevant results published in major scientific journals. The main actions implemented include: the use of standardized treatment protocols for the entire country, a strategic effort to expand the use of validated blood pressure measurement devices, the industry's efforts to develop fixed-dose combination drugs in single tablets, and solid training and education work focused on primary health care teams.

There is a close working relationship with the experts and recommendations of the World Hypertension League (WHL), of which Cuba has been an active member since 2000, following the Hypertension Congress held in our country that year, which was attended by experts from the League.

This category of World Best Practice commits us in the immediate future to continue working on the progressive national expansion of advances in the prevention and control of Arterial Hypertension through the extensive network of services of our health system.

Figures: Between the 1980s and 2000, actions were mainly related to the identification of new cases, which led to a gradual increase in prevalence. According to the Third National Risk Factor Survey of 2010, the prevalence of hypertension in Cuba was 30.9%, 72.5% were known to be suffering from the condition, 89.3% were receiving treatment, with 55.1% being controlled between treatments and 35.6% being controlled in the population.

Currently, the aim is to improve control among hypertensive people treated, and in the population in general, with the guarantees offered by the national health system. Recent studies in our country have revealed a 68% control among treated hypertensive people and a 58% population control.



Let's Help Celebrate World Heart Day



**WORLD
HEART
DAY** 29 SEP

World Heart Day is celebrated each year on 29 September to raise

awareness and mobilize international action against cardiovascular disease (CVD), the leading cause of death on the planet. It is the global initiative under which individuals, governments and the entire heart community come together to engage in fun activities, increase public education, and advocate for universal access to CVD prevention, detection and treatment.

This year's campaign theme is 'Use Heart' and special events feature the World Heart Federation's "Heart to Heart" debate series on driving behaviour change related to heart health, starting with "[Breakthroughs in Behaviour Change](#)" on September 29th. Additionally, you can watch their new film [here](#).

For more information please visit:

<http://worldheartday.org>

Facebook worldheartday

Twitter worldheartfed

Instagram worldheartday

CHILDREN'S ART COMPETITION 2020

SUBMISSION DEADLINE October 1, 2020

Information and submission forms [here](#)



Past First Place Winners: Melina Florian & Karla Gallardo from Los Angeles, California

REGIONAL CORNER - LATIN AMERICA

Policy Brief: The Challenge of Reducing Dietary Salt/Sodium Intake in Latin American Countries

By Adriana Blanco-Metzler (INCIENSA), Karol Madriz (INCIENSA) and Eugenia Ramos (IAHF)

This Policy Brief is a product of the multicenter research project IDRC #108167 "Scaling-up and Evaluating Salt Reduction Policies and Programs in Latin American Countries (LAC). 2016-2019", financed by the International Center for Research Development (IDRC) of Canada. The main objective was to 1) promote sodium reduction policy innovations in the food systems of LAC, through the strengthening and evaluation of existing programs, and 2) support new sodium reduction programs, through a consortium of institutions and organizations from Argentina, Brazil, Costa Rica, Paraguay and Peru. The project was led by MS Adriana Blanco-Metzler, from the Costa Rican Institute for Research and Teaching in Nutrition and Health (INCIENSA).

High salt/sodium intake in the diet is associated with an increase in blood pressure. Hypertension is the main risk factor for the global burden of morbidity and mortality from cardiovascular diseases (CDV), especially heart attacks and strokes. In Latin America, the population consumes excessive amounts of sodium, has a high prevalence of hypertension and CDV is the leading cause of death. The five countries participating in the project have endorsed the global goal of reducing salt intake by 30% by 2025 and as well as other important global strategies. Interventions to reduce salt/sodium in the diet are considered by WHO as "Best buys", given that they are one of the most cost-effective measures that countries can take to improve the health of their populations.

As part of the knowledge transfer plan the "Policy Brief: The challenge of reducing salt/ sodium consumption in the diet of the Latin American population" was developed. It consists of an executive summary of the scientific evidence generated in this project by researchers from the five participating countries with the technical assistance of experts and international organizations.



