Dear Members,

Snow came early to Northern Sweden this year and your two editors are now enjoying plenty of it, sunshine, and around minus 15 degrees. For our new president Stephen Harrap (down under), I suppose it must be quite different situation.

Let me first welcome my new co-editor of Hypertension News, Bo Carlberg. He is introduced on page 11. Bo and I have not yet had time to discuss how we are going to split the work and which changes we are going to make to the newsletter. This will, however, become clearer in the coming issues. Bo and I plan to meet soon with Helen at the Secretariat, whose help with our newsletter is fantastic!

In today’s issue, you will find:

- reports on the ISH meeting in Vancouver
- an important address by the new President
- a ‘Last farewell’ by the Immediate-Past President Tony Heagerty
- in a “HOT off the Press” box on this page you will find reference to a paper comprising an elegant series of analyses of the possible link between blood pressure lowering drugs and cancer by Dr. Bangalore and co-workers.

This paper will be published online this week in Lancet Oncology and will appear in print in January 2011. We also enclose a reference to the Editorial Commentary.

- Six new members joined Council in Vancouver. They are presented on pages 11-14 along with their vision for the Society.

All the best,

Lars H. Lindholm
EDITOR

ISH welcomes Stephen Harrap as the new Society President

I was honoured at the recent ISH Scientific Meeting in Vancouver to assume the role of President of the ISH, following in the footsteps of the great contributions of recent Presidents such as Tony Heagerty and Lars Lindholm.

The position presents numerous challenges, not the least of which is the short timeframe of two years in which to make a difference.

The difference that I’d like to make has two elements. The first is to strengthen our global credentials. The second is to build the ISH through increased numbers of Young Investigators.

Since Vancouver we have been working hard to review the way in which the ISH is organised so that we can achieve these goals.

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HOT OFF THE PRESS

Lancet Oncology


More Global

One of the challenges in linking effectively around the world is to have a structure that recognises the diversity of our constituents and understands the specific regional needs.

This is in large part the work of the ISH International Forum that comprises over 80 of our Affiliated Societies. However, there are gaps in the Forum membership and it can sometimes be difficult to ensure effective communication with so many voices.

To provide comprehensive representation and to distil regional issues, we have created Regional Advisory Groups (RAGs). There are now RAGs established:

1. **Africa**  
   Chaired by Robert Fagard
2. **Asia & Australasia**  
   Chaired by Trefor Morgan
3. **Central & South America**  
   Chaired by Ernesto Schiffrin
4. **Eastern Europe & Middle East**  
   Chaired by Tony Heagerty
5. **Western Europe & North America**  
   Chaired by Michael Weber

Each RAG comprises, where appropriate, a mixture of members from developed and developing countries, so that the whole will be greater than the sum of the parts.

Each RAG will deal with the full range of issues relevant to the ISH goals and activities. They will be points of regional reference for central ISH committees (such as Membership, Awards, etc) that will provide ideas from the regions as well as solutions that place global plans in the right context. I’d also hope that individual ISH members and Affiliated National Societies would also see RAGs as representatives and advocates for issues that they should like to bring forward to ISH.

The other tangible and high-level commitment to global representation has been the appointment (ex-officio) of Dorairaj Prabhakaran from India and Agustin Ramirez from Argentina to the Executive in the roles of International Development. Both these parts of the world hold enormous promise for the ISH. Furthermore, all of the central committees of the ISH comprise members who have been chosen to represent, as best as practicably possible, our diverse international membership.

More Youth

The second major objective is to refresh and sustain the ISH by attracting younger members. Long after my tenure, today’s best and brightest young investigators will be heads of research institutes, clinical opinion leaders and future Presidents of the ISH. The doctoral and early post-doctoral period is critical in making long-term decisions about research directions. I see the job of the ISH as to encourage young investigators to pursue a career the fascinating world of blood pressure research.

To facilitate this I have created a new **Young Investigators Committee** that will be chaired by Bo Carlberg. It comprises some of our outstanding young members from around the world:
- Praveen Veerabhadrappa (India/USA)
- Fadi Charchar (Egypt/Australia)
- Maciej Tomaszewski (Poland/UK)
- Dylan Burger (Canada)

We are also interested in supporting an ISH Future Leaders group that would be the prerogative of the young investigators themselves and will provide a great vehicle for professional and personal interactions between young members of ISH - bonds that last a lifetime.

Other developments

The success of the Lower and Middle Income Countries Committee will continue under the leadership of Robert Fagard, but with a slight change in title to emphasise the educational imperatives. Known now as the Lower and Middle Income Countries Outreach Committee, this committee will continue to develop plans and implement outreach-teaching initiatives in the developing countries. In doing so, it will liaise closely with the relevant RAGs.

The importance of good relationships with the corporate sector is vital, but has been difficult internationally over recent times. Emerging markets have changed the ways in which companies operate and have seen new companies grow. To ensure ethical and productive links we have established a new Corporate Liaison Committee, chaired by Louise Burrell with representation not only from traditional regions such as Europe and North America but also in areas in rapidly emerging regions such as India and China.

Communication is a key to effective operation of any organisation. Hypertension News, now co-edited by Lars Lindholm and Bo Carlberg, continues to fulfil an important role in this regard. At the committee and Council level we shall also facilitate greater interaction through regular teleconferences and distribution of minutes.

