



INTERNATIONAL SOCIETY OF
HYPERTENSION

A Member of the Scientific Advisory Board
of the **World Heart Federation**

Hypertension News

Opus 10 2006

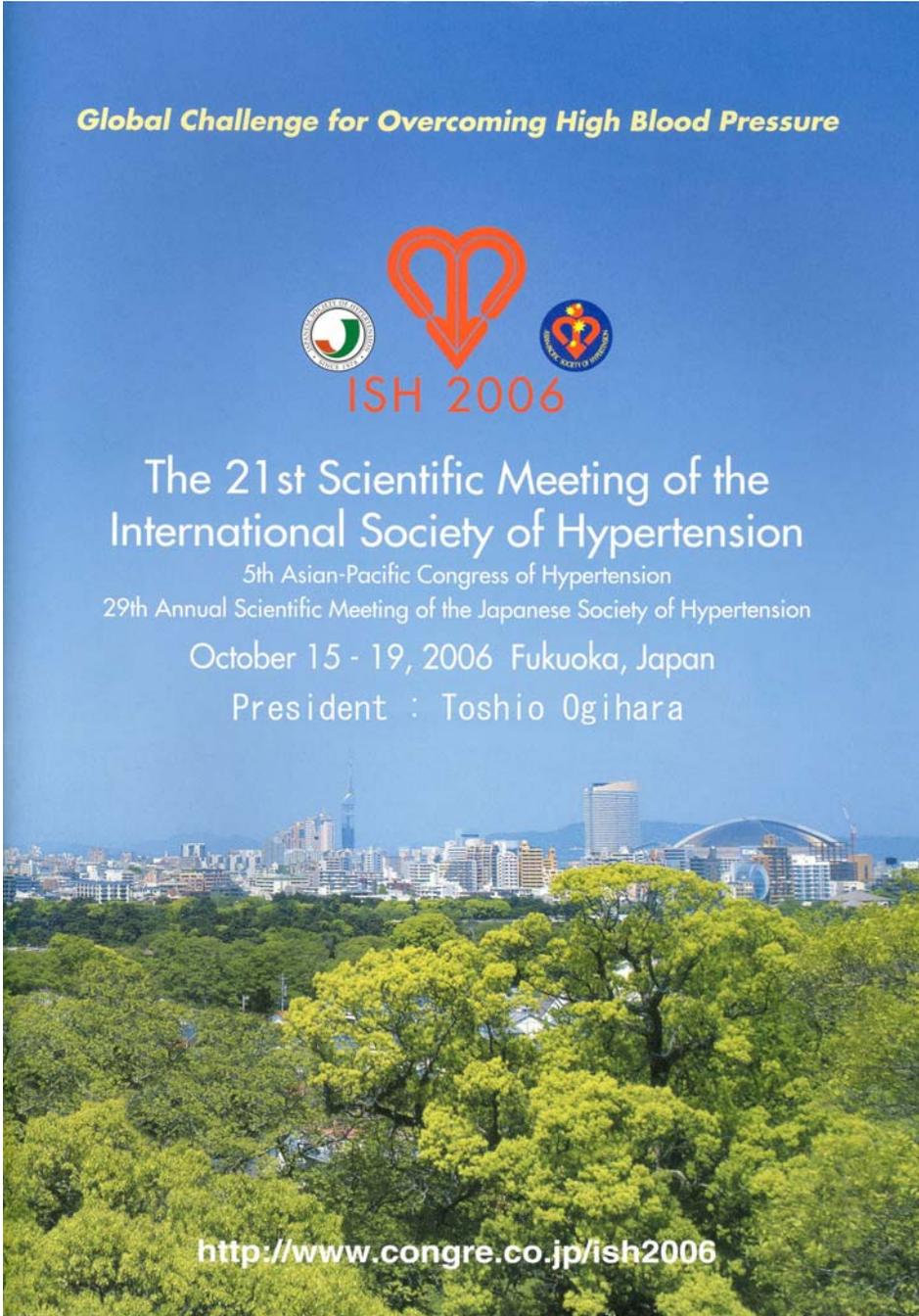
Welcome to Fukuoka 15-19 October 2006!