The Project Team

Based on the regional conclusions and recommendations, the main priority actions were identified to address the prevention of hypertension and CVD in LAC by reducing excessive consumption of salt/ sodium. This document provides updated national information, evaluates programs and policies and guides decision-making in health policies and related sectors. The policy brief is available in the Digital Library of IDRC in English and Spanish languages.

<https://drive.google.com/open?id=1ArW6FDYxiElgn4euam65FQBxbzzkzT38>

<https://drive.google.com/open?id=1IRmLF-fwMU7GIKGsr2qH5eIWAKETWnch>



EDUCATIONAL RESOURCES SECTION

Release of online certification course for measuring blood pressure with an automated blood pressure device

By Norman R.C. Campbell, CM MD DSc (hon) FRCPC, Prof. Emeritus, the University of Calgary

The Pan American Health Organization in collaboration with the World Hypertension League, Lancet Commission on Hypertension Group, Hypertension Canada and Resolve to Save Lives has developed a free brief training and certification course in blood pressure measurement. The course is set to be available in English, Spanish, Portuguese, and French on the Pan American Health Organization Website in time for World Hypertension Day, October 17th, 2020. Versions in Chinese and Italian will also be available on the World Hypertension League website.

The course includes a brief video on how to optimally take a blood pressure, followed by a knowledge and aptitude test. For those who pass the test a certificate is issued with a 6-month validity. Answers to the test questions are available for people taking the course to review and there is

also a brief course evaluation that can be filled in. The course takes about 20 minutes and is recommended to be taken every 6 months. The hope is the course will facilitate improvements in the accuracy and reproducibility of blood pressure assessments.

The course can be accessed at [this link](#).

NEW GLOBAL STUDIES ON CV DISEASE PREVENTION AND MANAGEMENT

Dear Colleagues,

We're delighted to announce a [special section](#), just published in the *Journal of Clinical Hypertension*, that features six new studies by investigators from eight low- and middle-income countries.

Most deaths from cardiovascular disease occur in low- and middle-income countries, but there are still relatively few published studies that focus on cardiovascular disease in these countries. Publications in international scientific journals by researchers from these settings remain rare. And publications that focus on the practical details of scaling up effective interventions, rarer still.

Authors who led these studies participated in a mentorship program with experts from the U.S. CDC, the Lancet Commission on Hypertension Group, Resolve to Save Lives, and the World Hypertension League. Congratulations to the authors on their excellent work! We're excited to see the quality of the papers and their potential to improve cardiovascular health. I hope you'll find the special section compelling and informative.

All the best, Tom



Tom Frieden, MD, MPH, President & CEO, Resolve to Save Lives

<https://preventepidemics.org/about/dr-tom-frieden-md-mph/ffrieden@rtsl.org>

Special Section in *JCH* Authored by Investigators from Low- and Middle-Income Countries Fills Gap in Cardiovascular Health Research

Although a majority of cardiovascular disease deaths occur in low- and middle-income countries, cardiovascular disease related publications authored by researchers from these settings are vastly underrepresented in international scientific journals. In 2019, experts from the U.S. Centers for Disease Control and Prevention (CDC), the Lancet Commission on Hypertension Group, Resolve to Save Lives, and the World Hypertension League established a mentorship collaboration initiative to support authors from low- and middle-income countries.

Last month, six new studies by investigators from Latin America, Southeast Asia, South Asia, and Eurasia led or co-led by authors from this initiative were published in the [August issue](#) of the *Journal of Clinical Hypertension* as a special section. The articles assessed implementation of hypertension control and dietary artificial trans fat elimination strategies to reduce preventable deaths from cardiovascular disease in their countries and worldwide. Expanding the global evidence base on hypertension treatment, sodium reduction, and trans-fat elimination strategies is a critical pathway to prevent and manage cardiovascular diseases.



Dr. Dagmara Hering of the Lancet Commission on Hypertension Group discusses a draft manuscript with special section author Ashish Krishna at a scientific writing workshop in October 2019.