The next couple of years hold exciting prospects. With the help of a first class Executive, a committed and involved Council, innovative Committees and dedicated Members I am sure that by the time we gather en masse for Hypertension Sydney 2012, the achievements of this effort will be not only clearly evident, but also highly rewarding.

Stephen Harrap
ISH PRESIDENT

A farewell message from the ISH President 2008-2010, Tony

My two year appointment as President of the International Society of Hypertension came to an end in Vancouver during the Biennial Meeting of our Society.

When I came into office the previous President, Lars Lindholm had done an outstanding job in stabilising the Society’s finances and giving it purpose and direction. I felt that the Society needed to be positioned in the developing world in terms of furthering its teaching and research agenda. As a registered charity the Society can no longer seek to stockpile enormous sums of cash and has become a not-for-profit organisation. This means that we should invest as much as we can in teaching in the developing world: physicians, patients and paramedical agencies so that we can try and contribute as quickly and as effectively as possible to reduce the burden of cardiovascular disease which will inevitably afflict developing nations unless adequate preventative medicine programmes are implemented and awareness is increased.

In order to further these aims, it was important to appoint a vibrant Executive Committee and I was extremely fortunate in having a Vice-President from Japan, Toshiro Fujita to provide me with counsel and advice as well as the Immediate Past-President, Lars Lindholm. In appointing Stephen Harrap as Secretary, again I had someone who was efficient and of course, has taken on the reins as our current President, and an excellent Treasurer in Louise Burrell and a Membership Secretary in Rhian Touyz. I asked Robert Fagard to remain as Chair of our Lower and Middle Incomes Committee as he has done an outstanding job in developing this initiative and of course, expanding our programmes in Sub-Saharan Africa and I invited John Hall to establish our Research Foundation which he has done with exemplary efficiency as ever!

Due to the enormous contributions from these marvellous individuals the Society remains in good financial shape.

Membership has increased to above 1,000 which is no mean feat given that a number of non-subscribers
were removed from our membership lists over the last four years and we have now appointed our first ISH Research Scholar under John Hall’s Foundation Scholarship Scheme in Dr. Kengne and he was honoured at our Awards Ceremony at ISH Vancouver 2010.

As President, I represented the Society in Serbia, Japan, Greece, China, Tibet, Saudi Arabia, Bahrain, Venezuela, Lebanon, Dubai, Egypt and Argentina and also spoke at several ESH meetings.

If I had to express any disappointment it would be the fact that our membership is only growing slowly in the developing world which means that getting more representation from these regions on the Council to assist and advise in terms of how we expand our education programmes is going to be slow. However, we are addressing this as a pressing issue.

In terms of our on-going collaborations with the Lancet and the World Health Organization (WHO) we have begun a series of meetings around a theme of Bridging the Gaps aimed to highlight the implementation of WHO cardiovascular screening programmes in the developing world and trying to identify the problems which beset field forces in carrying out this valuable work. The first of these took place in Vancouver and it is to be hoped that this work will be continued over the next few years culminating in another meeting in Sydney in our ISH Meeting in 2012.

Next year there will be further teaching Faculties in South America and I know that Drs. Schiffrin and Touyz are working hard to develop our links with the Latin American Society of Hypertension.

As I step down from the Presidency I must say that I have enjoyed working with all of the Executive and the Council and I thank them for their valuable contributions over the last two years. I should also thank the Secretariat at Hampton and in particular, Helen Horsfield for her unstinting support and wish the new President, Stephen Harrap every good fortune in his new role. I am more than confident that he will be able to take the Society further in our quest to expand membership and influence the research and teaching agenda for hypertension worldwide.

Tony Heagerty
ISH IMMEDIATE PAST PRESIDENT

ISH participates in the VIII Latin American Congress of Hypertension
7-9 October 2010, Buenos Aires, Argentina

As part of its effort to extend its expertise and contribute to improvement of outcomes of people with high blood pressure throughout the world, members of the leadership of ISH travelled to Argentina to lecture at the VIII Latin American Congress of Hypertension. This event took place from 7-9 October 2010, in conjunction with the XXXVI Argentine Congress of Cardiology.

The meeting, which brought together more than 2,000 cardiologists and experts in hypertension from Latin America, was an opportunity for ISH to sponsor symposia together with members of the Latin
American Society of Hypertension (LASH) and the Inter-American Society of Hypertension (IASH). Representing ISH were Immediate Past President Prof. Anthony Heagerty from UK and Vice-President Prof. Ernesto Schiffrin from Canada. At a Joint LASH – IASH – ISH session Dr. Ramiro Sánchez, President of LASH, discussed Salt and Hypertension, and Dr. Heagerty presented on ISH Guidelines for hypertension, while Dr. Gabriel Navar from USA and President of IASH, talked about Antihypertensive therapy and what has been learned from basic research.

A LASH Plenary Session had Dr. Alberto Zanchetti from Italy speaking on Present Guidelines for Hypertension and Dr. Heagerty on Future Guidelines. Dr. Heagerty also gave a LASH Plenary Conference on what to expect in the future for hypertension. At a Joint Session of LASH and the Argentine Society of Diabetes, Dr. Isaac Sinay from Argentina talked about Insulin resistance as a mechanism in diabetes and hypertension, Dr. Schiffrin on Endothelial dysfunction in hypertension and type 2 diabetes, and Dr. Patricio López Jaramillo from Colombia on Diabetes in women. At a Joint Session of LASH and the Argentine Society of Cardiology Dr. Daniel Piskorz from Argentina discussed LVH and hypertension, Dr. Schiffrin talked about Vascular wall dysfunction and hypertension, while Dr. Eduardo Mele from Argentina talked about Hypertension and CAD.