Global Challenge for Overcoming High Blood Pressure



ISH 2006

The 21st Scientific Meeting of the
International Society of Hypertension
5th Asian-Pacific Congress of Hypertension
29th Annual Scientific Meeting of the Japanese Society of Hypertension
October 15 - 19, 2006 Fukuoka, Japan
President : Toshio Ogihara



<http://www.congre.co.jp/ish2006>

Dear ISH member,

Enclosed, please find Opus 10 of Hypertension News which is the last I will edit. Over the last three years, it has been a pleasure to communicate with you. The reason why I volunteered to take over Hypertension News and make an electronic newsletter out of it was that I felt a need for us on the ISH Council to get closer the ISH members. From the number of responses I have received and from the outcome of the surveys we have carried out, we seem to have attained this goal. In October, after I have taken over as ISH president, a new editor will be appointed. I can promise that we have a good candidate and I am sure that she/he will make our Newsletter worth reading.

Best wishes,

Lars H Lindholm

ISH Newsagent

PS. Please recruit new ISH members. Now is the time to do so! Forms to be found at the end.

From the ISH agent in London

Members area now live!

There is now a secure area for members on the ISH website www.ish-world.com. This area can be accessed by clicking on the link on the right hand side of the ISH homepage. All current (paying) members are eligible to access the Members Area.

Members must register with the site before using the Members Area for the first time. During registration you will be asked to enter your membership number and email address. You will also be asked to choose a password. It is only necessary to register once.

Your registration will confirmed by email when it has been processed. Do not attempt to log in until you receive this email.

Log in. Return to this page and enter your email address and the password you chose during registration. After clicking the Log In button, you will be automatically directed to the Members Area.

Currently Members can update their contact details and view past and current copies of the ISH Newsletter. Further features will be added shortly.

Renewal of Membership

If you have not yet renewed your ISH membership for 2006 now is the time to do so to ensure you continue to receive copies of the Journal of Hypertension and subsequent copies of the Newsletter. **Important Note – ISH Society’s By-Laws 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.”**

Payment can be made on-line by visiting www.ish-world.com Note: **You will be required to quote your membership number** (if you do not know this, it can be obtained by emailing secretariat@ish-world.com). Go to the Membership page and click on Membership Fees. A confirmation email will be sent to you.

ISH PRESIDENT'S ADDRESS

MH Alderman

New York, U.S.A.

The Opening Ceremony of the much anticipated and carefully prepared 21st Scientific Meeting of ISH will take place in Fukuoka on October 15, 2006. The very gratifying level of response at this point before the August 31st deadline for reduced fee advanced registration suggests that the very ambitious goal of 4,000 registrants may well be met. What is certain, however, is the extraordinary scientific quality of the program put in place by the organizing committee. The special advantage of an International conference is, of course, the remarkable span and depth of topics and speakers that can be included. Leading experts from 26 countries and every continent will be featured participants. Oral presentations selected from about 1,700 submitted abstracts, together with poster presentations, will give delegates access to the latest and best of current research covering the full range of blood pressure related diseases – from the laboratory to the bedside to the community as a whole. Finally, “late breaking” sessions will keep us all abreast of the most recent results of major clinical trials. Thus, the science makes attendance a “must” for all those who wish to remain up-to-date in their field.

While science will be the centrepiece in Fukuoka, much more awaits attendees. The opportunity to renew friendships with colleagues from around the world is unparalleled. The city itself is both modern and beautiful. A series of Satellite symposia are scheduled that will give attendees the opportunity to explore more of Japan, as well as to visit other Asian destinations.

This message will be the last I am privileged to write for the Newsletter as President of ISH. Its hard to imagine that more than two years have elapsed since the São Paulo Meeting during which Professor Lawrie Beilin passed on the baton. It has been an honour to serve this distinguished and increasingly relevant society, and to carry on the rich heritage of ISH. Our fundamental strength, “a solid commitment to scientific excellence” continues. Its principal expressions include the Journal of Hypertension, cosponsored with the European Society of Hypertension. Under the leadership of former ISH President Alberto Zanchetti, this grows stronger year by year. As measured by Impact Factor (reinforced by electronic readership), the Journal of Hypertension is firmly in second place among hypertension journals worldwide. The Biennial Scientific Meeting to be held in Fukuoka, as noted above, promises to add further lustre to ISH tradition.

