World Hypertension League

WHL · NEWSLETTER

News from the World Hypertension League (WHL)
In Official Relations with the World Health Organization

No. 193, September 2026

Note from the Editor



Prof. Daniel Lackland

It is so exciting to see the content of the September Issue of the Newsletter. Plans for the World Hypertension Congress continue to build anticipation for a high impact event. The reports from the WHL Excellence award recipients showcase state-of-the-art responses to the critical need for global hypertension control. Likewise, the many contributions from member societies and partners demonstrate the true 'League' approach to high blood pressure in the world. As we prepare for 2027, please help the Newsletter showcase your work and accomplishments with contributions from events, research studies, Children's Art Program, planned activities for World Hypertension Day 2027, and recognition of colleagues and organizations with the WHL Excellence Awards. We truly thank all of you for your support of the Newsletter, and look forward to receiving your feedback and contributions.

Dan *WHL Newsletter Editor-in-Chief*

IN THIS ISSUE

	Page
President & Editor's Columns	1
World Hypertension Congress 2027	2
Upcoming Meetings of Note	3
Excellence Award Winners	3
JHH Spotlight on southern Africa	7
World Hypertension Day Reports	8
Children's Art Program	10
Partner Updates	11
WHL Member Highlights	14
Welcome to New WHL Member	18
Calendar of Events	18

President's Column



Prof. Gianfranco Parati

This issue of the WHL Newsletter once more highlights our association's ongoing activities across different regions of the world to promote and facilitate better management of arterial hypertension. The WHL is increasingly recognized as a key partner for national and international health organizations. Together, we are working to improve global hypertension control and reduce the worldwide burden of cardiovascular disease.

Last week, I had the honor of representing the WHL in Beijing at two major events. I was invited to give a plenary lecture at the 2026 China Heart Congress, and to participate in the 2026 International Forum on Standardized Hypertension Care and Quality Improvement, organized by the Chinese National Center for Cardiovascular Diseases and the WHO Country Office in China. The Forum brought together leading domestic and international experts, health authorities, and professional institutions. Participants shared global developments and discussed practical ways to improve hypertension detection, standardized management, and blood pressure control worldwide. The topic of both my lectures "Why Are Hypertension Control Rates Still So Low? From Clinical Evidence to Better Care" and "Global Experience on Patient Engagement and Quality Improvement Strategies for Improving Hypertension" were both aligned with the main aims of these big events.

Hypertension remains a major risk factor for illness and death everywhere. In recent years, China has improved its screening, diagnosis, and treatment capacity through initiatives like Basic Public Health Services and Family Doctor Contract Services. However, raising prevention and control rates remains a top priority, both in China and in the world. Achieving this requires a focus on the entire continuum of care: from early detection and accurate diagnosis to standardized treatment, long-term management and effective blood pressure control. Implementation of the WHO/PAHO HEARTS technical package in different countries shows that team-based care, patient follow-up, digital health, and continuous monitoring can significantly improve hypertension control.

We will address these critical topics in depth at the 2027 World Hypertension Congress in Goiânia, Brazil, from May 13–15, 2027. The congress program features the most important aspects of screening, diagnosis, treatment, and long-term management of hypertension, and practical educational sessions will also be available. We warmly welcome not only hypertension experts, but also young investigators and first line clinicians to participate in this unique global event. Please save these dates and join us next May in Goiânia to share ideas, explore new advances, and strengthen our joint efforts to reduce the global burden of cardiovascular disease.

Gianfranco Parati, MD, FESC, ISHDF
President, World Hypertension League

WORLD HYPERTENSION CONGRESS 2027

May 13-15, 2027 – Goiânia, Brazil

Hypertension Without Borders: Blood Pressure Control for Global Cardiovascular Risk Reduction





The World Hypertension League announces the next World Hypertension Congress taking place in Goiânia, Brazil, from May 13 - 15, 2027, in partnership with the Brazilian Society of Cardiology, Department of Hypertension. We invite you to participate in this high-level scientific meeting of global relevance, bringing together knowledge and experience to advance the prevention and treatment of hypertension globally. Please note that abstracts submission will open on October 5th. A link will be sent out to our members and partners, and we hope you will disseminate widely.



UPCOMING MEETINGS OF NOTE

From Crisis to Resilience: Innovating for Health

The World Health Summit 2026 will take place on 11–13 October 2026, in Berlin, Germany.

The annual World Health Summit brings together global health stakeholders from all sectors to find solutions for the most pressing health challenges. Health around the world is being challenged by compounding crises that are testing systems, widening inequities, and exposing vulnerabilities that cannot be addressed through reactive, short-term responses. Addressing these challenges requires innovation and lasting solutions. WHS2026 will focus on how to turn innovation into more equitable, continuous, and future-ready systems that strengthen health and well-being over the long term. **To register, please visit the WHS website.**

World Stroke Congress 2026

October 21-23, 2026, Seoul, South Korea



Be Part of the Global Stroke Movement!

The World Stroke Organization warmly invites WHL members to the 18th World Stroke Congress. WSC 2026 will feature the latest research, practical insights, and innovative strategies to reduce the global impact of stroke. Engage in insightful discussions, skill-building sessions, and collaborative research while expanding your professional network.

Register on the Congress website.

EXCELLENCE AWARD WINNERS 2026

We are so pleased to present pieces from our 2026 Excellence Award Winners regarding their priorities in hypertension prevention and control.



Dr. Thomas Frieden MD, MPH
CEO & President, Resolve To Save Lives (RTSL)

Winner: 2026 Paul Whelton Excellence Award in Hypertension Translational Research and Prevention

Hypertension kills more people than any other cause of death—more than all infectious diseases combined—and controlling blood pressure can save more lives than any other clinical intervention. Yet hypertension prevention and control receives less than one in 10,000 dollars of global health development assistance. Treatment can cost a few dollars per patient per year.

Progress requires treating more patients to control, ideally to a systolic below 130. When countries track and report their control rate, they can improve it rapidly. People with both hypertension and diabetes die at much higher rates; a statin for everyone with diabetes over 40 and everyone with hypertension over 60 would prevent even more deaths.