The ISH leadership met as well with the leadership of LASH and IASH to coordinate future meetings that would allow the 3 societies to collaborate in educational and scientific programs across Latin America.

The joint Cardiology and LASH meetings were very well attended, were characterized by the usual and proverbial Argentine hospitality in the beautiful and bustling capital of Argentina, the Paris of South America, and were an excellent occasion for discussion on mechanisms, diagnosis, treatment, epidemiology and health services research in the field of cardiovascular disease and hypertension. For ISH, this was an opportunity to participate in knowledge transfer in Latin America, which the Society is keen to pursue across the continent in the future, always in agreement and co-ordination with local and regional organizations sharing its ideals of science and evidence-based battle against the scourge of hypertension and cardiovascular disease.

Ernesto Schiffrin
ISH VICE PRESIDENT

The 23rd scientific meeting of the International Society of Hypertension took place in Vancouver from the 26th to the 30th September 2010. The meeting was organised by Simon Rabkin in beautiful Vancouver, and focused on global cardiovascular risk including diabetes mellitus, obesity, hyperlipidemia, and other risk factors associated with hypertension and cardiovascular disease, which are the major causes of death and disability across the world.

The meeting was a great success with a superb scientific program, with invited speakers from numerous countries and many excellent abstract-based presentations. The program was all encompassing including molecular and cellular science, clinical medicine, and population and health policy. The ISH 2010 meeting brought together over 2500 registrants from over 30 countries, providing a platform for exchange of scientific ideas; networking between scientists and opportunities to learn the most up-to-date science in hypertension research.
ISH 2010 was held in conjunction with the annual meeting of the Canadian Hypertension Society, which has long been a very strong supporter and active Forum member of the ISH. In addition to the fantastic science presented at the meeting, ISH 2010 provided an opportunity for Forum members of the Society to meet and to participate in an important interactive special symposium, attended by over 20 representative countries. Many special symposia, breakfast workshops, round table discussions and current guideline sessions enriched the program.

On behalf of the ISH executive, the ISH members and the conference delegates, I would like to thank Dr. Simon Rabkin and his organising committee, Drs Catherine Pang; Arun Chockalingam and Venkat Gopalakrishnan for their tremendous efforts and hard work in ensuring the success of ISH2010. The meeting was enjoyed by all and we look forward to the next exciting ISH meeting to be held in September in 2012 in Sydney, Australia.

Reports follow on:
- The ISH Forum meeting
- The Bridging the Gaps Symposium

Rhian Touyz
ISH SECRETARY

Bridging the Gaps: Reducing Cardiovascular Risk in Low Cost Settings

During the last few decades, the prevalence of risk factors for cardiovascular diseases has increased severely in low- and middle-income countries (LMIC). As a result, the number of individuals suffering from cardiovascular diseases is also increasing.

Most countries do not have the resources to meet this epidemic of myocardial infarctions and stroke. The access to health care differs within populations depending on gender, ethnicity, place of residence and economic situation. Beside lack of resources, there is a need for organizing health services and to educate health personnel to meet the demands from this new situation.

It is difficult to untangle the true public health effects of this cardiovascular epidemic, as many countries do not have reliable vital statistics. Though, it is well documented that, as an example, the age-adjusted stroke mortality already is many times higher in most LMIC than in high-income countries.

The Bridging the Gaps Symposium at the ISH meeting in Vancouver was organised by the ISH in collaboration with the World Health Organization (WHO) and the Lancet. ISH was represented by our President and Past Presidents, Stephen Harrap, Tony Heagerty and Lars Lindholm. WHO were represented by Dr. Shanthi Mendis and the Lancet by Executive Editor, Dr. Stuart Spencer.

Delegates from, Eritrea, Democratic Republic of Congo, Malaysia, Singapore, Sri Lanka, Sudan and Suriname participated in the symposium. They represented Health Ministries, local WHO offices and different parts of the local health care organizations in their respective countries.

The aim of the symposium was to facilitate the exchange of experiences about obstacles and successful methods to tackle the epidemic of cardiovascular diseases. The symposium was preceded by a one-day forum where constraints and feasible solutions in preventing, diagnosing and treating cardiovascular diseases and other non-communicable diseases in low-resource settings were discussed in detail.

Dr. Shanthi Mendis (WHO) emphasised that three quarters of all cardiovascular diseases in low- and middle-income countries could be prevented. She stressed the importance that preventive measures must be changed from a one-disease view to an integrated approach to all risk factors for cardiovascular diseases and also including diabetes.

WHO have developed a program for preventing, diagnosing and treating non-communicable diseases in low-resource settings. This has been put together in the WHO-Package for essential interventions NCD (WHO-PEN) and includes cardiovascular disease, diabetes, COPD/asthma and cancer. WHO-PEN is a practice guideline for preventing, diagnosing and treating these conditions in low-resource settings focusing on primary health care. For cardiovascular
diseases, it includes flow charts for managing individual patients with counselling, risk assessment, medication, indication for referrals etc. Different flow charts have been developed for health workers and doctors. The flow charts recommend only cost-effective and evidence-based measures. The WHO-PEN also includes recommendations about the most cost-effective drugs for treatment off different conditions. For example, hydrochlorothiazide is the recommended first line antihypertensive drug followed by enalapril, nifedipine or atenolol. Many of the delegates are themselves working with WHO-PEN in pilot phases and reported their experiences during the meeting.