It has been a busy and, I hope you agree, a productive two years. We have successfully transferred administration of Society affairs to the Hampton Medical Group, whose careful and professional attention enhances all of our activities. In addition to our continuing activities, I am particularly proud of the increasing evidence of ISH commitment to development of a science base in low and middle income countries. Professor Robert Fagard has been a principal force behind the emerging focus on blood pressure related diseases in Africa. An ISH faculty visit to six cities in China in 2005, organized by Professors Liu and Chalmers, created an opportunity for further ongoing scholarly ties between East and West. Free access to the Journal has been made available to residents of low and middle income countries through the efforts of the Lippincott Company, publishers of the Journal.

These are already tangible consequences of what is emerging as a area of special emphasis for ISH. I know that that Professor Lars Lindholm is equally committed to expanding this initiative. Our goal is to help build the science base upon which to build an effective prevention and treatment strategy for the less well developed countries of the world. That, of course, is where most blood pressure associated morbidity and mortality occurs.

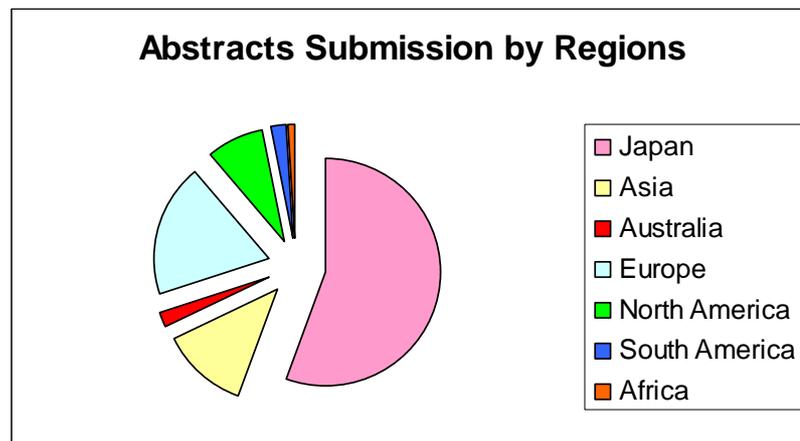
In closing, I want to thank the office holders – Professors Anna Dominiczak, Lawrie Beilin, Alberto Morganti, Toshio Ogihara, and President-elect Lars Lindholm – for their dedicated and unflagging efforts on behalf of the Society. Our membership grows, our finances, while hardly lavish, are stable, and plans for future meetings, beyond Fukuoka, in Berlin 2008, and Vancouver 2010, are progressing satisfactorily. Thus, I congratulate Professor Lindholm and wish him well as he takes the helm of a strong and lively Society to which he is certain to add lustre.

ISH2006 FUKUOKA PROGRESS REPORT – Final Stage

Toshio Ogihara
Osaka, Japan

The opening of ISH2006 is getting closer. The meeting starts on Sunday, October 15 and will run till Thursday, October 19, 2006. The venues are Fukuoka Sun Palace, Fukuoka International Center and Marine Messe. The scheme for ISH2006 Fukuoka originated during 1994–1996, when Professor Kikuo Arakawa was the ISH President. Since then, the scheme has been passed on to the successive presidents of Japanese Society of Hypertension. As ISH2006 is combined with the 29th Annual Meeting of Japanese Society of Hypertension and the 5th Annual Meeting of Asian-Pacific Society of Hypertension, a great event will be launched from Asia.

The theme, “Global Challenge for Overcoming High Blood Pressure”, reflects the current global concerns about controlling hypertension. The sessions of ISH2006 address both basic and clinical science. Thanks to the endeavour and the inputs from the ISH2006 Organizing Committee, the Executive Program Committee and Advisory Members, we have developed the interesting programme. The number of abstracts submitted reached 1,600, of which about 200 were selected for oral presentation. The chart below demonstrates the distribution of the regions’ submitted abstracts.



