

# INTRODUCTION FROM THE PRESIDENT

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This will be my last introductory piece for *Hypertension News* as President of the ISH. My two-year term as President will soon come to an end at the close of our ISH Congress in Cartagena Colombia in September. Time really does fly by and it is at times like this one reflects on what we have achieved as a leadership team of the ISH during my term as President. Firstly, I have had the advantage of working with some wonderfully committed and supportive people as part of our Executive committee and wider Council. I was also fortunate to have been secretary of ISH during the presidency of my predecessor, Maciej Tomaszewski. He took over the Society leadership at a challenging time for us all, in the midst of the Covid Pandemic. We set about rebooting and modernising the ISH. Reflecting the fact that the way academic clinical societies are supported and function had to change or risk becoming irrelevant in a fast-changing world. Much of this early work is unglamorous and happens behind the scenes but is important. A key issue for me has always been robust governance and clarity of purpose. One of the early challenges was recognising that our constitution and Charity status was out of date with modern requirements. We had to rewrite our constitution to be compatible with ISH becoming an incorporated Charity by the Charity commission. This kind of thing sounds dull. It was dull and tedious but vital to limit the future liabilities of the ISH and its officers. This process began during Maciej's Presidency and has now been completed during my term.

It was also important to modernise and professionalise our communications and extend its reach into multiple Platforms. Our appointment of Matt Chorley, a media and communications professional, that I had worked with in my role as Director of the Biomedical Research Centre at

University College London (UCL) Hospitals and UCL, was an inspired move. It has transformed our web presence, social media outputs and rapid professional response to media enquiries. I also wanted to bring *Hypertension News* back into the heart of the ISH as the centre piece of the ISH outputs. I hope you will agree, *Hypertension News* has been transformed and is an outstanding source of contemporary information about global research and clinical activities in hypertension. That transformation is in large part down to the work of Matt and Helen, supported by our Executive committee and the many authors who have been remarkable in supporting *Hypertension News* with their expert articles and viewpoints. In addition, our monthly ISH e-bulletin serves a different function to *Hypertension News*, but an equally important one, by providing up to the minute news about ISH activities, as well as events and happenings in hypertension and the work of our partner societies across the world.

To improve our communications with the membership and our membership portal, we also sourced a new provider for our web presence and we were delighted to appoint Canica from Argentina who have professionalised our web presence including the [membership portal](#), but this is just a start and there will be so much more to come. A major impetus to improve our web presence was to refresh our membership. This has been a major mission I set for the ISH. This presented a number of challenges, not least, the complexity of our previous membership tiers and cost of membership, which was prohibitive for many potential members in lower income regions of the world. This meant they were not able to join our global society and benefit from the outputs of the ISH and the opportunity to interact with the wider ISH community. As an International Society, I

concluded the model was flawed. We had to allow people interested in hypertension, from wherever they reside, to become members. So, under the expert leadership of Débora Colombari from Brazil, we have transformed our membership fee structure. This also includes a new category of Associate Membership, that is free and allows anybody with an interest in hypertension, including patients and the public, to join the ISH, from wherever they are in the world. Our Member category does involve a fee for some countries but a lower fee than before and this category of membership is free currently for those based in Ecuador, Sudan and Ukraine and trainees, and allows our Members to be actively involved the Society and stand for office and vote for officers and in various constitutional matters. The purpose is simple, to enable anybody with an interest in hypertension to join the ISH. The mission is for the ISH to become the largest hypertension society in the world, which it should be as a global Society. At the outset of my Presidency, I set the Society a goal to achieve this ambition and we are well on our way, with over 500 new members joining since we launched the new membership portal in April this year. There is no reason why this shouldn't grow to many thousands in the years to come.

Another key mission I outlined in my aims as President was to play a much greater role in on-line global education for hypertension. Producing high quality, trusted and respected educational outputs on all aspects of hypertension at different levels, from basic knowledge to specialist insights. This has been superbly led by Erika Jones from South Africa, and her team. We have built this from scratch and having reviewed some of the early production, I am confident this will be a terrific resource for our membership. It is only the beginning and we will need to continue to support this in the years to come. It is possible that this could eventually be used for credentialing of expertise in Hypertension clinical practice and will also be an excellent platform for future symposia.

