MESSAGE FROM THE CHAIR

Welcome to the 2nd edition of our newsletter.

We hope that you and your loved ones have gotten safely through the pandemic so far and that many of you are experiencing a bit of normal life again. Despite all the tragedy, restrictions and career challenges that the pandemic brought along, I am sure that many of you also experienced positive things in these very unusual times.

One positive is that we were all forced to get familiar with new techniques for running virtual meetings and have become masters of Zoom, Teams, and several other platforms. These virtual meetings – as much as they cannot replace meeting others in person – enabled greater access to scientific events all over the world than pre-pandemic times. Most virtual meetings had much lower or waived registration fees and obviously there was also no need to travel, which is an advantage in terms of diversity by making it easier for scientists from low/middle income countries or colleagues with young children or caring for other family members to participate. The WiHRC had the great privilege to be involved in joint sessions around the globe this year at various national and international societies which you can read about in our newsletter as well as upcoming joint sessions with the Chinese Society of Hypertension and the High Blood Pressure Research Council of Australia are scheduled for later this year.

Finally, WiHRC has started a new initiative, which also profits from the new “Zoom culture“, which consists of one-to-one, 30-minute mentor-mentee online meetings. Places for the 1st round of meetings are already fully booked, but watch out for the call for the 2nd round, which we are planning to announce early next year.

Best wishes and stay safe,

Muscha Steckelings
We had 7500 delegates and 105 speakers from Malaysia and all over the world to join this virtual conference on 13th to 15th August 2021. The objective of the conference was to share experience in stroke management, prevention, and awareness across the world. Three of the ISH Women in Hypertension Research Committee members were invited as distinguished speakers during this conference. Muscha Steckelings from Denmark/Germany delivered her talk on "Intranasal drug delivery for the treatment of stroke"; Alexandra Konradi from Russia gave a talk on "Target blood pressure level and stroke". Mansi Patil from India gave a talk on "Role of nutrition in stroke prevention".

PEAK HYPERTENSION CONFERENCE

Ulrike Muscha Steckelings, Niamh Chapman, Yi-Lin Chen and Anastasia Mihailidou participated on behalf of the Women in Hypertension Research Committee at the annual Pakistan Hypertension Conference. The session featured talks on the neglected health burden of hypertension among women, central blood pressure as a risk factor for women and the role of telemedicine for hypertension management among women.

VIRTUAL MALAYSIA STROKE CONFERENCE

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BRAZILIAN SOCIETY OF HYPERTENSION

The ISH New Investigator, Mentoring and Training and Women in Hypertension Research committees co-hosted a trainee session titled 'Reaching out an international scientific career in hypertension'. The goal was to guide trainees in Brazil on ways to promote their work internationally, as well as obtain international recognition and awards, benefit from mentorship and thrive from collaborations. National and international speakers formed a fantastic panel sharing their experience in research and academia. Ulrike Muscha Steckelings joined by Maria Claudia Irigoyen, Rita Tostes, Neusa Jessen, Augusto Montezano and Francine Marques shared their International and Brazilian perspectives of women in hypertension research.

ECCR VIRTUAL MEETING

The European Council for Cardiovascular Research annual meeting, 8-9 October 2021, with over 130 attendees, included a joint session with the WiHRC focused on 'Cardiovascular Health in Women'. The session was moderated by Ulrike Muscha Steckelings and included talks from Nabila Bouatia-Naji on the genetics of coronary artery dissection, Antoine Ouvrard Pascaud on mineralocorticoid receptor blockade, Alexandra Konradi on the prevalence, awareness and control of hypertension and Christian Delles on preeclampsia.
UPCOMING EVENTS

WIHRC MENTORING CATCH UP

Dr Karla Neves on behalf of the WiHR committee has organised 30-minute online mentoring meetings with young (mentee) and senior (mentor) scientists between 11-22 October 2021. Our aim is to stimulate scientific networking and learning of skills related to career development, scientific independence, and time management. But also, we would like to facilitate a space for discussion not only limited to science, where mentees will have the opportunity to talk freely about any topic they would like. We have 11 exceptional mentors participating in this first event, which will surely be happening again in a near future.

HIGH BLOOD PRESSURE RESEARCH COUNCIL AUSTRALIA ANNUAL SCIENTIFIC MEETING

The HBPRCA meeting (8-10 December 2021) will feature a women in hypertension research supported event with three parts. First, early career researchers will share insights from their career journey including Priscilla Prestes from the ISH Membership Committee. Next, there will be an open panel discussion and lastly, breakout room discussion moderated by members of the WiHR Committee including Pensee Wu, Heddwen Brooks and Anastasia Mihailidou.

ASIA PACIFIC CONGRESS ON HYPERTENSION 2021

The Asia Pacific Congress on Hypertension will include events supported by the Women in Hypertension Research Committee. APCH 2021 is hosted by the Indian Society of Hypertension and can be attended online 24-28 November and in-person New Delhi, India 26-28 November. Abstract submission closes 20 Oct.

ISH PODCAST

Did you know the ISH has a podcast? You can listen to inspiring interviews from people working in hypertension research. Francine Marques and Augusto Montezano run the podcast and have interviewed WiHR members Mansi Patil and Hind Beheiry. Click here to listen to the ISH podcast.
My passion in hypertension developed in 2011 when I was nurse in-charge of a female medical ward at Queen Elizabeth Central Hospital. It was Monday morning, very busy day. To my attention was a very old man sitting by the bedside, holding the hands of an equally old lady who was unconscious. I went to greet him. He responded that I should do everything in my power to bring back his wife. “I can sell all my harvest and live stocks at home and give the money to you if that’s the cost,” he pleaded.