Blood Pressure Monitor Accuracy

Provided by Prof. James Sharman
WHL Envoy for the Lancet Commission on Hypertension

To provide resources for consumers of blood pressure monitors, the WHL collaborated with investigators from the Lancet Commission on Hypertension Group to develop [this tool](#) for checking the validation status of blood pressure monitors. The tool is designed for use by the general public, health professionals and policy makers to promote the uptake and use of validated blood pressure monitors.

Please see below for translated versions:

Language	Weblink
Afrikaans	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Afrikaans_final.pdf
Arabic	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Arabic_final.pdf
Chinese (simplified)	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Chinese_simplified.pdf
Chinese (traditional)	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Chinese_traditional.pdf
Danish	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Danish_final.pdf
Dutch	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Dutch_final.pdf
English	https://www.menzies.utas.edu.au/documents/pdfs/Blood-pressure-devices.pdf
French	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/French.pdf
German	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/German_final.pdf
Italian	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Italian_final.pdf

Korean	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Korean_final.pdf
Portuguese	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Portugese_final.pdf
Setswana	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Setswana_final.pdf
Spanish	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Spanish_final.pdf
Urdu	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Urdu.pdf
Vietnamese	https://www.menzies.utas.edu.au/documents/pdfs/blood-pressure-devices/Vietnamese_final.pdf

WHO HEARTS R MODULE – Technical Package for Cardiovascular Disease Management in Primary Health Care



Technical package for cardiovascular disease
management in primary health care

The Risk Based CVD Management module is now complete and can be accessed from the link:

<https://apps.who.int/iris/bitstream/handle/10665/333221/9789240001367-eng.pdf>

There is also a module on Diabetes, as WHO is working to bring attention to Diabetes in observance of the 100th anniversary of the discovery of Insulin:

<https://www.who.int/publications/i/item/who-ucn-ncd-20.1>



SALT WARS: Book Announcement

By Michael F. Jacobson, Ph.D.

Many researchers around the world are probably puzzled about the United States' lack of progress in reducing sodium consumption. As I detail in my recent book, *Salt Wars: The Battle Over the Biggest Killer in the American Diet* (MIT Press), a major impediment has been that the food industry and a few scientists have contended that J-shaped curves seen in several studies of sodium and cardiovascular-disease (CVD) rates have suggested that current intakes of about 3,400 mg/day lead to the lowest risk of CVD. However, follow-up studies by British and Dutch researchers and the 2019 review by the U.S. National Academy of Medicine have convincingly demonstrated that the J-shaped curves derived from methodological flaws. That research, combined with the demise of the vocal Salt Institute, may pave the way for progress.

Salt Wars credits Chile, Israel, Paraguay, and several other countries for taking policy approaches—limiting sodium in certain foods or requiring warning labels on high-sodium foods—and recommends policy steps that the US should take to achieve meaningful sodium reductions. Two observations worthy of special mention. First, widely different sodium contents in different brands of the same food indicate that many companies could significantly reduce sodium (and indicate the appropriateness of voluntary or mandatory limits). Second, an increasing number of companies are replacing one-fourth to one-third of sodium chloride with potassium chloride, with no apparent effect on taste. Those observations suggest that nations should be able to reduce sodium intakes by one-third to one-half within 5 to 10 years.

Michael F. Jacobson, Ph.D., is co-founder of the Center for Science in the Public Interest. Since 1971, that organization has led efforts in the US for better labeling of sodium, healthier school meals, the ban on trans fat, and other nutrition initiatives.

WELCOME TO NEW BOARD MEMBER

Prof. Mayowa Ojo OWOLABI



Professor Mayowa Ojo OWOLABI (MBBS, MSc (distinction), Dr.Med, FMCP, FAAN, FANA, FRCP, FAS) is a recognized global leader in Vascular Neurology, Neurorehabilitation, and non-communicable diseases. He is Professor of Neurology/Stroke Medicine, Dean, Faculty of Clinical Sciences, and Pioneering Director, Center for Genomic and Precision Medicine, at the University of Ibadan, Nigeria. He is a Fellow of the American Academy of Neurology; Fellow of the Nigerian Academy of Science; Fellow of the Royal College of Physicians, and Pallatucci Advocate of the American Academy of Neurology. He is an innovative scientist with several inventions and >250 publications; > 28,000 citations; and a much sought after speaker/chair in >110 international scientific meetings.