With a variety of well written abstracts, we were able to develop the excellent programme, such as Late-Breaking Studies and Clinical Update and the other uniquely designed plans for ISH2006 as follows:

1. Late-Breaking Studies and Clinical Update
15:10 – 18:10 Wednesday, October 18, 2006
Sun Palace Main (Fukuoka Sun Palace)

The special feature of most international scientific meetings is the late-breaking session, which presents large-scale clinical trials and basic science research. In the case of ISH2006, the Japanese Society of Hypertension proudly supports the presentations of the two late-breaking studies: *JATOS* (Principal results of the Japanese trial to assess optimal systolic blood pressure in elderly hypertensive patients) and *CASE-J* (Clinical outcomes in hypertensive patients with high cardiovascular risks: Principal results of Candesartan Antihypertensive Survival Evaluation in Japan (CASE-J) study)

The other presentations are: *PHARAO Study*, *JIKEI Heart Study*, *INNOVATION Study*, *SMART*, *J-HEALTH Study*, *ASCOT*, *TROPHY Trials*, *VALUE Trial*, *FEVER Study*, *MEGA Study*. The studies’ designs are reviewed at ClinicalTrials.gov at

<http://www.clinicaltrials.gov/>

2. Outcome Study in Japan
Several ongoing studies in Japan will be demonstrated with poster presentations. We provide a space of 400 m² for poster presentations in the exhibition floor of Marine Messe Fukuoka. It is a good opportunity to introduce the ongoing Japanese studies.
3. "Medical Records of 7,000 Residents in Hisayama-town"
The well-known documentary, "Medical Records of 7,000 Residents in Hisayama-town", will be played in the central part of the poster session area at Marine Messe Fukuoka. It is to be played several times daily.
4. Breakfast Topical Workshop Session Organized by the World Health Organization (WHO)
"How to Address Hypertension in the Developing World – WHO"
7:15 – 8:30 AM Thursday, October 19, 2006
CC 5F-B (5F, Fukuoka International Congress Center)
5. ISH-ISHN Joint Workshop "Hypertension and Kidney"
7:15 – 8:30 AM Thursday, October 19, 2006
CC 2F-B (2F, Fukuoka International Congress Center)
6. World Hypertension League Symposium
"Prevention and Control of Hypertension: a Focus on the Programs in Asian Countries"
8:00 – 13:00 Sunday, October 15, 2006
CC 4F-B (4F, Fukuoka International Congress Center)
7. Encouraging Young Investigators
We are providing Young Investigators Travel Grants to 153 researchers and Travel Grants for Delegates from Countries Suffering Economic Hardships to 80 researchers. These actions definitely assist them to participate in the meeting. In addition, the following awards are to be bestowed: Austin Doyle Award, APSH Fellowship, Clinical Science Award and JSH Award.

Finally, the following researchers of distinction are willing to speak at ISH2006:

ISH Presidential Lecture

MH Alderman (USA) Salt, Blood Pressure, and Cardiovascular Disease

APSH Presidential Lecture

T Ogihara (Japan) Molecular Basis of Essential Hypertension

Plenary Lectures

VJ Dzau (USA)	Renin 2006: A Century of Discovery (<i>JSH Honorary Lecture</i>)
EL Schiffrin (Canada)	Endothelial Dysfunction
AF Dominiczak (UK)	Oxidative Stress and Cardiovascular Disease: Patients, Genomes and Pathways
JE Hall (USA)	Obesity, Adipokines and Hypertension
TW Kurtz (USA)	Pathogenesis and Treatment of the Metabolic Syndrome: Insights from the Mitochondrial Genome
G Mancia (Italy)	Assessment of Total Cardiovascular Risk – Methodology, Problems and Implications for Treatment
R Lifton (USA)	Molecular Genetics of Human Hypertension: From Rare Phenotypes to Common Pathways
LH Lindholm (Sweden)	How Common is Hypertension and What Do We Do about It?
S Nagata (Japan)	Apoptosis and Engulfment