From Sri Lanka, it was reported about successful implementation of the WHO-PEN in sixteen health facilities. The project was well organized and also resulted in a number of other actions like the introduction of personal health records.

A major problem in most LMIC is how to get access to all health care facilities for the poor part of the population. In Eritrea, health care is free and the available resources thus can be distributed to those with most need. Within this health care organization, the implementation of the WHO-PEN project has been successful. In Sudan, where 40% of all deaths are due to non-communicable diseases they are working with a combination of free of charge health care and service for fees for those who can afford it.

From Bangladesh, it was reported that 25% of adults have hypertension. Two major obstacles for treatment of hypertension are non-compliance and prescription of expensive non-generic drugs. Patients stop taking their prescribed medication, as they cannot afford the drug. Similar problems were reported from the Democratic Republic of Congo (DRC) where a study showed that only 8% of the included patients with hypertension was treated and had a blood pressure below 140/90 mm Hg. To increase compliance, a project was started that included free antihypertensive drugs. With free drugs, 44% of the patients were controlled (< 140/90 mm Hg). However, one year later, 50% of the patients discontinued their treatment. The reasons for discontinuing treatment are complex and lack of resources is thus not the single factor behind non-compliance.

In Suriname, they have developed a Diabetes protocol for primary health care settings. In this country of half a million inhabitants, they have trained 120 diabetes nurses and have regular training for health care workers on the use of a diabetes protocol. During the last two years, there is also an ongoing nation-wide campaign to promote healthy life style through physical activity, healthy eating behaviour and smoking cessation.

If the goal for individual primary prevention is to include all inhabitants, then primary health care must be the basis for such interventions. This is important in all countries. From countries with more resources, like Bahrain, it was reported about efforts to integrate NCD prevention and management in primary health care. A large “Protect your heart” campaign has been performed in Bahrain. From this country, it was stressed that it is important to use evidence-based methods to get more value for the money.

Major public health interventions were also discussed during the meetings. Some countries have national campaigns against tobacco. This is, however, very difficult in countries where the tobacco industry invest large efforts aimed to increase the number of smokers.

From a population perspective, a reduction of salt intake is advisable and in some countries (e.g. Malaysia) salt intake is very high. It is difficult to decrease salt intake in the population without involving the food industry and there are some experiences of positive results from such activities.

These, and many other issues, were discussed during the meeting. The meeting was successful and probably the first time that representatives from health ministries, politics, WHO, and health care work have met to discuss mutual problems in such detail.

A major player not involved in the discussions was industry. The problems arising from advertising non-generic drugs in countries where most people cannot afford them should be discussed. In many countries, there are significant problems with counterfeit drugs on the market. The various attempts to solve this problem would also be valuable to discuss with the pharmaceutical industry.

Bo Carlberg
Dept of Public Health and Clinical Medicine
Umeå University Hospital, Umeå, Sweden
The ISH International Forum is a consultative body initiated in 1992 to establish effective liaison between the ISH and National and Regional Societies representing the interests of hypertension and associated cardiovascular disease.

It embodies and nurtures the global nature of the Society and provides a unique infrastructure and platform for networking and ‘cross-talk’ between Societies. Currently there are over 85 Affiliated Society members in 73 countries.

**FORUM ACTIVITIES**

A successful meeting of the Forum was held during the ISH Scientific Meeting in Vancouver. It was attended by over 40 delegates representing 28 National or Regional Societies, as well as members of the ISH Council.

Professor Stephen Harrap, one of two ISH Forum Officers and the President-Elect summarised the main activities of the Forum. These include:

- **Meetings of the Forum at the Biennial ISH Congresses:** These provide an opportunity for interaction between the ISH and the affiliated societies, as well as for very direct exchange of information between Societies, usually at high level, between Presidents, secretaries or other office bearers from National Societies.

- **Cross Talk:**
  One of the main purposes of the Forum is to facilitate cross talk between Societies, so all can benefit from the experience of others. Accordingly, short reports from National Societies, summarising the activities of their society since the Berlin 2008 meeting, were circulated as a consolidated document at the Forum meeting in Vancouver and are being circulated to members who could not attend.

- **Hypertension News:**
  The quarterly Society newsletter is an opportunity for Forum members to highlight their news, activities and goals and has been used extensively over the last 2 years. This is currently circulated to all ISH individual and Forum members and an edited version will be added to the ISH open web pages post-Vancouver meeting.

- **Increased membership:**
  The ISH looks to its Forum members to help recruit new individual/regular members of the ISH from their own countries.

- **Forum Poster Prizes**

  [Image of 2010 Form Prize Winners]
  See www.ish-world.com for more information.

Professor Harrap summarised the purpose of the Forum Prizes which were established for this year’s Scientific Meeting in Vancouver 2010. These prizes, each valued at US$1,000 were awarded to the best posters presented at the Vancouver ISH meeting in: (1) Basic Science (2) Clinical Science (3) Population Science. Prizes in all three categories were awarded to each of the Regions that comprise the ISH International Forum.

These regions are: (1) Africa (2) Asia & Australasia (3) Europe & Middle East (4) Latin America.
America (5) North America. These prestigious awards were selected by an independent judging panel. The quality of the submitted abstract and especially the quality of the poster presentation was the basis for the awards. These prizes represent a strong and ongoing commitment by the ISH through the International Forum to recognise and reward the best research from all across the globe. The 15 winners for 2010 were highlighted in a large banner stand shown in the meeting room and in the registration area of the 2010 meeting.

