



The new wave of Asia: A message from the president of the International Society of Hypertension

Globally, raised blood pressure is the leading risk factor accountable for over 10.4 million deaths per year.¹ The cardiovascular consequences of hypertension are devastating, which is why raised blood pressure requires aggressive confrontation. It is therefore disturbing that the number of adults with raised blood pressure increased over the past four decades from 594 million to 1.13 billion in 2015—due to population growth and aging.² But all regions in the world were not affected equally. For instance, the high-income Asia Pacific region indicated some of the highest global blood pressures in the 1970s, but it is also this region that showed the largest decreases in systolic blood pressure of 3.2 mm Hg per decade for women, and 2.4 mm Hg per decade for men.² In contrast to these decreases, blood pressure seems to have increased in populations from east and southeast Asia, as well as south Asia—with south Asia presenting with the highest mean blood pressures in 2015.²

The diversity within the vast continent of Asia in terms of socio-economic transformation, population growth, unique cultures, but also blood pressure and cardiovascular risk is clear. Addressing raised blood pressure as primary risk factor is paramount for this region—since of the 1.13 billion adults globally with raised blood pressure in 2015—258 million (23%) lived in south Asia, and another 235 (21%) million lived in east Asia.²

In order to actively address this challenge head-on, a new wave of stellar initiatives was launched in Asia. The establishment of the HOPE Asia Network (Hypertension, brain, cardiovascular and renal Outcome Prevention and Evidence in Asia) in 2016 was the ideal response from hypertension experts from 12 countries in the region—working collaboratively to tailor best practices for Asia in a concerted effort to markedly reduce cardiovascular morbidity and mortality. Countries joining this consortium include Japan, Korea, Malaysia, Thailand, Taiwan, Philippines, Pakistan, Indonesia, India/Nepal, Singapore, China, and Vietnam.

In this issue of the *Journal of Clinical Hypertension*, the prominent progress and activities of the HOPE Asia Network are showcased. It becomes clear why a region-specific approach is necessary to address hypertension with the latest evidence indicating uniquely Asian characteristics with regards to cardiovascular risk and responses to antihypertensive therapy. These unique features were previously discussed in detail³ and include the more frequent occurrence of especially hemorrhagic stroke, and nonischemic heart failure as common outcomes of hypertension; salt sensitivity as a common feature; and that mild obesity and slightly increased salt intake are significantly associated with the development of hypertension. To improve

hypertension control in the region, the recommendation based on region-specific work in Asia is to use long-acting calcium-channel blockade and renin-angiotensin-system blockade (with or without a diuretic).⁴

The HOPE Asia Network should be applauded for the significant strides taken in a relatively short space of time, as evidenced from a comprehensive range of updated information included in this issue on hypertension management and related aspects relevant to Asia. Among others, these topics include blood pressure variability, the role of ambient temperature, non-pharmacological management of hypertension, perspectives on country-specific Hypertension Guidelines, atrial fibrillation, and dementia.

One of the most outstanding contributions of the HOPE Asia Network is the impactful evidence provided on the importance and potential of out-of-office blood pressure monitoring in managing hypertension.⁵ Globally, there is now wide recognition on the value added by out-of-office measurements—also recommended by the recent American,⁶ European,⁷ and United Kingdom⁸ hypertension guidelines. Whereas most guidelines generally refer to 24-hour ambulatory blood pressure monitoring, the HOPE Asia Network is at the forefront when it comes to its substantial contributions of strong evidence on why home blood pressures should receive greater recognition. To expand work in this field and to ensure better patient management, the Network has recently published guidance on home blood pressure monitoring⁹; an expert panel consensus recommendation for home blood pressure monitoring in Asia¹⁰; and devised the Asia BP@Home study in all 12 Asian countries involved.^{11,12}

Following on from these developments, the Asian region is widely respected for its concrete contributions in the field of innovation, communication, technologies, and the practical uptake of these technologies in daily life. Moving forward in the management of hypertension, the innovation and use of accurate cuffless wearable ambulatory blood pressure monitoring devices is the logical next step—to not only measure blood pressure continuously but also environmental factors that may contribute to blood pressure elevation such as temperature and physical activity. With such developments already under way, it is clear that Asia, including the HOPE Asia Network, is an essential partner in improving global figures for the management and control of hypertension.

To conclude, in the world region which carries almost half of the global burden of raised blood pressure,² the HOPE Asia Network has become a pivotal partner to actively address hypertension in Asia. By using close collaborative networks to reach innovative

region-specific solutions for improved management of hypertension, substantial improvements in hypertension control are anticipated. The International Society of Hypertension clearly recognizes the commitment of the HOPE Asia Network as an ISH Affiliated Society and considers it an essential global partner.

CONFLICT OF INTEREST

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