Correcting the sodium-potassium intake imbalance is the other challenge, and can save at least as many lives as treatment. It requires lowering sodium through reformulation targets and package warnings and raising potassium by switching to potassium-enriched, lower-sodium products. Many countries are rapidly scaling HEARTS, the WHO-recommended treatment program. Few have reduced sodium or increased potassium.

Resolve to Save Lives works with governments in more than 40 countries to accelerate hypertension treatment and build programs that correct the sodium-potassium imbalance.



Dr. Joseph T Flynn, MD, MS; Professor of Pediatrics, University of Washington School of Medicine

Winner: 2026 WHL Excellence Award in Pediatric Hypertension

Over the past two decades, there has been increasing recognition of hypertension in youth, as well as its long-term consequences. Recent meta-analyses have established that approximately 4% of children and adolescents have hypertension, and another 8-9% have blood pressure in the elevated range. A major driver of this increase in prevalence has been the childhood obesity epidemic, which has spread from high-income regions such as North America and Europe, to lower- and middle-income regions, including Latin America, East Asia and South Asia. When seen in the context of data from longitudinal cohort studies such as those from the International Childhood Cardiovascular Consortium demonstrating increased cardiovascular events in adults with high childhood blood pressure, the increased prevalence of youth hypertension portends a virtual tsunami of adult cardiovascular disease in coming years.

Given that much of the increase in youth hypertension is driven by excess body weight and other lifestyle factors, one would think that it would be straightforward to design and implement effective prevention measures to head off the tsunami. However, in order to design and implement effective prevention measures, high blood pressure must first be recognized, and unfortunately this has emerged as a significant barrier in several respects. First, measuring blood pressure in the young is more challenging than in adults because of the need for multiple blood pressure cuff sizes and the emphasis in the existing guidelines on auscultatory blood pressure measurement. Second, even when children are found to have high blood pressure in the office setting, clinicians often fail to follow through with repeated blood pressure measurement to confirm whether the child or adolescent actually has hypertension. Third, the guidelines themselves are complicated, relying on complicated tables of normative blood pressure values and complex algorithms for establishing the diagnosis of hypertension. Finally, in many regions of the world, blood pressure measurement in children and adolescents is either not a routine part of well-child care, or is not endorsed by standard-setting organizations. For example, in Australia, the major barrier to implementing a pediatric hypertension guideline was that blood pressure doesn't get routinely measured during childhood. And in the United States, the US Preventative Services Task Force has never endorsed routine measurement of blood pressure in childhood.

What can be done to overcome these challenges? First, data on the increased prevalence of childhood hypertension and the new data linking youth blood pressure to adult cardiovascular disease must be brought to the attention of standard-setting organizations and policymakers so that childhood hypertension can be given the recognition that it deserves. Second, guidelines should be simplified and harmonized to make it easier for clinicians to identify youth with high blood pressure. Members of the International Pediatric Hypertension Association are currently addressing the harmonization issue, and others (including myself) are working with the American Heart Association and the American Academy of Pediatrics to streamline the American pediatric hypertension guideline. Third, efforts such as those by the BPOzKids consortium to implement routine screening of blood pressure in Australian children should be replicated in other countries and regions where there is currently a lack of routine blood pressure measurement in the young. Finally, and perhaps most importantly, there needs to be a greater emphasis on primordial prevention so that our children can be spared the consequences of hypertension.

References

Falkner B, Lurbe E. Primordial Prevention of High Blood Pressure in Childhood: An Opportunity Not to be Missed. Hypertension. 2020;75:1142-1150.

Flynn JT, Kruger R, Brady TM, et al. Practical approach to evaluate and manage hypertension in youth: an International Society of Hypertension position paper. J Hypertens. 2026;44:553-571.

Jacobs DR Jr, Woo JG, Sinaiko AR, et al. Childhood Cardiovascular Risk Factors and Adult Cardiovascular Events. N Engl J Med. 2022;386:1877-1888.



Dr. Jeyaraj D. Pandian, MBBS, MD, DM
President, World Stroke Organization (WSO)

Winner: 2026 Daniel Lackland Excellence Award in Collaboration and Advocacy for Population Hypertension Risk Reduction

I sincerely thank the World Hypertension League for selecting me for the Daniel Lackland Excellence Award in Collaboration and Advocacy for Population Hypertension Risk Reduction. Globally, hypertension remains the leading risk factor for stroke and a major contributor to cardiovascular disease. Preventing and managing hypertension requires a comprehensive, population-based approach that prioritizes awareness, early detection, equitable access to care, and sustained blood pressure control through evidence-based interventions. Despite the availability of effective treatments, significant challenges remain in screening, treatment, and long-term monitoring.

My work focuses on advancing these priorities through collaboration, advocacy, and capacity building to strengthen hypertension prevention and control programs. By supporting the implementation of standardized treatment protocols, improving access to accurate blood pressure measurement, and promoting data-driven quality improvement, I aim to help health systems achieve better hypertension control rates. Equally important are digital technologies, mHealth innovations, and training frontline healthcare workers. Meaningful progress depends on collective action, and I am honored to contribute to advancing cardiovascular and brain health worldwide.



Dr. Jarbas Barbosa da Silva Jr., MD, MS, PhD
Director, Pan American Health Organization (PAHO)

Winner: 2026 Liu Lisheng Excellence Award in Population Cardiovascular Risk Factor Control in Low- and Middle-income Populations

From Evidence to Scale: Strengthening Health Systems to Accelerate Hypertension Control

Hypertension remains the leading modifiable risk factor for cardiovascular disease and premature death in the Americas. Effective interventions are well established; the priority is to translate them into improved population health outcomes through strong, equitable health systems.

For PAHO, hypertension control is a priority for health systems and primary health care. HEARTS in the Americas is the principal platform for advancing this agenda, reaching 34 countries and territories and approximately 15,000 primary health care facilities.

In our recently published paper (https://pubmed.ncbi.nlm.nih.gov/42571452/), we emphasized that accelerating and sustaining progress requires institutionalizing HEARTS across primary health care networks and activating key health system levers: governance, access to essential medicines and technologies, information systems, team-based care, quality improvement, and community engagement.