Report from The President

Professor Heagerty acknowledged the contributions of the Immediate Past President, Professor Lars H. Lindholm who gave the Society a newly invigorated purpose and direction, and gave a brief summary of the main objectives he had pursued during his own Presidency. He had focussed particularly on educational activities and on expanding the ISH program in the developing world. Quite apart from his own extensive visiting and teaching program across many countries and regions, the Lower and Middle Income Countries Committee, chaired by Professor Robert Fagard, and its various regional subcommittees had carried out an extensive program of ISH Faculty visits in Africa, Asia, The Middle East and South America.

Professor Heagerty noted the contribution of Council member Dr. John Hall, under whose leadership the Society has established the ISH Research Foundation and under this banner - the ISH Research Scholar Fellowship Award scheme, which had announced and conferred the Inaugural Award at this meeting in Vancouver, to Dr. Andre Pascal Kengne from the Cameroon.

Counterfeit Medication

Interesting comments from Professor Khandaker, from Bangladesh, highlighted the problem of counterfeit medications in developing countries. This reflected the problems posed by the high cost of quality medicines. Counterfeit medication of very low quality usually had very little if any active ingredient. This was a major and growing problem in lower and middle income countries.

Bridging the Gaps

As described elsewhere in this newsletter a very successful “Bridging the Gaps” symposium was held during the Vancouver meeting. Professor Lovic from the Serbian Society complimented the ISH on holding this event and stated it was of major interest for lower and middle income countries. He exhorted the ISH to continue this initiative at future meetings. His comments were strongly endorsed by others at the Forum.

Our thanks are due to Stephen Harrap and Rhian Touyz, the two Forum officers and to Helen Horsfield from the ISH Secretariat for all their hard work to ensure the Vancouver meeting of the Forum was a success.

John Chalmers
ISH FORUM CHAIRMAN
The 2010 annual fall conference of the Councils on High Blood Pressure Research (CHBPR) and Kidney on Cardiovascular Disease was held in Washington DC October 13-16th 2010.

This conference, among the most important and prestigious meetings on hypertension in the world, aims at disseminating recent advances in hypertension research spanning basic science, clinical hypertension and population science. The meeting provides an opportunity for learning, interacting, and networking between scientists interested in hypertension. The 2010 meeting was a great success with a record number of 750 registrants from over 20 countries. A one-day workshop preceding the conference on “New Paradigms in Hypertension Research” included interactive presentations by international experts.

The Workshop included multiple sessions focusing on: receptors, channels and signaling; the new biology of the RAS; immunity; salt and hypertension; and therapeutic approaches - beyond antihypertensive drugs. The Workshop was closed and the meeting opened by Prof Anna Dominiczak of Glasgow who gave a thought-provoking talk on “Genomics, Proteomics, Metabolics and Personalized Medicine in Hypertension: Where are we going?”

The abstract-based program included over 500 reviewed oral and poster presentations and was enriched by the many named award lectures from outstanding investigators in the hypertension community.

Supporting the next generation of hypertension investigators is a CHBPR priority demonstrated by the many new investigator and travel awards supported by the Council. In addition the CHBPR is very proactive in encouraging networking between young scientists and as such has created a new initiative partnership program with the Council for High Blood Pressure Research of Australia where top young trainees from Australia are invited to present at the fall meeting of the CHBPR and our very best trainees in turn are invited to present at the annual meeting in Australia. Such international interactions will provide great opportunities and experiences for our new hypertension researchers. This program, started in 2009, will be further developed to include partnering with other international societies.

The 65th meeting will take place in Orlando September 18-24, 2011. This very special meeting will be a joint conference with the Inter-American Society of Hypertension (IASH) and will include a number of joint sessions in association with the International Society of Hypertension. I look forward to welcoming you all to a great meeting next year.

Rhian M Touyz
Chair and Program Chair of the 64th Annual Fall Conference of the Council on High Blood Pressure Research

www.ish2012.org
The ISH is pleased to welcome six new Council members from 2010; Professors Bo Carlberg (Sweden), Hermann Haller (Germany) Neil Poulter (U.K.), Roland Schmieder (Germany), Jiguang Wang (China) and Michael Weber (U.S.A.). Profiles of five of these members follows.

**Bo Carlberg, Sweden**

**Background:**
I am a Swedish medical doctor and PhD, Associate Professor in Internal Medicine. I work as a Senior Lecturer and Consultant in Internal Medicine at the Department of Medicine at Umeå University Hospital. I am a specialist in Clinical Hypertension (European Society of Hypertension), and have worked with clinical research in the areas of stroke and hypertension for many years. I am a member of the board of the Swedish Society of Medicine.

**Achievements in Hypertension:**
I am interested in the interaction between hypertension and stroke. As a stroke physician, I have a broad clinical experience in the area. As a researcher, I started with my PhD thesis "Blood pressure in Acute Stroke". Since then, I have published a number of studies in the area of stroke and hypertension. My most cited publications are the meta-analyses about atenolol and other beta-blockers published in the Lancet. These publications are well-known among most researchers in the field of hypertension and among most clinicians. I have also written editorial comments for the Lancet.