Prof. Owolabi leads the largest study of stroke in Africa (SIREN - U54 grant, as PI), pioneered the largest research consortium for cardiovascular diseases in Africa (CHAIR: with >55 000 subjects); and served as co-PI for the first clinical trial to improve blood pressure (THRIVES) among Africans. He is PI, Systematic Investigation of Blacks with Stroke - Genomics Study 1R01NS107900 to unravel the genomics of ischemic stroke in Africans, Co-Investigator and Site PI on CNV And Stroke (CaNVAS 1R01NS114045-01) and PI of the African Rigorous Innovative Stroke Epidemiological Surveillance (ARISES) R01NS115944-01 study.

Working with policy makers and legislators, he developed a stroke prevention and control

manual and bill which has undergone its first reading in the House of Assembly. He is co-chair, Joint Publications Committee, Global Alliance for Chronic Diseases; co-founder and director of the Stroke Control Innovations Initiative of Nigeria (SCIION); initiator of the COUNCIL initiative for control of cardiovascular diseases in LMICs; and a member of the Global Burden of Diseases group.

Prof. Owolabi is a member of the Board of Directors, World Stroke Organization; member of the Presidium, World Federation for Neurorehabilitation; Director of the World Hypertension League Sub-Saharan Africa Region; pioneer Co-Chair of the African Stroke Organization and pioneer Lead Co-Chair, WHO-WSO-Lancet Neurology Commission on Stroke. ■

THANK YOU TO THE WHL ENVOYS

A gracious thank you to our wonderful envoys for their contributions and dedication during the past presidential term!

Edward Roccella, PhD MPH

Envoy for Global Hypertension Education

Donald Dipette, MD

Envoy for Pan American Hypertension Control

John Kenerson, MD

Envoy for Global Faith-Based Hypertension Control Initiatives

Richard Wainford, PhD

Envoy for May Measurement Month

Peter M. Nilsson, MD, PhD

Envoy for Global Diabetes Management and Control

Marc G. Jaffe, MD

Envoy for RESOLVE and Global Hypertension Prevention and Control

Jacqui Webster, PhD, RNutri

Envoy for WHL Salt reduction initiatives

Daniel Jones, MD
Envoy for Hypertension Mgmt Implementation

Bonita Falkner, MD
Envoy for Global Pediatric Hypertension

Peter Nilsson, MD, PhD
Envoy for Global Diabetes Mgmt and Control

George Stergiou, MD
Envoy for Blood Pressure Assessment

James Sharman, PhD
Envoy for the Lancet Commission on HTN

Gbenga Ogedegbe, MD
Envoy for the Hypertension Team



UPCOMING MEETINGS OF NOTE

Virtual Hypertension Scientific Sessions - September 10-13, 2020



Dr. Karen A. Griffin

You do not want to miss this year's 'Virtual' Hypertension Scientific Sessions, Sept. 10-13th, as it promises to provide our attendees with a premier scientific meeting not only focused on recent advances in basic, clinical, and population research on hypertension but also on the most effective means for

detecting, evaluating, and treating high blood pressure across diverse populations. In addition to allowing our attendees to experience our 'virtual' meeting from the comfort of their home or office, the AHA will allow attendees access to the content of our meeting 'On Demand' for a total of 90 days.

This year's Keynote Lecture entitled: Genetics of Primary Aldosteronism will be given by Dr. Ute Scholl from the Berlin Institute of Health and will be followed by Recent Advances Sessions consisting of three organ-directed substudies from Sprint, a controversial debate on dosing of antihypertensive therapy, a focus on Women's

Health Issues, BP Genetics 2.0: Beyond Monogenetic Investigation, and a session on the links between the Renin-Angiotensin System and Coronavirus.



This year's Excellence in Hypertension Research Award will be given to Professor Giuseppe Mancia followed by the Excellence Award Lecture on Friday 9/11/20 @ 11:00 a.m. CST.