This foundation supports HEARTS 2.0. Using hypertension as a strategic entry point, HEARTS 2.0 seeks to integrate cardiovascular, kidney, and metabolic care within primary health care, reducing fragmentation and improving continuity and quality of care.

The Liu Lisheng Excellence Award recognizes this collective regional effort and reinforces PAHO's commitment to accelerating implementation and achieving sustainable, equitable population health impact.



Sun Yingxian, MD, PhD
Chief, Department of Cardiology, The First Hospital of China Medical University

Winner: 2026 Peter Sleight Excellence Award in Hypertension Clinical Research Trials

The priority in hypertension prevention and management is to strengthen community-based hypertension management to improve population-wide blood pressure control rates and to promote the implementation of the new 130/80 mmHg blood pressure target recommended by recent national and international guidelines.

As Principal Investigator, I led the CRHCP, the world's largest community based comprehensive hypertension intervention and intensive blood pressure–lowering study. For the first time, the study demonstrated that a comprehensive community-based management strategy targeting 130/80 mmHg significantly reduces cardiovascular and cerebrovascular events. We also established a comprehensive hypertension prevention and management model targeting 130/80 mmHg that is suitable for low- and middle-income settings worldwide.

In addition, we showed for the first time that blood pressure lowering significantly reduces the risk of dementia. These findings have been incorporated into relevant reports and recommendations from the Chinese Center for Disease Control and Prevention and the World Health Organization, and have been widely promoted and implemented in China and internationally.



Franco Muggli, MD
Chief, Outpatient's Medical Clinic, Vezia (Lugano) Switzerland; Member, Committee of the Swiss Society of Hypertension

Winner: 2026 Regional Excellence Award in Population Hypertension Control in Low Resource Settings

Since 2015, I have been involved in the conduct of the "Study for better Blood Pressure and Cardiovascular Risk Control in a rural area of the District of Nyaruguru, Rwanda", also ongoing.

This project clearly highlights which are to be the priorities in the prevention and/or management of hypertension, because it has demonstrated how it is possible to develop an effective peripheral hypertension care module in rural regions. The module is corresponding to the environmental and socio-economic-cultural characteristics of the population, is useful for improving knowledge and awareness of the problem of high blood pressure, and reduces difficulties in accessing outpatient treatment facilities.

My work specifically contributes toward addressing these priorities: the benefits of a simple drug treatment (single-pill-combination therapy): better immediate antihypertensive efficiency with low-dose combination therapy; better long-term therapeutic adherence with single-dose combination therapy; efficacy: normalisation of BP, decreased risk of cardiovascular complications; better cost ratio (drug) and benefit (decreased CV risk).

These findings and the results obtained have therefore prompted the Rwandan Ministry of Health to update the guidelines for the diagnosis and treatment of high blood pressure, introducing the combination therapy that had previously been missing. Efforts should be devoted to overcome structural, regulatory, pricing, and workforce-related barriers, in order to ensure the availability and affordability of combination antihypertensive pills, as well as their integration into routine clinical practice, including at primary care centres.

WHL Recognition Award Presented to Nelson Dinamarco, MD, PHD, President of the Brazilian Society of Hypertension (SBH)



WHL award ceremony at the Brazilian Society of Hypertension in São Paulo, Brazil, recognizing Nelson Dinamarco, MD, PhD, President of the Brazilian Society of Hypertension. L-R: Dr. Sandra Fuchs, Dr. Flavio Fuchs, Dr. Nelson Dinamarco, and Dr. Paul Whelton, WHL Immediate Past President

JOURNAL OF HUMAN HYPERTENSION



Community-led approaches for hypertension in southern Africa

Submitted by Chivandire, T[1], Sabapathy, K[1,2]

1. The Health Research Unit Zimbabwe, Biomedical and Research Training Institute, Harare, Zimbabwe
2. Faculty of Epidemiology and Public Health, London School of Hygiene and Tropical Medicine

In southern Africa, the levels of diagnosis, treatment and control of blood pressure (BP) is among the lowest globally. Given the population growth in the African continent, the low proportion of individuals with optimally controlled BP represents approximately 93.3 million persons who are at risk of adverse cardiovascular events.[1] Health system constraints, including overburdened facilities, limited workforce capacity, inconsistent access to affordable diagnostics and high medication costs all undermine diagnosis and long-term disease management. At the individual-level, people have competing priorities such as work/income generation over clinic attendance, especially when there are long wait-times at the clinic.

Strategies for expanding non communicable disease (NCD) care have been shown to be effective in African settings, including community-based strategies such as the ComBaCal and INTE-COMM interventions.[2,3] While this evidence must be leveraged, strategies that are health-worker and/or health facility co-ordinated are encumbered by staff shortages in most low-income African countries.

The potential benefits of a community-based peer-led approach for hypertension was observed in the ComBP study in Zimbabwe in 2024.[4,5] With input from key health professional and community stakeholders, we co-developed community-based support groups consisting of 10-15 members, which were co-facilitated by a Community Health Worker and a group peer. Facilitators were provided with training on hypertension and had oversight of digital BP machines, which were provided for groups to use among themselves and with their household members/neighbours. Facilitators were trained to support participants to link to local Primary Health Centres when required based on pre-specified criteria. The process evaluation showed that the groups were acceptable, feasible to deliver and no adverse events were reported. The study involved a relatively limited 5-month follow-up period but loss-to-follow up during this time was negligible (just 3 of 140 dropped-out), and the proportion observed to have uncontrolled hypertension was halved compared

with baseline. Importantly, the benefits of ComBP extended beyond group membership, with family and friends of group members having the opportunity for BP measurement.[4,5]

There is a pressing need to conduct further implementation research to provide feasible, acceptable solutions to improve access to hypertension detection and management. By integrating care for common co-morbidities and coordination between sectors with "bottom-up" community involvement, optimal benefits for patients can be achieved. Multisectoral approaches, bringing together community, public health-facility and private sector actors such as pharmacies for integrated and coordinated care, have the greatest scope to empower communities, improve clinical outcomes, alleviate burden on health facilities, and enable access to affordable treatment for hypertension and associated conditions.