I have been a member of ISH since November 2006. My most important achievements for the ISH are in Global Health projects. During 2008-2009, I represented ISH at the WHO workshop for preventing non-communicable diseases in Bhutan. Beside my interest in prevention of the emerging epidemic of cardiovascular diseases in developing countries, I am also interested in the process of guideline development. I have published systematic reviews and have experience from systematic development of guidelines for stroke and guidelines for diabetes mellitus in the Swedish National Board of Health and Welfare.

**Contributions to the work of Council:**
I would like to further develop my work with prevention of the cardiovascular epidemic in low-income countries. I hope to continue supporting education for, and organization of, prevention of cardiovascular diseases in low-income countries together with the WHO. In relation to this, I was involved in the planning of the "Bridging the Gap-symposium" that took place at the recent ISH scientific meeting in Vancouver, in conjunction with the WHO and the Lancet. The Symposium was an arena for health ministers and health workers to exchange experiences and discuss best practice in the implementation of screening programmes. It is the intention for this event to be followed by a further Symposium at the ISH 2012 meeting in Sydney. I would also like to use my experience in performing systematic reviews and transforming results from clinical studies into guidelines within the ISH.

**Neil Poulter, U.K.**

**Background:**
Having qualified in 1974 at St. Mary’s Hospital London, I returned to the St. Mary’s campus of Imperial College London in 1997 to become Professor of Preventive Cardiovascular Medicine. Since 2005, I have also been Co-director of The International Centre for Circulatory Health of Imperial College London. In 2008 I was appointed as one of the first 100 Senior Investigators of the National Institute for Health Research (NIHR) in UK and in 2009 was elected as a fellow of the Academy of Medical Sciences in 2010 I became Co-Director of the Imperial Clinical Trials Unit.
Achievements in Hypertension: Between 1980 and 1985, I conducted the Kenyan Luo Migration Study whilst based at the Wellcome Trust Research Laboratories in Nairobi, Kenya. This unique study was designed to identify factors causing the initiation of raised BP associated with urbanisation. On returning to the UK, my hypertension-related research interests included aspects of cardiac structure and function in association with ethnicity and different drug classes and the associations between BP and oral contraceptives, smoking, socio-economic status, lead, foetal programming, HIV and its therapy, and NSAIDS. Between 2003 to 2005 I was President of the British Hypertension Society (BHS). I have been a co-author of over 300 publications mainly on hypertension including several sets of National and International Guidelines (BHS 1999, 2004; WHO–ISH – 2003; ESH–ESC – 2003). I played a major role in the design and conduct of several hypertension trials including ASCOT, ADVANCE, COBRA (Karachi), COSSACS, UMPIRE and PILL Pilot. Other recent interests include the role of single pill combinations on compliance, BP variability on CV outcomes, and the evaluation of the efficacy of doxazosin and spironolactone as add-on agents.

Contributions to the work of Council: I hope that my experience with the BHS and generating hypertension guidelines will be useful in enhancing the quality and globalisation of the work of ISH. I am keen to encourage interaction among national societies and leagues to help deliver optimal preventive and treatment strategies through ISH. I hope to help the council to increase the global membership of ISH and encourage more active hypertension education programmes in those parts of the world where the need is greatest and, associated with that, encourage more collaborative research among and with all the major ethnic groups in whom there are variably limited data.

Roland Schmieder, Germany

Background:
- Medical Training: Department of Medicine, University Hospital in Bonn, Germany
- Board certified (FRG): Internal Medicine, Nephrology, Angiology, and Intensive Care Medicine
- Fellowship of Hypertension: Department of Medicine, Ochsner Hospital, New Orleans, USA
- 1989 Assistant Professor and 1995 Full Professor of Medicine, University Erlangen-Nürnberg, FRG
- since 2001 Vice Chair of the Department of Nephrology and Hypertension, University Hospital Erlangen, FRG.

Key areas of expertise: Hypertension, Nephrology, Non-invasive Cardiology, Kidney Transplantation, Vascular Biology and Medicine, Atherosclerosis.


Achievements in Hypertension: Activities in Societies:
- 2001-2004: Council Member of the German Hypertension Society
- 2002/2005/2010: Fellow of the American College of Cardiology, American College of Physician and European Society of Cardiology
- Since 2006: Council Member of the European Society of Hypertension
- Since 2008: Working Group Member “Hypertension and the Heart”, European Society of Hypertension
- Steering Board Member in National and International Studies (e.g. VALUE, ONTARGET, PHARAO, TRANSCEND, MORE, AURORA, APOLLO)


Founding Member and Director of the Institute of Preventive Medicine at the University Erlangen, Germany. www.ipm-erlangen.de 2001 Founding and Establishing a Clinical Research Center according to the NIH standard in Erlangen, Germany, funded by the Government (DFG) www crc-erlangen.de
Contributions to the work of Council:

Contribution to educational activities:
- Experienced in national and international post graduate training courses, symposia, summer and winter schools, and plenary lectures at international congresses
- Experienced in educational Hands-On courses.
- Activities in designing and creating educational materials for physicians and hypertensive patients.

Contribution in Consensus Committees
1. Writing Member of the European Guidelines 2007 and 2009 of the European Society of Hypertension / European Society of Cardiology,
2. As ESH Council Member responsible for Endorsement of Guidelines, Textbooks and Meetings.

Research Educational Activities: Recruiting new members and supporting research activities, and international exchange of research fellows.