National Forum Annual Meeting October 15, 2020



The National Forum provides leadership and encourages collaboration among organizations committed to heart disease and stroke prevention.

This year's National Forum's 2020 Annual Meeting will be held October 15, 2020, virtually, from 8:00 am -2:30 pm ET.

It will include fresh discussions about why, as we face COVID-19, improving cardiovascular health is both a societal and economic imperative and the links between mental and cardiovascular health.

Registration is free; click [here](#) to attend.

**World Health Summit
October 25-27, 2020**



This year's **World Health Summit 2020** will take place from **October 25 to 27** as an on-site conference in Berlin and as a fully digital, interactive conference due to the COVID 19 pandemic regulations. **There will be free digital/internet access to all sessions, with registration via [this link](#).**

The extraordinary health challenges worldwide during this pandemic require more than ever multilateral, cross-sectoral and interdisciplinary solutions. Individual and public health can only be improved by integrating different sectors, professional communities and networks with a strong commitment to alignment and accountability.

The United Nations' *Sustainable Development Goals* and the *Global Action Plan for Healthy Lives and Wellbeing for All with a strong* World Health Organization (WHO) provide the roadmap and continue to be at the center of the discussions. As every year, there are special sessions on cardiovascular disease and Hypertension, including members of the WHL.

This year the World Health Summit is more important than ever with its central topics like Pandemic Preparedness, Vaccination, Digitalization, Universal Health Coverage, Health Systems Strengthening, and Universal Access to Health. You are cordially invited to join us.



CONNECTIONS OF NOTE

LINKS A global community for cardiovascular health

For more information, please go to [this link](#).

2019 WHO Essential Medicines List (EML) for Hypertension Combination Therapy: [Click here](#)

NCD Alliance Newsletter [click here](#)

World Stroke Organization (WSO) Current Newsletter [Click here](#)

Int'l. Society of Hypertension (ISH) Current Newsletter, [Click here](#)

SCIENCE OF SALT WEEKLY –

Publication of weekly Medline searches related to dietary sodium, [Click here](#)

KNOWLEDGE ACTION PORTAL (KAP)

WHO's platform for NCD info, [Click here](#)

RESOLVE TO SAVE LIVES 90-second primer on HTN treatment protocols [click here](#); 90-second primer on digital BP monitors: [click here](#)

ICCPR newly released policy statement on how to promote greater utilization of cardiac rehab: [click here](#)

Mission

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

Board Officers:

Dr. Xin-Hua Zhang (Beijing, China), President
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Secretariat:

Dr. Xin-Hua Zhang, President
E-mail: whleague17@gmail.com
Internet: <http://www.whleague.org>

Editorial Office:

Editor-in-Chief: Dr. Daniel Lackland
Associate Editor: Mary L. Trifault
E-mail: whleague17@gmail.com

Associate Editors:

Dr. Detlev Ganten
Dr. Norman Campbell

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Calendar of Events

World Heart Day September 29th

World Heart Federation

**Debate: The World's Most Urgent Heart to Heart –
Breakthroughs in Behaviour Change**

[click here](#)

AACVPR 35th Annual Meeting - Virtual

September 30 – October 2, 2020

[click here](#)

Heart Talks – A Series of the 5th Global Summit on Circulatory Health

October 8 & 22, November 5 & 19, 2020

[click here](#)

National Forum for Heart Disease and Stroke Prevention

October 15, 2020

[click here](#)

PreHT Conference 2020

October 15-18, 2020

Vilnius, Lithuania

[click here](#)

World Health Summit

October 25-27, 2020

Berlin, Germany

[click here](#)

Hypertension Seoul 2020 in conjunction with the 53rd Scientific Meeting of the Korean Society of Hypertension

November 6-7, 2020

Virtual Conference

[click here](#)

ESO-WSO Joint Stroke Conference 2020

November 7-9, 2020

[click here](#)

PreHT Conference 2020

November 20-22, 2020

Virtual Conference

[click here](#)