References:

1. World Health Organization. Global report on hypertension 2025: high stakes – turning evidence into action [Internet]. Geneva: World Health Organization; 2025 [cited 2026 Jan 7]. Available from: https://iris.who.int/server/api/core/bitstreams/93b8e571-00a2-4de3-bb34-30f99b384816/content
2. Gerber F, Sanchez-Samaniego G, Gupta R, Lejone TI, Tahirsylaj T, Raeber F, et al. Lay community health worker-led care with mobile decision support for uncontrolled hypertension: a cluster-randomized trial. Nat Med. 2026 Mar;32(3):915–23. doi:10.1038/s41591-026-04208-w
3. Kasujja FX, Aikaeli F, Garrib A, Widenfelt E van, Namakoola I, Kivuyo S, et al. Integrated community-based versus facility-based care for people with HIV, diabetes, and hypertension in sub-Saharan Africa (INTE-COMM): an open-label, multicountry, cluster-randomised trial. The Lancet. 2026 Mar 14;407(10533):1084–94. doi:10.1016/S0140-6736(25)02641-8 PubMed PMID: 41831847.
4. Mhino FM, Chingono RMS, Chivandire T, Sekanevana C, Mpandaguta CE, Mwanza T, et al. Implementing Community-Based Blood Pressure Groups in Zimbabwe – findings from process evaluation of a pilot intervention. medRxiv; 2026. p. 2026.03.05.26347087. doi:10.64898/2026.03.05.26347087
5. Mhino FM, Ndanga A, Chivandire T, Sekanevana C, Mpandaguta CE, Mwanza T, et al. The Acceptability and Impact of the Community-Based Blood Pressure Group pilot intervention in Zimbabwe. [Internet]. medRxiv; 2026 [cited 2026 May 27]. p. 2026.04.20.26351307. Available from: https://www.medrxiv.org/content/10.64898/2026.04.20.26351307v2 doi:10.64898/2026.04.20.26351307

WORLD HYPERTENSION DAY REPORTS

CHINA

2026 World Hypertension Day Report Yingde, Guangdong Province

Submitted by Dr. Anping Cai, WHL Special Ambassador, Guangdong Provincial People's Hospital, Guangzhou, China

During the past year, I was based in Yingde, Guangdong Province, where I worked with colleagues from Yingde People's Hospital and local primary care institutions to improve hypertension management in rural communities.



Our activities focused on strengthening practical capacity among village doctors, including accurate blood pressure measurement, standardized follow-up, medication adherence, lifestyle counseling, salt reduction, weight control, and early identification of high-risk patients.

Although I completed my service in Yingde and left this April, I am very pleased to see that this work has continued. Under the theme "Controlling Hypertension Together," Dr. Songshan Luo and his colleagues have remained highly dedicated to hypertension prevention and control for rural residents, particularly underserved and low-income populations.



During World Hypertension Day, they organized community-based activities to provide free

blood pressure measurement, explain the harms of uncontrolled hypertension, guide patients on regular medication use, encourage home BP monitoring, promote low-salt diets and healthy lifestyles, and refer individuals with poorly controlled BP for further clinical management.

Their continued efforts demonstrate that grassroots hypertension care can be sustained through local leadership, practical training, and close engagement with the community. These activities reflect the shared mission of improving hypertension awareness, treatment, and control, and are closely aligned with the World Hypertension League's goal of promoting equitable cardiovascular health globally.

CUBA

World Hypertension Day Report

Submitted by Jorge Luis Leon Alvarez MD, PhD, National Technical Advisory Commission for the Hypertension Program, Cuba

Simultaneous Blood Pressure Screening

In celebration of World Hypertension Day on May 17, 2026, numerous activities were organized by the Ministry of Public Health of Cuba and the National Technical Advisory Committee of the Hypertension Program between May 1 and May 31.



The activities were under the theme "Controlling hypertension together". Different health institutions in the country performed active screening of patients at risk of hypertension, by measuring blood pressure in community health centers, hospitals, recreational parks, schools, workplaces and sports centers. Health promotion activities were carried out on radio, television and in the written press in order to promote awareness and efforts to prevent, diagnose and control hypertension.



Activities focused on empowering the population on strategies to favorably impact the fight against hypertension: increased knowledge of cardiovascular diseases, their risk factors, lifestyle, and prevention. Educational and scientific activities were targeted at family doctors, internal medicine specialists, epidemiologists, cardiologists, endocrinologists, nurses and teachers, among others, to train them in the latest information on hypertension.



In addition, the 10th anniversary of Cuba's incorporation into the Pan American Health Organization's HEARTS initiative was celebrated.

THAILAND

World Hypertension Day 2026

Submitted by Sirisawat Kunanon, MD, Division of Hypertension, Department of Medicine, Faculty of Medicine Siriraj Hospital, Mahidol University, Bangkok, Thailand, on behalf of the Thai Hypertension Society

Coordinated national efforts were conducted to raise awareness, promote screening, and improve hypertension control across Thailand.

To mark the occasion, the Thai Hypertension Society released video clips on the theme "Controlling Hypertension Together", featuring

FAQs on hypertension care by a multidisciplinary team of doctors, pharmacists, and nurses. The Thailand National Hypertension Alliance, led by the Thai Hypertension Society, also organized the "Know Your Numbers, Control Your Pressure" campaign, bringing together approximately 500 participants and 20 healthcare professionals.



The event included hypertension education activities, a May Measurement Month blood pressure screening booth, and a health promotion walk/run to encourage healthy lifestyles and cardiovascular risk prevention.



Supported by nationwide awareness campaigns and the National Hypertension Dashboard covering over 13 million patients, the initiative aimed to improve hypertension detection, treatment, and blood pressure control nationwide.



CHILDREN'S ART PROGRAM 2026

Let Our Children's Creativity Shine

Submitted by Dr. BEH Chin
Malaysian Society of Hypertension (MSH)

When the email about the World Hypertension League Children's Art Programme 2026 caught my attention, the Malaysian Society of Hypertension (MSH) thought, *"Why not let our children's creativity shine while promoting healthy habits?"* And so, we embarked on this meaningful, educational, and fun initiative.

We started by creating an attractive poster to encourage children and young children to participate. With the generous support and funding from MSH, the programme was made possible. We were delighted to receive enthusiastic participation from children aged 4 to 16 years, who submitted a wonderful variety of creative and colourful artworks: **click the link** to view the beautiful artworks.