Jiguang Wang, China

Background:
I studied medicine in Henan Medical University (Zhengzhou, China), and graduated in 1987. I trained in cardiovascular medicine in the Cardiovascular Institute and Fuwai Hospital of the Chinese Academy of Medical Sciences (Beijing, China), and in clinical hypertension research under the supervision of Professor Liusheng Liu. I moved to Leuven, Belgium in 1996, and received doctoral degree of medical sciences (PhD) from University of Leuven in 2004. I then returned to China, and was promoted to professor of cardiovascular medicine at Shanghai Jiaotong University School of Medicine in 2005.

At present, I am director of the Centre for Epidemiological Studies and Clinical Trials in Ruijin Hospital, and associate director of The Shanghai Institute of Hypertension.

Achievements in Hypertension:
I started my scientific career with the Systolic Hypertension in China trial (Syst-China), which was the first large trial in hypertension in the Chinese population, under the leadership of Professor Lisheng Liu. I worked for the Syst-China trial for more than 10 years from 1990, and helped in the coordination of database management and statistical analysis and in the publication of international literature.

At present, with the financial support of the Chinese central and local governments and the industry, my group coordinates several multicentre randomized clinical trials and population cohort studies in China. My research interests also include population genetics in hypertension and vascular structure and function.

I have published more than 150 original articles/scientific reviews in hypertension in international literature, and more than 100 in Chinese literature, contributed to 9 books, and lectured extensively at national and international meetings.

As a council member of the Chinese Hypertension League, I participated in the 2005 and current revisions of the Chinese Hypertension Guidelines, and helped in the organization of the 2007 Asia Pacific Society of Hypertension meeting, and the 2009 World Hypertension Congress, both held in Beijing. I am a member of the Working Group on Blood Pressure Monitoring of the European Society of Hypertension (ESH), and participated in the 2010 revision of the ESH International Protocol for Validation of Blood Pressure Measuring Devices in Adults. I serve on the editorial boards of the Chinese Journal of Hypertension as Deputy Editor, the Chinese Medical Journal (English Edition), and Clinical and Experimental Hypertension.

Contributions to the work of Council:
Hypertension, in approximately 160 million Chinese, is a huge burden for China, and should also be one of the areas of focus of the ISH. In the last few years, under the leadership of the Chinese Hypertension League, I have been working hard in research and promotion of blood pressure measurement and control in China, in collaboration with colleagues nationwide and industry, and in communicating with other national and international societies of hypertension.

I would be happy to utilize this network to bring more support for the scientific council of the ISH. I will help in promoting membership of the ISH in China and in neighbouring countries, in raising sponsorship funding from industry, particularly from the fast developing Chinese pharmaceutical and devices industry, and in sharing experiences in controlling hypertension in low and medium resources settings with other countries or regions. I believe that with my life and research experiences in China and Western Countries, I can bring something fresh and strong to the scientific council of the ISH.
Michael Weber, U.S.A.

**Background**

**Current Positions:** Professor of Medicine & Associate Dean, State University of New York Medical College and Editor-in-Chief, The Journal of Clinical Hypertension

**Medical Degree:** Sydney University (MB, BS, MD)

**Training:** Internal Medicine Residency, Nephrology Fellowship, New York University

**Major Positions Before Current One:** Assistant Professor, Hypertension Center, Cornell University Medical College; Professor of Medicine & Chief, Division of Clinical Pharmacology and Hypertension, University of California, Irvine

**Achievements in Hypertension:**
- Lifelong commitment to hypertension research and teaching (over 450 peer-reviewed articles, 100 chapters, edited several books)
- Active member, several Executive/Steering Committees of major hypertension and CV trials
- Presenter, chair and abstract reviewer at scientific sessions of major international and US hypertension and CV societies past 25+ years
- Former President, American Society of Hypertension
- Former Chairman, ASH Hypertension Specialists Credentialing Program
- Fellow, Council for High Blood Pressure Research, American Heart Association
- Currently Editor-in-Chief, Journal of Clinical Hypertension, and serve on editorial boards of several hypertension and CV journals
- United States Food and Drug Administration: Consultant to the Center for Drug Development and Research; former member, Cardiovascular and Renal Drugs Advisory Panel

**Contributions to the work of Council:**

**Improving knowledge and practice:** I have experience in creating outreach programs in hypertension and in establishing practice models to improve patient care. I have been actively involved in the health disparities initiative at my own institution and believe that applying these ideas could enhance the role of ISH in helping train future clinical leaders in key geographic areas. I have had success in training and developing junior faculty in non-traditional settings.

**Administrative Experience:** I have had considerable involvement in the function, structure and economics of major medical organizations and their relationships with government agencies and industry; I am very aware of the initiatives needed to develop diversified funding sources.

**Scientific Meetings:** For many years I have been part of the organizing structures for major meetings in our discipline and would be delighted to contribute my experience to ISH.