A third mission was to build on the excellent position paper initiative started under Maciej's Presidency and develop specialist focus groups from the ISH membership, to generate detailed outputs on

contemporary topics of interest. The outstanding ISH position paper on Lifestyle interventions for hypertension, expertly led by Fadi Charchar from Australia, the ISH Treasurer, was published in 2023. Another excellent position paper on "innovations in blood pressure measurement" led by Kazu Kario from Japan will soon be published in the Journal of Hypertension. These are examples of how our global membership community can work together to generate high quality and impactful research outputs of immediate relevance to clinical practice.

A fourth mission was something I am personally passionate about, notably "empowering our patients" to improve the detection and treatment of hypertension. Despite endless numbers of guidelines across the world, some of which I have had the privilege to lead and/or contribute to, we have to concede, that guidelines have not worked. By that I mean, they haven't worked in dramatically improving the poor detection, treatment and control rates for hypertension, which have remained stubbornly and depressingly poor in many countries, including those with well developed health care systems. They have of course worked in boosting citations and as centre pieces of scientific congresses but surely that cannot be their principal purpose. I am not sure we need any more of the conventional guideline outputs which have been largely targeted at health care professionals and have had too little focus on implementation and patients. So, we need to produce an output for patients, that explains to patients why controlling blood pressure is so important, what should be happening to them if they are suspected of having hypertension, what their doctor or health care professional should be doing to assess the severity and impact of their blood pressure, what treatment they should be receiving as optimal therapy and what good blood pressure control looks like. Empowering patients in this way will give them more control over their treatment, will help overcome clinical inertia, should improve adherence to treatment, and shift the epicentre of control of blood pressure to a patient-centred partnership. The opportunities afforded by digital and remote technology, data science and AI and better patient engagement, provide an outstanding opportunity to empower

our patients to improve the treatment of blood pressure through new systems and models of care. Under my leadership, the ISH is leading a programme of work in this area, which will soon generate a different type of guideline, a guideline for patients, that can be adapted to local treatment capabilities across the world.

There are many other aspects of the work of the ISH we have modernised. We established a new Hypertension awards committee which is Chaired by the ISH secretary and involves adjudication of our awards by all members of the ISH Council. We have new leadership of many of our committees and regional advisory groups which has invigorated their work and I am deeply grateful to all of them.

A key function of the ISH leadership is oversight of the biennial ISH congress. I took over as President at the end of the last ISH Congress in Kyoto in October 2022. During the past 2 years, we have completed the expressions of interest process and awarded the 2026 ISH Congress to Dubai, which is another new venue for the ISH Congress. Alongside and foremost in our minds has been the development of the forthcoming ISH congress in Cartagena, Colombia, in September. Those who have participated in the leadership, development and hosting of a major congress will know what a major undertaking this is and the huge amount of work it involves. This has been a thread that has been at the forefront of all of our efforts throughout my Presidency but we are all especially indebted to the incredible devotion and hard work of Dagnovar Aristizabal the Executive President of the ISH Congress 2024 and Cesar Romero the programme Chair. It promises to be an outstanding meeting in a wonderful location and I look forward to seeing many of you there. It is at the end of that meeting that we will also launch the Cartagena Declaration encouraging the world to focus on improving medication adherence as a key unmet need for the better control of blood pressure world-wide.

Sadly, two longstanding friends and colleagues, George Bakris and Henry Black, of huge influence on me and many in the field of hypertension, will not be with us in Cartagena. I had great affection for them both and their recent deaths will be felt by many as a huge loss to us all in the global hypertension community. We have included heartfelt obituaries in this issue of *Hypertension News* and send our condolences to their family and friends. May they rest in peace.

Finally, it has been an honour to serve as President of the ISH. In so doing, my overarching ambition was to modernise the ISH and make the ISH more representative of, and accessible to, the global hypertension community, and leave the Society in a stronger position than when I started. Others will judge whether that has been achieved. I couldn't have achieved anything without the dedication and support of the ISH senior officers, my executive committee colleagues, our Council, the many leaders and members of our various committees, the impressive work of Matt Chorley in communications and the outstanding support and institutional memory of our executive assistant Helen Horsfield. I am also fortunate that at the close of the Cartagena meeting, I will be able to hand over the reins to our next President George Stergiou, who I have worked closely with as ISH Secretary for the past two years and will continue to support as Immediate Past President for the next two years. In closing, a special mention to three senior ISH officers and executive committee members who have served the ISH with distinction and dedication for at least 8 years and who will leave the council in September; Maciej Tomaszewski (Past President), Fadi Charchar (Treasurer) and Nadia Khan (Officer at Large). From us all, thank you.

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