The artworks reflected the theme "Controlling Hypertension Together", highlighting important healthy habits such as regular and accurate blood pressure measurement, maintaining a healthy weight, exercising regularly, reducing screen time, reducing salt intake, getting adequate sleep, switching off devices before bedtime, and avoiding smoking.



MSH organized a prize giving ceremony for the WHL Children's Art Programme participants.

Held in conjunction with World Hypertension Day 2026, this programme demonstrated that health education does not have to be limited to classrooms or clinics. By engaging children through creativity and art, we can introduce important health messages in a way that is enjoyable, memorable, and meaningful.

We strongly believe that health education begins at a young age. Planting healthy habits early can inspire children to make better choices today and potentially influence their families and communities tomorrow. We hope to continue and expand initiatives like this, empowering the next generation to understand, embrace, and champion cardiovascular health.

HYPERTENSION PARTNER NEWS

WHO Stroke Resolution, World Stroke Congress and World Stroke Day 2026

As World Hypertension League members may be aware, in May 2026, WHO Member States unanimously adopted the first World Health Assembly resolution dedicated to stroke.

Reducing the burden of stroke: strengthening prevention, acute care, rehabilitation and health-system readiness establishes a comprehensive framework for action across the entire stroke pathway-from prevention and risk-factor management to emergency treatment, rehabilitation, surveillance and long-term support.

For the World Stroke Organization (WSO) and our partners in the **Global Stroke Action Coalition** this landmark commitment represents both an incredible advocacy achievement - and a starting point. Implementation of the resolution will require sustained political leadership, investment and accountability - and stronger prevention has been identified as a key pillar of national programs. The resolution provides an entry point for WHL and its members to drive measurable improvements in blood-pressure detection, treatment and control. We look forward to working together to accelerate progress to tackle the single largest cardiovascular risk factor for stroke.

Matching policy action with public awareness is the work of **World Stroke Day**, 29 October, when WSO will continue its global symptom-awareness campaign, encouraging everyone to be ready to #ActFAST. Messaging and resources focused on identifying the cardinal stroke signs - facial drooping, arm weakness and speech difficulty-and the need for timely emergency care are available in multiple languages. An interactive Stroke Spotter quiz and updated YouTube videos with embedded quizzes have been created and are free to use for WHL members working to raise stroke awareness in the community. Resources and campaign implementation guides can be accessed from the **World Stroke Campaign website.**

Before World Stroke Day, the global stroke community will gather at the 18th World Stroke Congress, 21–23 October 2026 in Seoul. The Congress will bring together clinicians, researchers, public-health experts, policymakers and advocates to explore the latest advances in stroke prevention, treatment, rehabilitation and systems of care.

The WHO resolution, World Stroke Day and the World Stroke Congress create powerful opportunities to raise the profile of stroke amongst decision-makers, healthcare stakeholders and the public. WSO looks forward to welcoming members to Seoul and working together to better stroke outcomes globally.

Scaling up pregnancy blood pressure care in Madhya Pradesh, India

Together with implementing partner Jhpiego, RTSL India has scaled up its Hypertensive Disorders of Pregnancy (HDP) program to Shajapur district, Madhya Pradesh. The expansion—which builds on results from the prototype in the Harda district—covers 150 public healthcare facilities and aims to protect 30,000 pregnancies annually.

The program will support women with blood pressure care from their first antenatal visit through post-partum follow-up. Teams will roll out standardized treatment hypertension

protocols to primary health care staff, strengthen data systems to better monitor women during and after pregnancy and ensure essential medicines and quality diagnostics are within reach. Women identified with high blood pressure during pregnancy will receive dedicated follow-up care after delivery.

Over time, frontline health workers will identify high-risk pregnancies earlier, follow standard treatment steps and help pregnant women access the blood pressure control medicines they need—all at the primary care level.

A formal launch event for the expanded program included district leadership and featured a training session on 'Management of Hypertension during Pregnancy' for service providers from primary and referral facilities.

Indonesia hackathon shows new HEARTS360 tool improves digital heath systems

Resolve to Save Lives trialed their new HEARTS 360 digital toolkit during a hackathon in Indonesia with promising results.

HEARTS 360 is a digital toolkit that enables core cardiometabolic indicators to be incorporated in any electronic health record (EHR) with just two days of programming time. It contains three dashboards—Hypertension program dashboard, Diabetes program dashboard, and an overdue list to track missed visits—that allow program managers to easily interpret trends, track outcomes of interventions, and return patients overdue for a health visit to care. Working with RTSL developers, countries can easily integrate the toolkit into their current EHR.

The two-day hackathon in Indonesia put this concept to the test. Of the twelve participating EHR developers, nine successfully built the toolkit and seven successfully deployed it into their EHR contexts. Winners in three categories won $7,000. The challenges identified informed improvements to the toolkit, including a pathway to push new features to EHRs. RTSL is building a community of contributors for this open-source project.

The HEARTS 360 Toolkit is available—free and open source—on GitHub.

COALITION FOR ACCESS TO NCD MEDICINES & PRODUCTS

The Coalition for Access to NCD Medicines and Products (Coalition) hosted its Annual Member Meeting in Nairobi, Kenya, from June 30 to July 2, which brought together over 80 leaders from seven African countries, regional bodies, civil society, and the private sector. The meeting marked a shift from commitment-setting to implementation with discussions focused on regional collaboration, sustainable financing, and supply chain strengthening. Country representatives shared concrete progress on commitments made at the 2025 United Nations General Assembly , while a keynote address from Africa CDC and a fireside chat with regional leaders from the East, Central and Southern Africa Health Community and the East Africa Community explored pooled procurement, regulatory harmonization, and local manufacturing. Site visits to health facilities and health commodity depots offered participants a firsthand look at NCD care delivery in Kenya. **Read more here.**

In June 2026, the Coalition in partnership with the Supply Chain Impact Alliance completed rapid NCD supply chain maturity assessments with representatives from NCD ministry of health units in Ghana, Senegal, Somalia, and Tanzania. These assessments have helped countries identify gaps and prioritize actions to strengthen procurement, distribution, and availability of NCD medicines and products.