State-of-the-Arts

CM Ferrario (USA)	A Critical Contribution of Angiotensin II in the Pathogenesis of Vascular Diseases and Stroke
T Fujita (Japan)	Oxidative Stress and Insulin Resistance in Hypertension and Metabolic Syndrome
DB Evans (Switzerland)	Life Style Modifications: Economic Evidence and Policy Development
R Jackson (New Zealand)	There Is No Such Thing as Hypertension
L Landsberg (USA)	Feast or Famine: The Sympathoadrenal System and the Metabolic Syndrome
K Shimada (Japan)	Hypertension in the Elderly
T Unger (Germany)	Hypertension, an Inflammatory Disease?
S Harrap (Australia)	The Genetics of Blood Pressure in Humans – A Difficult Business
K Walsh (USA)	Adiponectin Actions on Cardiovascular Tissues
JA Whitworth (Australia)	Glucocorticoids, Hypertension and Cardiovascular Risk
S Stabouli (Greece)	Ambulatory Blood Pressure Monitoring and Target Organ Damage in Pediatrics
FB Pipkin (UK)	Studies of Pre-eclampsia (PE) Today and Its Impact Tomorrow
L Liu (China)	Ethnicity and Hypertension
YK Seedat (South Africa)	Hypertension in Sub-Saharan African Populations: Hypertension in an Unjust World
GM London (France)	Large Artery Damage in Hypertension
S Reddy (India)	T.B.A. (Hypertension in Developing Countries)
S Mendis (Switzerland)	Challenges for Hypertension Control in Developing Countries
ML Tuck (USA)	The Treatment of Hypertension in the Patient with Insulin Resistance
AW Cowley Jr. (USA)	Progress in Understanding the Genetic and Physiological Basis of Salt-Induced Hypertension

Breakfast Topical Workshop – Sessions & Moderators

BW01: Metabolic Syndrome and Hypertension (Basic)	A Mark (USA), K Nakao (Japan)
BW02: New Paradigms of Aldosterone	N Kaplan (USA), T Saruta (Japan)
BW03: Preventing Ischemic Heart Disease: Modern approaches & Hypertension guidelines	N Poulter (UK), T Imaizumi (Japan)
BW04: Vasoactive Peptides	DJ Webb (UK), T Eto (Japan)
BW05: Ethnicity and Hypertension	K Yusoff (Malaysia), S Erdine (Turkey)
BW06: Hypertension and Kidney (ISH-ISN Joint Workshop)	A Morganti (Italy), A Mimran (France)
BW07: Hypertension Control by Subclinical Assessment of Potential Atherosclerosis	M Safar (France), A Takeshita (Japan)
BW08: New Paradigms in Renin-Angiotensin System	T Inagami (USA), M Horiuchi (Japan)
BW09: Polypill vs. Traditional Treatment	PA van Zwieten (Netherlands), DL Clement (Belgium)
BW10: Significance of Sympathetic Nervous System in Hypertension	M Esler (Australia), G Grassi (Italy)
BW11: Gene Therapy and Regenerative Medicine in Hypertension	JK Liao (USA), R Morishita (Japan)
BW12: Hypertension and Stroke	J Reid (UK), S Takishita (Japan)
BW13: Metabolic Syndrome and Hypertension (Epidemiology and Clinical)	J Chan (Hong Kong), K Shimamoto (Japan)
BW14: Functional Genomics and Pharmacogenomics of Hypertension	P Hamet (Canada), GH Williams (USA)
BW15: Hypertension in the Elderly	JA Staessen (Belgium), H Matsuoka (Japan)
BW16: Non-Pharmacological Treatments for Hypertension	

LJ Beilin (Australia), **H Ueshima** (Japan)
BW17: Blood Pressure Variability and Morning Hypertension
T Morgan (Australia), **Y Imai** (Japan)
BW18: How to Address Hypertension in the Developing World – WHO
D MacLean (Canada), **W Pasini** (Italy)

WELCOME!