I sat with him and I realised that he did not know his wife had a stroke from high blood pressure and he did not know anything about high blood pressure. He continued to say that he and his wife never had any chance to have their blood pressure checked. I felt pain in my heart, I wished I could do something. I checked his blood pressure and it was 202/123mmHg. I initiated antihypertensives, taught him about diet and lifestyle modification and he was so grateful.

The experience made me think of many more people especially in rural areas who are just living without a chance to have information about BP. In 2012, I attended a training in hypertension management, the knowledge gave me the energy to establish a free hypertension clinic at a health centre where I was working and mentoring health care workers voluntarily.

From there, I also started awareness campaigns and screening of people from hypertension in churches, schools, marketplaces and other social gatherings. British and Irish Hypertension Society (BIHS) funded the project from 2016 to January 2021 and nine more clinics were established.

I started out mentoring healthcare workers from South Lunzu Health Center. I was buying the equipment and medication necessary to run the clinic from 2012 until 2016. In 2016, Jill Bunker, Naomi Stetson and Prof. Simon Thom from BIHS came and mentored me on hypertension management. Nine more clinics were established and BIHS started sponsoring the project from November 2016 to January 2021. So far, I have mentored 26 nurses, 19 clinical officers and 21 supporting staff. Provided with right information, healthcare providers can comfortably run hypertension clinics.

Of all the hypertensive patients we have seen so far, 63% were diagnosed with hypertension through screening at the clinic.

Currently, I am the non-communicable disease coordinator at my workplace. I am involved in stakeholder consultations, policy development and coordinating awareness campaigns and screening in the community. I also provide capacity building and mentorship to healthcare providers and students.
We have trained community health volunteers in prevention and monitoring of hypertension who act as health educators and provide lifestyle counselling. They screen for hypertension and monitor blood pressure and assist the community members to navigate the health system.

To run an effective training session that accomplishes my goals in an enjoyable and engaging way for everyone involved I do the following:

I always tell trainees what I am going to cover with a brief overview of the training subject’s main points. I ask what they know about the subject then I tell them the additional information. In the main portion of the session, I explain key points on hypertension and demonstrate procedures. I also like to use case studies, they make the training so real. I involve trainees by asking them to share their experiences with the training topic. Most of the training involves trainees who are experienced personnel with valuable information to contribute. I always keep my session on track as I start and finish on time. Never do I hold up class waiting for late arrivals. I always run the session according to the schedule and I don’t get too far off course. I put myself in their shoes—or seats and then I solicit feedback on any training session.

Women in Malawi face major challenges to research that include a lack of trust, support and funding to carry out their studies.

Strategies to overcome these challenges include self-confidence, dedication and hard work. However, I do believe that Intrinsic (personal) and extrinsic (institutional) factors are important for improving female scientists’ wellbeing and productivity.

I have been involved in many ISH initiatives. I attended BIHS 2017 annual scientific meeting and learned how to manage hypertension, what new ideas worked and what did not work. I also had a privilege to go to clinics and see how patients are managed. I learnt knew technologies in the management of hypertension and about research methodologies that acted like an eye opener and I am able to apply in my setting.

I have participated in the May Measurement Month campaign (2017-2021) and an associated publication. I have also proposed a review of Nurse-led hypertension and diabetes clinics effectiveness, an intervention I initiated at QECH.

Lastly, I have started registering an organisation “Together Against Hypertension And Diabetes”. This is aimed at capacity building for primary healthcare workers in the management of hypertension and diabetes. Screening, referrals and diagnosis of hypertension and diabetes in the communities will help the under privileged to have free access to hypertension care.
WHAT IS YOUR ROLE AT WORK?

My role is focused on implementing a new health service to improve cardiovascular risk assessment when patients go to have a blood test to measure their cholesterol. As part of this role, I am coordinating a large cluster-randomised controlled trial to recruit nearly 10,000 participants over the next 12-18 months.

My research interests are focused on innovation in health service delivery and embedding research into clinical practice so health services can be rapidly evaluated. Ultimately, my research goal is to identify people at risk of cardiovascular disease so that appropriate intervention can be made to support patients and prevent avoidable deaths.

WHAT CHALLENGES HAVE YOU FACED?

I have dyslexia and really struggled with writing during the first two years of my PhD. I found it immensely frustrating that I could talk about research, but I couldn’t put that down in writing. The impact of dyslexia will most likely be a challenge I will face throughout my career, but I feel supported by colleagues and have developed strategies to overcome those challenges.

HIGHLIGHT SOME OF YOUR RESEARCH

For my PhD work, I established a new technology-based health service to provide participant information, obtain informed consent, deliver a clinical questionnaire and measure blood pressure all self-directed by the patient in the waiting room of a busy clinical environment. This pilot work included proving that the service was feasible and conducting a randomised comparison of a multimedia-based consent process, where a researcher does not need to be present to provide participant information to the traditional paper-based approach with a researcher present.

We have since used these findings to secure national funding and are conducting a large randomised controlled trial to determine if the new health service improves the management of patients. I have really enjoyed building on my early research work, making refinements and then applying this knowledge on a larger scale.

To read more visit the WiHRC ISH Spotlight webpage!
HYPERTENSION NEWS

The current issue of Hypertension News features several articles focused on sex difference in hypertension. The featured articles include considerations on the analysis of sex and gender-based differences in hypertension from Dylan Burger, an overview from Muscha Steckelings, insights into the epidemiology and risk aspects on hypertension in females compared to males with the Asian, African, Latin-American, and Western perspective provided. We encourage you to read the full issue for an excellent introduction to the considerations of sex differences in hypertension.

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THANK YOU

Thanks for reading and remember, we'd love to hear from you. Write to us: WiHRC@ish-world.com or check out our webpage.