Looking ahead, the Coalition will continue to support countries in translating NCD supply and access commitments into measurable impact through regional collaboration, peer learning, and advocacy. If your organization is interested in becoming a member of the Coalition, please contact the Coalition Secretariat Coordinator, Meredith Kruse (mkruse@path.org).

NATIONAL FORUM
FOR HEART DISEASE & STROKE PREVENTION

2026 National Forum Annual Meeting: Unleashing Prevention's Power

Registration is now open for the National Forum for Heart Disease's Stroke Prevention's 24th Annual Meeting, "Unleashing Prevention's Power: Improving Americans' Heart, Kidney, Metabolic, and Brain Health," on Oct. 29 from 10:30 a.m. to 4:30 p.m. ET.

This year's virtual meeting will focus on moving prevention from aspiration to action. Sessions will explore how health systems can integrate prevention into routine care and translate evidence into measurable improvements in heart, kidney, metabolic, and brain health.

The agenda includes a session on hypertension and dyslipidemia management, featuring new risk-assessment tools, emerging therapies, and medical guidelines.

Panelists will discuss strategies to overcome barriers to guideline adoption and improve blood pressure and cholesterol control.

Additional sessions will explore policy, prevention, innovation, partnerships, and successful practices from organizations nationwide. Join public health, clinical, and organizational leaders working to strengthen prevention.**Register now here.**

MAY MEASURE MONTH®

May Measurement Month (MMM) began its ninth annual blood pressure screening campaign in 2026, bringing together volunteers from around the world to raise awareness of the importance of blood pressure measurement.

Launched in 2017, MMM is the world's largest free public blood pressure screening programme. To date, more than 8 million people across 120 countries have been screened, identifying over 1 million people with untreated hypertension.

This year, the campaign continued to extend its global reach, with 92 countries participating. We were particularly delighted to welcome the Central African Republic, Malta and the Netherlands to MMM for the first time.

Throughout the campaign, national teams delivered free blood pressure checks in communities while sharing a simple but vital message: raised blood pressure remains the world's leading cause of preventable death, yet around half of those affected are unaware they have it.

The continued commitment of MMM's country leads, healthcare professionals, volunteers and partners makes this extraordinary global effort possible, helping to educate and save lives. Thank you to everyone who helped #MakeItCount in 2026. **For more information click here.**

International Society of Hypertension

ISH 2026 Scientific Meeting fast approaching

Our meeting – taking place in Dubai and with options to join in person and online – takes place from 22-25 October 2026. Find out more and register.



New hypertension guidelines for Africa aim to transform care

The ISH Africa Regional Advisory Group (RAG) and the Pan-African Society of Cardiology have developed new pan-African clinical guidelines for the management of hypertension - a major step towards addressing one of the continent's fastest-growing health challenges. The

development of the guidelines was led by Alfred Doku, Chair of the ISH Africa RAG. Read more.

ISH Meeting in 2027 to be held in Shanghai

The ISH is pleased to announce that our 32nd Scientific Meeting (ISH 2027) will take place in the dynamic city of Shanghai, China, in partnership with the Chinese Hypertension League. The Meeting, to be held in conjunction with the Chinese Hypertension Meeting 2027 (CHM 2027) and the 29th International Symposium on Hypertension and Related Diseases, will take place from 28-31 October 2027 at Zhangjiang Science Hall in Shanghai.



ISH contributes to Southern African Hypertension Society Congress

ISH involvement included a session from our New Investigator Committee for early career researchers on how to advance your career. Find out more.

Read *Hypertension News* today

The latest edition of our publication features contributions on:

- Paediatric hypertension
- Renal denervation in Asia



- Re-humanising hypertension
- Blood pressure targets in chronic kidney disease
- Ambulatory BP in high-risk pregnancies
- Developing the next generation of hypertension leaders.

WHL MEMBER HIGHLIGHTS

Malaysian Society of Hypertension

"Delicious Doesn't Have to Be Salty"

Submitted by authors Dr. Beh Hooi Chin, Dr. Nurul 'Ain Azizan Ain Azizan, Dr. Teoh See Wie CV Teoh, with acknowledgement to Lee Kum Kee

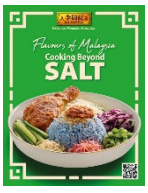
That was how this journey began…….

We have always loved eating, explored new flavours, and experimented with recipes. As we discussed how we could help our patients enjoy healthier meals, we envisioned creating a collection of delicious low-salt recipes that everyone could prepare and enjoy.



The journey was far from easy. From securing funding and finding chefs to renting a kitchen, every step came with its own challenges. I am deeply grateful to my fellow authors for their unwavering dedication too. From writing and refining each recipe to a few rounds of food tasting and countless revisions, your commitment made this recipe book possible

We are delighted to finally share this cookbook with our patients, community, family and friends. We hope this cookbook brings joy to your kitchen, inspires healthier cooking, and reminds us that eating well doesn't mean giving up delicious food. Please share it with your family, friends, and patients—because good health is even better when shared.



Click here to read the recipe book.

Philippines Society of Hypertension

PSH CONCLUDES 21ST HYPERTENSION COURSE, EQUIPPING OVER 296 HEALTHCARE PROFESSIONALS WITH LATEST ADVANCES IN PATIENT CARE

Submitted by Dr. Alejandro Bimbo Diaz President, Philippine Society of Hypertension (PSH); Jesica Mae Patropis, CHRA, CEPL Administrative Officer, Philippine Society of Hypertension (PSH)

Quezon City, Philippines | July 2026

Reaffirming its commitment to advancing cardiovascular health and professional excellence, the Philippine Society of Hypertension (PSH) successfully concluded its 21st Course on the Basics and Clinical Management of Hypertension, held from July 2–4, 2026 at the Dr. Avenilo Aventura Hall, Philippine Heart Center, Quezon City. As the Society's flagship continuing medical education program, the course brought together more than 296 healthcare professionals from across the country – including physicians, residents-in-training, nurses, midwives, and rehabilitation therapists – reflecting the growing commitment and demand for high quality evidence-based education in hypertension management.