Report from the Editor of the Journal of Hypertension

Alberto Zanchetti
Milan, Italy

The Journal of Hypertension: A look at 2005

During 2005 the Journal of Hypertension has continued to flourish, and its impact factor has risen to 4,871, so that the Journal now ranks seventh among publications in the area of peripheral vascular disease. Volume 23 (2005) has published 31 reviews or meta-analyses, 56 editorial commentaries, five Editor's corners, and 220 original papers. Among original papers, 22 have dealt with epidemiology, five with blood pressure monitoring, 28 with genetic aspects, 48 with pathophysiology (including oxidative stress, the renin-angiotensin system, the autonomic nervous system, metabolism), 14 with the kidney, 21 with the heart, five with cerebral circulation and stroke, and 30 with the therapeutics of hypertension, including large randomized trials.

The Editors have striven to have all main approaches to hypertension research represented in the Journal's pages, both basic research, mostly experiments in animal models, and investigations in human subjects and patients with hypertension or cardiovascular disease, providing information to be translated into novel approaches to hypertension diagnosis and management. In this task, the Editors have been helped by the fact that the Journal attracts excellent papers from all fields of hypertension research, and have tried to put the stress on all these different fields by commissioning editorial commentaries both on basic research and on clinical papers.

Another important achievement of the Journal during 2005 has been the transformation of its management into a fully electronic system. I realize this may have been a challenge not only for the Editors but for prospective authors as well. As always happens, transformations are indeed accompanied by inconveniences, but I am confident authors and readers have not suffered any substantial difficulties. Most of the burden of change and coping with new management systems, new list of reviewers, etc. has been bravely borne by our editorial assistants (Cinzia Tiberi, Grazia Soriani, Lidia Rossi), whom I would like to thank warmly.

Prospective authors are correct in expecting that the new electronic management system will shorten the time for reviewing, but should also be aware that the increase in submissions encouraged by the speedier management will necessarily result in a decrease in the acceptance rate, which is now about 35% of submitted papers, as the total number of pages available (which has almost doubled in the last ten years) cannot be further increased. The excellent peer reviewing provided by several hundred experts willing to help the Editors with their knowledge and thoughtful advice will continue to be the best instrument for maintaining the standards of excellence achieved by the Journal of Hypertension and making it an open forum for critical scientific debate in the area of hypertension and related diseases.

BHF Glasgow Cardiovascular Research Centre **Annie Vaz, Glasgow, Scotland**

The £12M BHF Glasgow Cardiovascular Research Centre (BHF CGCRC), jointly funded by the University of Glasgow and the British Heart Foundation, will provide state-of-the-art experimental and clinical facilities to further vital research into cardiovascular disease. The aim of the Centre, which opened in December 2005, is to consolidate under one roof internationally recognised cardiovascular research groups and to provide a multidisciplinary research environment. The proximity of a clinical investigation unit to modern laboratories will greatly enhance the integration of research and clinical practice, enabling patients to benefit more rapidly from work at the cutting edge of cardiovascular research.

Professor Dominiczak, who is Director of the new Centre, explained: "The overall aim is to consolidate, on a single site, cardiovascular research effort ranging from the molecular genetic basis of cardiovascular disease through physiology, and pathophysiology to patient-centred studies."

The Centre has state-of-the-art clinical research facilities, physiology and electrophysiology laboratories, well-equipped molecular laboratories with facilities for human and experimental genetics, genomics and proteomics including high-throughput SNP genotyping, gene expression profiling, vascular gene transfer/therapy and a range of other modern molecular technologies. At present eight group leaders, each with large programme grant funding, have moved to the Centre with approximately 140 research and support staff in total.

The Centre will have a national and international impact upon areas of health and welfare that affect the entire community, bringing direct benefits in prevention, diagnosis and treatment. This new building will provide the West of Scotland with a base committed to targeting and combating the many problems associated with heart disease. Examples of ongoing studies are briefly described below.