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**ISH Research Fellow Scheme for GRADUATE STUDENTS**

**Are you a graduate student working in hypertension or a related field?**

**If so, you could apply to become a Research Fellow of the International Society of Hypertension and obtain all the following benefits AT NO COST:**

- Obtain copies of the quarterly Society Newsletter
- Save on conference registration fees
- Enjoy broader opportunities to build relationships and network with peers and develop your career as a leader in your field
- Have access to the full ISH Membership List (over 1,000 members)
- Be eligible to receive or nominate candidates for the Biennial ISH Awards
- Be exempt from paying the annual ISH membership fee
- Be able to indicate your status as an ISH Research Fellow on your CV

View [www.ish-world.com](http://www.ish-world.com) for further information.
Upcoming Meetings

2011

14th - 16th January 2011, Karachi, Pakistan
14th Annual Symposium of the Pakistan Hypertension League
http://www.phlpk.org/

28th January 2011, Edinburgh, UK
Hypertension - British Pharmacological Society Workshop
http://www.bps.ac.uk/view/index.html

11th - 13th February 2011, Manama, Bahrain
Bahrain Pan Arab & European HTN Meeting
http://www.htn-bh.com/

24th - 27th February 2011, Vienna, Austria
International Conference on Pre-Hypertension & Cardio Metabolic Syndrome
http://www.prehypertension.org/

25th - 27th February 2011, Hong Kong
CardioRhythm 2011
http://www.cardiorhythm.com/

26th - 27th February 2011, Jakarta, Indonesia
Indonesian Society of Hypertension 5th Scientific Meeting on Hypertension
Email: inash.hipertensi@yahoo.co.id

17th - 19th March 2011, Athens, Greece
12th National Congress on Hypertension (Hellenic Society of Hypertension)
http://www.ypertasi2011.gr/

24th - 26th March 2011, Budapest, Hungary
XII International Forum for the Evaluation of Cardiovascular Care
http://www.aimgroup.eu/2011/ifecc/

25th - 26th March 2011, Sofia, Bulgaria
1st European Congress on Arterial Ageing

8th - 12th April 2011, Vancouver, Canada
World Congress of Nephrology 2011
http://www.wcn2011.org/

4th - 5th May 2011, Kuala Lumpur, Malaysia
18th Asian Pacific Congress of Cardiology
http://www.apcc2011.org/

8th - 12th May 2011, Reibild, Denmark
10th International Symposium on Resistance Arteries
http://www.israweb.org/

21st - 24th May 2011, New York, USA
26th Annual Scientific Meeting of the American Society of Hypertension (ASH)
http://www.ash-us.org/

17th - 19th June 2011, Hong Kong
5th Congress of the Asian Society of Cardiovascular Imaging
http://www.asci2011.org/

17th - 20th June 2011, Milan, Italy
21st European Meeting on Hypertension and Cardiovascular Prevention
http://www.esh2011.org/

11th - 13th September 2011, New Delhi, India
6th International Congress on Cardiovascular Disease
Email: Daniel.Pella@upjs.sk

22nd - 25th September 2011, Aarhus, Denmark
ISN Forefronts Symposium - Proteinuria: from glomerular filtration to tubular handling
www.isnforefronts.org/2011

6th - 8th October 2011, Pattaya, Thailand
5th Asian Chapter Meeting of International Society of Peritoneal Dialysis
http://www.nephrothai.org/

24th - 27th November 2011, Taipei, Taiwan
8th Asian-Pacific Congress of Hypertension 2011
http://www.apch2011.tw/

1st - 4th December 2011, Paris, France
Fixed Combination 2011

ISH FUTURE BIENNIAL MEETINGS

2012
30th September - 2nd October 2012, Sydney, Australia

2014
14th-19th June 2014, Athens, Greece

2016
Seoul, Korea
Emails have been sent to all ISH members, inviting them to pay their 2011 membership subscription fees. If you have not done so already, please respond to the Secretariat as soon as possible to ensure that you receive the Journal of Hypertension from the start of next year.

Payment can be made on-line by visiting the membership section of www.ish-world.com. Alternatively, please contact the Secretariat to receive a payment form. (Email: secretariat@ish-world.com)

We would like to take this opportunity to remind you of the Society’s Constitution concerning Membership.

“Members shall pay annual dues in the amount and within the time period determined by the Executive Committee. Membership shall automatically cease upon failure to pay the annual subscription fee for two consecutive years.”

You may like view the Members Area of the website in order to view the following information.

- Past copies of the ISH Newsletter
- Minutes of Society meetings (Council/General Meeting)
- A list of ISH Members with full contact details
- Access to the Journal of Hypertension for those who are eligible for free online access. This free online access is available for new members (since 2006) who reside or work in one of the resource poor countries, zones and territories defined by HINARI or in S. Africa.

To access these pages you are required to register using your membership number, email address and a password of your choice. If you do not know your membership number, please contact the Secretariat.

Please remember to update the Secretariat with your change of contact details, especially your email address. (Email: secretariat@ish-world.com)

We would welcome your assistance to help us recruit new members to the Society. The Society welcomes applications for membership from individuals working in the field of hypertension and cardiovascular disease.

If you have a colleague who would like to become a member of ISH please ask them to complete the downloadable Application Form that can be found in the Membership section of the Society’s website: www.ish-world.com. Applications must also be accompanied by:

1. A written statement by two members of the Society as to the qualifications of the nominee (names of regional/national members can be provided by the Secretariat, or unsupported applications can be reviewed by the Executive Committee)
2. A list of the nominee’s academic degrees, professional positions (a short CV)
3. A list of the nominee’s five best and five most recent publications relating to hypertension or allied fields.

Nominations are initially considered by the Membership Committee and ultimately approved by the Society at its Biennial Scientific Meetings.

The Research Fellowship is a distinct initiative of the ISH for GRADUATE STUDENTS - please see page 14 of this newsletter for more information.
ISH CORPORATE MEMBERS

The ISH would like to acknowledge the support of our Corporate Members:

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