Over the three-day scientific program, participants received a comprehensive review of the latest evidence and best practices in the prevention, diagnosis, treatment, and long-term management of hypertension. Through expert lectures, interactive case discussions, and multidisciplinary learning sessions, participants translated current clinical guidelines into practical approaches that can be readily applied in everyday patient care. The course emphasized patient-centered, evidence-based strategies aimed at improving cardiovascular outcomes and reducing the burden of hypertension-related complications

A highlight of this year's course was the participation of 42 distinguished faculty members representing cardiology, nephrology, endocrinology, neurology, internal medicine, family medicine, obstetrics and gynecology, emergency medicine, and other allied health disciplines. Their lectures and case-based discussions underscored the importance of multidisciplinary collaboration in managing hypertension, particularly among patients with multiple cardiovascular and metabolic risk factors. The breadth of expertise shared by the faculty provided participants with a holistic perspective on the evolving landscape of hypertension care**.**

For many physician participants, the course also served as the principal preparatory program for the Philippine Society of Hypertension's Certifying Examination—a significant milestone toward becoming a PSH Certified Hypertension Specialist. The certification program recognizes physicians who have demonstrated advanced competence in evidence-based hypertension management and supports the Society's mission of developing highly qualified clinicians capable of delivering quality hypertension care throughout the country.

In a statement, the Philippine Society of Hypertension reaffirmed that strengthening the knowledge, skills, and clinical competencies of healthcare professionals remains essential in addressing hypertension – one of the country's leading risk factors for cardiovascular disease, stroke, chronic kidney disease, and premature mortality. By fostering continuous professional development, encouraging interdisciplinary collaboration, and promoting evidence-based practice, PSH continues to play a vital role in improving cardiovascular health outcomes for Filipino patients.

As PSH looks ahead to future educational initiatives, the annual Hypertension Course remains a cornerstone of the Society’s initiative to advance d education, promote research, strengthen clinical practice, and empower healthcare professionals in the fight against hypertension and its complications. Through sustained collaboration and continuing medical education, PSH remains steadfast in its commitment to achieving better cardiovascular health for every Filipino.

Romanian Society of Hypertension

Congress of the Romanian Society of Hypertension Sovata, Sept 9-12, 2026

Prof. Gianfranco Parati, WHL President, was invited to represent the World Hypertension League at the congress of the Romanian Society of Hypertension (RSH) in Sovata. Transilvania. During this congress he gave a lecture on the topic: "How to Consider Blood Pressure Variability in Clinical Practice".





During the congress a few proposals for a closer collaboration between the RSH and WHL were discussed. Among them is the plan for a Hypertension Summer School to be organized in Romania in cooperation with the RSH and the WHL.



G. Parati WHL President is nominated Honorary member of RSH. L to R: Prof. Dr. Theodora Benedek, RSH President, Prof. Gianfranco Parati, WHL President.

Prof. Parati also endorsed an important campaign carried out by the RSH for prevention of cardiovascular disease by means of earlier detection of cardiovascular risk factors, including hypertension, at the population level, through a moving screening lab in the context of the CARDIOSCREEN PROJECT, described in more detail below.

Expanding Cardiovascular Prevention and Blood Pressure Control in Rural Romania: The CardioScreen Initiative

As part of the ongoing effort to combat cardiovascular diseases and improve healthcare access for vulnerable populations, the Romanian Society of Hypertension launched the CardioScreen program. This initiative brings specialized medical care directly to the heart of rural communities, environments where access to diagnostic and preventive services is often limited.



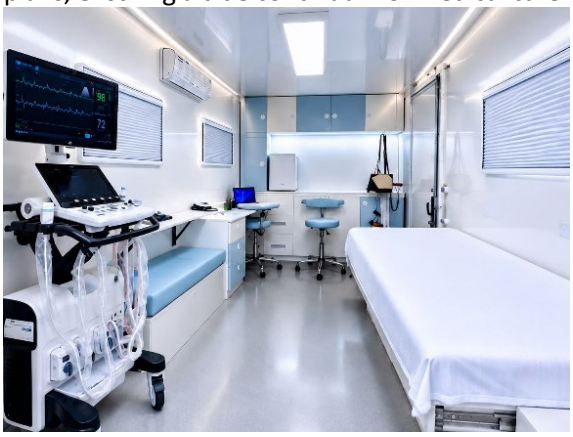


The project relies on a mobile unit specifically designed and developed for screening activities, with its implementation coordinated by the team led by Prof. Dr. Theodora Benedek, president of the Romanian Society of Hypertension. The primary objective is the active evaluation and stratification of cardiovascular risk among populations in areas with poor access to healthcare services. The medical team operating within the mobile unit will perform rigorous blood pressure measurements and collect biological samples for laboratory analysis, thereby providing an objective and comprehensive assessment of each patient's risk profile.

CardioScreen is a mobile clinic equipped with state-of-the-art technology. The unit features equipment for performing electrocardiograms (ECG) and echocardiograms directly in the field. Furthermore, it possesses the necessary infrastructure for biological sample collection, including specialized refrigeration units that guarantee the safe transport of samples under optimal conditions to the university laboratories in Târgu Mureș.

The program seamlessly integrates screening activities with a well-defined clinical pathway. Patients identified with a high cardiovascular risk are not merely diagnosed, but proactively

counseled and referred to specialized clinics within the Târgu Mureș university center. There, they gain access to advanced imaging and functional investigations, as well as specialized treatment plans, ensuring a true continuum of medical care.



CardioScreen mobile unit is supported by multiple grants, including those from European projects, aiming to reduce health inequalities and to implement cardiovascular prevention protocols in regions where the need is most critical.

Colleagues In Care

Submitted by: John Kenerson MD FACC, president@colleaguesincare.org

After decades walking down the gradient of inequality living laboratories to serve the destitute poor, Colleagues in Care has taken up the "Missing Middle" space between knowledge and action. Operationalizing global health equity beyond the conceptual level requires untying the Gordian knot of inadequate money to support sustainable healthcare systems. Given the cardiology and OB Gyn backgrounds of the founders, we have decided to take the knowledge distribution and implementation equity first steps with a focus on hypertension and women.

