

Report of Thematic Federation (TF) on Hypertension. **August 2015**

The Thematic federation was officially installed on August 28th 2014. The UEMS board was represented by Z.Fras, past UEMS president, the administration was represented by Jean Baptiste Rouffet, the TF was represented by D.L.Clement. Professor Josep Redon (Spain) was nominated as external expert/advisor. The aim of this document is to report on the goals of the TF, the plans on how to approach these goals and the constructive conversations hold so far.

Background of the question

Several documents have repeatedly illustrated that hypertension is one of the most prevalent risk factors to develop cardiovascular diseases. In Europe, figures average a prevalence around 30% in the adult population and in some EU countries, even higher figures are documented (see ESH-ESC guidelines 2013, see European Heart Network, yearly publications).

The clinical presentation of Hypertension is another problem: most patients are completely asymptomatic; yet, hypertension is linked, directly or indirectly, to several major accidents like heart failure, renal failure, myocardial infarction. Also, hypertension is generally accepted to be one of the most frequent causes of cerebrovascular accidents like stroke, Transient Ischemic Attacks...

It should be mentioned that on top of the many medical, human and social problems, the complications linked to hypertension are also causing an extremely large financial burden to the society.

What has been done to overcome this problem?

Strong research has been developed to better refine blood pressure measurement, to prevent blood pressure increase with age and to treat hypertension in general and in special, in young adults and elderly patients. The role of salt in causing blood pressure increase in more

than 50% of the cases has been highlighted. Better pharmacological approach have been worked out ; many studies, of the best possible quality, have indicated that antihypertensive treatment clearly is capable of decreasing blood pressure and prevent its complications. As a result of these studies, it is generally accepted that control of blood pressure does improve prognosis significantly.

Is there a remaining problem?

Recent data have indeed confirmed the better control of blood pressure. Physicians and researchers alike felt that the problem of hypertension would be solved in the years to come. However, reality has shown that this is not the case.

Several papers have documented the last years that many hypertensive patients indeed have been detected, examined and started on effective treatment; however, many still escape to all of these actions while others well controlled at the start, stopped their treatment. As a result, blood pressure increases again and protection against all above cited complications of hypertension stepwise loses its impact.

The problem is not a minor one. Most recent data gathered the last years in Europe indicated that in many patients, known to the medical world (physicians, pharmacists, field workers), blood pressure control did not return to normal values (in adults 140/90 mm Hg). As a consequence, cardiac and vascular risk remains elevated! It is estimated that in Europe, almost 50% of the known hypertensive patients have insufficient blood pressure control!

Thus, it seems that patients, and probably their physicians, are not really aware of the risk of high blood pressure. Remarkably , this even occurs in patients who already suffered from one of the complications. The EuroAspire study (from the European Society of Hypertension) revealed in patients who have suffered a coronary accident, that at least half of them still have a too high blood pressure even if treatment was properly started up!

What makes such a new picture possible?

Three groups of possible causes have been outlined so far. First, patients are involved, largely by a lack of compliance to treatment; they do not like to take drugs and even so do not like to adapt their life style; especially as high blood pressure, in most of them, remains entirely asymptomatic; and even more difficult, the treatment can produce in some of them side effects...

Physicians also play quite a major role. Also here, awareness of the risk is far from optimal. No signs, no symptoms. In a number of cases, physicians indeed notice a too high figure but do not take action to adapt treatment and set up means for adequate follow up.

Finally, governmental authorities do not always help to combat the problem. They think at finances and argue that patients in Europe, take too many drugs; they ignore that the cost of prevention and early treatment largely outweighs the costs of treatment.

What can UEMS do?

UEMS can certainly help in improving the situation. As said above, physicians are playing an important role in the issue. Physicians' attention should be refocused to the problem and to the means to treat hypertension; many hypertensive patients, not at control, should be detected and guided to adequate follow up. Thus, increasing awareness is a first action to take.

Second action will be the following. UEMS has the great potential to bring together specialists, not only the experts in hypertension but also those who routinely see many patients : a lot of these may be hypertensive. Examples are gynaecologists, neurologists but also physicians meeting with patients coming for a technical act during which blood pressure could be recorded. Examples are radiologists, clinical biologists and several others.

The headlines of The Thematic Federation on Hypertension can be summarised as follows:

1. Increase awareness of physicians to the problem of insufficient control of blood pressure
2. Involve all physicians, also non-experts in hypertension to help managing the problem.

Actions of the TF during the first year and future plans.

During the UEMS meeting in Brussels (april 2015), a round table discussion was organised to discuss on what the TF participants could do to improve on the questions posed. After going over the background of the problem, the group estimated that the best first step would to work at the awareness of the UEMS Physicians.

Therefore, a short presentation will be scheduled during the UEMS meeting in Warschau.

Meanwhile, the question in general (without unravelling specific plans) has been shortly presented during talks at international meetings such as the Take Home messages of the European Society of Cardiology 2014, the Teaching Courses of the European Society of Hypertension 2015, the meeting of the Alpe Adria Association of Cardiology 2015 (organised by Professor Fras).

A second round table meeting of the group is being organised during the Warschau meeting; invitation to all who attended previous meeting but also to other interested parties, will circulate in the coming weeks.

During this second round table conversation, other means to improve awareness of physicians will be discussed and all suggestions ad hoc will be welcome. Evidently, also the second aim needs to be examined on how to seek help of UEMS physicians in improving blood control in treated patients. Discussion on the reactions to the short presentation will be quite informative.

At the same time, the possible approach to EU authorities could be examined as the question is pertinent to all EU countries while the approach could be generalised by help of EU authorities.

Summary of this document

Hypertension has a very high prevalence in Europe.

It is a strong risk factor for developing cardiac and vascular accidents

The risk can largely be controlled in the majority of cases

However, even in many treated patients, blood pressure level has not returned to normal values

As a consequence, risk remains far too high

UEMS can help to solve this problem by increasing awareness of physicians and by seeking the help of physicians not expert in hypertension but regularly seeing hypertensive patients. Therefore, both points are defined as the first two aims of the Thematic Federation

D.L.Clement

TF Hypertension