Genetics of human and experimental hypertension

Although 30–50% of the variation in individuals' blood pressure is attributed to genetic factors; the genes responsible are mostly unknown. Research at the BHFGCRC aims to identify genetic determinants of cardiovascular and cerebrovascular disease using a genome scan strategy, followed by the development of congenic strains and sub-strains to narrow down quantitative trait loci (QTLs) of interest. This strategy will ultimately lead to positional cloning of genes responsible for susceptibility to or severity of hypertension and left ventricular hypertrophy as well as the sensitivity to brain ischaemia. This, combined with more than 5,000 polymorphic microsatellite markers, will lead to a direct translation of the discoveries in experimental crosses to human cardiovascular disease using large family cohorts such as BRIGHT and FASTCARD studies.

The British Genetics of Hypertension study (**BRIGHT study**), funded by the MRC, is a national collaboration funded to identify 1,500 hypertensive families, based upon affected sibling pairs, with the primary goal of undertaking a genome wide screen for blood pressure genes. The MRC BRIGHT study has family-based and case control resources to provide a robust national repository for the evaluation of the genetic basis of hypertension.

In addition to looking for genes involved in blood pressure regulation, researchers have also been involved in another multicentre collaborative study exploring the genetics of pre-eclampsia, (**GOPEC**). Funded by the BHF, the principal objective is to establish a major UK resource for this disease. Pre-eclampsia is a major cause of maternal death and often results in fetal growth restriction or premature delivery. Priority has been given to accurate phenotyping and recruitment of women affected in their first pregnancies, to minimise genetic heterogeneity. The strategy for genetic analysis will be transmission disequilibrium testing (TDT) of both the maternal and the fetal genotype.

With the “rise and rise” of chronic disease such as cancer, heart disease/stroke, mental health, asthma, diabetes and obesity – to name but a few – the BHF Cardiovascular Research Group has been involved in a multi-institutional pan-Scottish proposal called **Generation Scotland**. This is an ambitious and ground-breaking project looking at the ways genetic and lifestyle factors cause cancer, heart disease and mental illness. Leading doctors and scientists from the four Scottish medical schools are driving forward the multi-million pound project, which will follow the health of 50,000 Scots family members over the next generation, keeping Scotland at the forefront of healthcare genetics. The scientific partners have begun collecting health and genetic data from Scottish families to build a rich store of material to explore the causes of common diseases. Families are being invited to help the Generation Scotland team explore not only the inherited nature of some diseases, but also look at how lifestyle, diet and environment influence the development of these conditions like heart disease, dementia, cancer, diabetes and other common diseases. The findings will help identify those at high risk of developing genetic conditions, and allow early treatments with new drugs designed to combat such diseases. The genetic information will also help adapt prescription drugs to individual needs. The facilities and the expertise available in the BHF Cardiovascular Research Centre are ideal for such large-scale projects. Recent television coverage highlighted the role which the Centre, and its staff, will play in this £4.4M research programme, funded by the Scottish Executive.

Membership

If you have not yet renewed your ISH membership for 2006 now is the time to do so to ensure you continue to receive copies of the Journal of Hypertension and subsequent copies of the Newsletter.

Payment can be made **on-line by visiting www.ish-world.com** Note: **You will be required to quote your membership number** (if you do not know this, it can be obtained by emailing secretariat@ish-world.com).

Go to the Membership page and click on Membership Fees. A confirmation email will be sent to you.

Newsletter

Within the next month or so there will also be a members' only area on the new ISH website (www.ish-world.com) where members will be able to read past copies of the ISH Newsletter.

In addition, HMC maintain the electronic ISH membership database and keep it updated with address changes, etc. If you have not already done so, please complete and fax back the form below.

Recruit New Members

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 the International Society of Hypertension, please ask them to complete the downloadable Application Form that can be found on the Society's new website: **www.ish-world.com**. Applications must also be accompanied by:

1. A written statement by two members of the Society (names of regional/national members can be provided by the Secretariat) as to the qualifications of the nominee;
2. A list of the nominee's academic degrees, professional positions, and a list of 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.

If you have any questions regarding your membership, please do not hesitate to contact us.

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