The model is simple. It begins with a vetted knowledge source focused on the reality of low resource communities and the principle of Best Possible Practice (BPP) uniting evidence and reality-based medicine (the six-part Cumulus Lift Hypertension Series). The glue is medical volunteerism as intermediaries, coaches, and navigators supporting mostly FBO and NGO medical missions already serving in destitute poor communities to co-create what best works in their unique circumstances This is Phase Two Cumulus Lift Service entering into active recruitment phase. There are two basic questions to be answered on both sides of the co-creation equation. What can you offer? What do you need?

The basics trilogy of the Cumulus Lift Series has already been released starting on World Hypertension Day. Part One: Engage addresses the probing questions of who cares, and why bother? Part Two addresses the Essentials: BP Screening and Accurate BP Measurement. Part Three Education is a comprehensive review of Hypertension and Cardiovascular Risk. We are now releasing the more advanced topics including Part Four: Management, Part Five on Women and Hypertension with an emphasis on preeclampsia and hypertensive disorders of pregnancy. Part Six includes modules on stroke and ancillary considerations of atrial fibrillation and rheumatic heart disease in endemic areas, HIV, social determinants, ethnicity and ancestry.



BP measurement instructions being given on WHD in the Democratic Republic of Congo.

We have developed a CIC GPT "Maxi" trained on CLS alone as a tool to go deeper from CLS initially entered via Table of Contents links. We have also developed BPIQ Blood Pressure Intelligent Questions, and JTF Just The Facts for brief interactions. Volunteers will be eligible for higher

level AI tools for program development and educational program plans in partnering relationships.

After wrestling with this reality challenge of not enough money, we strongly believe our CIC program is a potential solution that deserves active consideration, especially as grant sources are also drying up. There is no reason not to try something simple and small as has been the CIC story using what we have for resources and based on volunteerism and not fixed infrastructure overhead. Why not try something different and innovative and start small?

We have developed a program, and now we are focusing on getting it to where it needs to be, i.e., distribution and implementation equity. Pilot programs recently started in DRC and other African countries have been promising. Small steps for a big problem as many of our hypertension patients live amongst the bottom billion socioeconomically. We are asking for your input and help both as individual volunteers and organizational partners, contact@colleguesincare.org

WHL WELCOMES NEW MEMBER – GHANA HYPERTENSION SCREENING INITIATIVE (GHSI)

Founder and Executive Director Mavis Amegah-Dorr



The Ghana Hypertension Screening Initiative (GHSI) is a Ghanaian-led community health program bringing hypertension education, screening, and twelve-month follow-up to informal sector workers in Greater Accra: market traders, transport drivers, kayayei (head porters), and street vendors. About one in three Ghanaian adults aged 30 to 70 has hypertension; an estimated 65 percent are unaware, and only about 6 percent have it under control. GHSI's closed-loop model addresses the point where most screening programs end: every person who screens high will be referred to care and followed at days 14, 30, 90, 180, and 365.



A December 2026 pilot will screen 1,000+ adults. Implementation is carried by a Ghana-based team: research anchored at the University of Health and Allied Sciences, screening delivered by the Akoma+ Health and Wellness Foundation, and community engagement through PHAIG and trusted local institutions. Learn more: ghanabloodpressure.org.

Calendar of Events

WORLD HEART DAY 2026
September 29, 2026
Click here for more information

AHA Hypertension Scientific Sessions
October 7-11, 2026
Arlington, VA, USA
Click here for more information

World Congress of Cardiology 2026
October 8-10, 2026
Rio de Janeiro, Brazil
Click here for more information

Italian Society of Hypertension Congress
October 9-11, 2026 Pisa, Italy
Click here for more information

World Health Summit 2026
October 11-13, 2026
Berlin, Germany
Click here for more information

18th World Stroke Congress
October 21-23, 2026
Seoul, Korea
Click here for more information

International Society of Hypertension 2026
October 22-25, 2026
Dubai, UAE
Click here for more information

WORLD STROKE DAY
October 29, 2026
Click here for more information

Canadian Hypertension Congress
November 5–7, 2026 Toronto, Canada
Click here for more information

Mission
The objectives of the WHL are to promote the detection, control and prevention of arterial hypertension in populations. The World Hypertension League (WHL) is a federation of leagues, societies and other national bodies devoted to this goal. Individual membership is not possible. The WHL is in official relations with both the International Society of Hypertension (ISH), and the World Health Organization (WHO).

Board Officers:
Prof. Gianfranco Parati (Milan, Italy) President
Prof. Paul K. Whelton (New Orleans, LA, USA) Past President
Prof. Markus Schlaich (Perth, Australia) President Elect
Dr. S.N. Narasingan (Chennai, India) Vice-President
Prof. Bader Almustafa (Saudi Arabia) Secretary-General
Prof. Michael Weber (New York, NY, USA) Treasurer

Board Members:
Prof. Leilani Mercado-Asis (Philippines)
Prof. Albertino Damasceno (Mozambique)
Prof. Flavio Danny Fuchs (Brazil)
Prof. Bert-Jan Van den Born (Netherlands)
Prof. Xiaowei Yan (China)

Special Advisors to the Board:
Prof. Daniel Lackland (Charleston, SC, USA)
Prof. Liu Lisheng (Beijing, China)
Prof. Norman Campbell (Calgary, Canada)

RTSL Representative:
Dr. Renu Garg

WHO Representative:
Dr. Kouamivi Agboyibor

Special Ambassadors:
Dr. Dagnovar Aristizabal (Colombia)
Dr. Kei Asayama (Japan)
Dr. Claudio Borghi (Italy)
Dr. Anping Cai (China)
Dr. Dr. Kara Nerenberg (Canada)
Dr. Martino Pengo (Italy)
Dr. Yuqing Zhang (China)
Dr. Taskeen Khan (Middle East)

Secretariat:
Prof. Gianfranco Parati
Internet: http://www.whleague.org

Editorial Office:
Editor-in-Chief: Dr. Daniel Lackland
Associate Editor: Dr. Detlev Ganten
Associate Editor: Mary L. Trifault
E-mail: whleague17@gmail.com

The WHL Newsletter is published quarterly by the World Hypertension League (ISSN 2077-7434).