The New Wave of Asia: A major step forward in confronting global hypertension

A comment by the Journal’s Editors

1 | INTRODUCTION

This special issue of the journal makes a powerful statement. It establishes most clearly the substantial contributions that scientists and clinicians in Asia have made to the practice of hypertension.

We should immediately acknowledge that although we have supported and encouraged this publication, all credit goes to Professor Kazuomi Kario who initiated this process and together with his distinguished colleagues has worked with exceptional diligence to plan and organize this major contribution to the hypertension literature. Thanks to their creative planning and thoroughness, a large portion of the leading hypertension authorities across Asia have participated in this unique work.

We should also point out that this special issue is fully supportive of the vision and commitment of the World Hypertension League, the official sponsors of this journal. The WHL is comprised of national and international hypertension organizations worldwide and collaborates closely in their mission of stimulating research, education, and clinical practice in hypertension.

It is accurate to say that the world’s progress in the clinical sciences of hypertension now depends equally as much on leadership from Asia as it does from authorities at the traditional Western centers of hypertension. Professor Kario’s collaborators represent the full geographic, cultural, and economic spectrums of Asia so that we are now being presented with a compelling picture of research and public policy in that vast region. And, beyond that, this special issue includes accounts of highly innovative advances and concepts that will contribute well beyond the boundaries of Asia to the global community of people affected by hypertension.

2 | DOCUMENTING PROGRESS

One of the accomplishments of the Asian initiative lies in creating new formal structures to coordinate the progress of hypertension care. The HOPE Asia Network had been established to set standards, initiate research, provide guidance, and document needs and progress in hypertension across Asia. Until recently, most guidance in hypertension management came from the United States and Europe, but it was not fully relevant to Asian needs. It is well known that outcomes of hypertension differ among these geographic locations: For instance, the most common adverse outcome of hypertension of Western Asian patients has been coronary events, whereas in East Asia, strokes have been the most common outcomes. As well, there are dietary differences, such as the greater consumption of dietary sodium in many of the Asian locations. In addition, cultural and economic factors, climate differences, and—more recently—air quality are regional factors that influence blood pressure and cardiovascular risk.

In the Western experience, many studies have focused on possible differences among ethnicities in the characteristics of hypertension, particularly those affecting patients of African ancestry and patients classified as Caucasian. Likewise, within Asia there is a marked heterogeneity among regions. Indeed, even within some of the larger countries, there are important regional differences based on ethnicity that may be physiologic as well as cultural. In fact, some of the articles published previously in this journal have focused on differences among ethnicities within countries like China and also have addressed such issues as the role of homocysteine as a factor in hypertension and its outcomes. And again, the peoples of South Asia appear to have a different profile of cardiovascular risk than elsewhere in Asia, with a particular vulnerability to coronary events. We must also reluctantly acknowledge that one of the major contributing factors to hypertension and overall cardiovascular risk in Asia regrettably has been imported from Western countries: The rapidly growing access to high-calorie and high-fat fast-food outlets in Asia has contributed remarkably to concern over obesity and metabolic disorders, adding yet further to the comorbidities associated with hypertension.

Thus, the early articles in this issue serve to introduce the work of the HOPE Asia Network and demonstrate how this new entity has become a functional vehicle for addressing the diversity of challenges inherent in dealing with hypertension. The network also provides a platform for monitoring progress in the public health aspects of hypertension across the full geography of Asia, including the obvious clinical questions of diagnosis, awareness, treatment, and control.

3 | GUIDELINES AND NEW TECHNOLOGIES

We are delighted that discussion of the guidelines from some of the major countries in Asia is part of this special issue. Just in the last three
years, new guidelines in China, Japan, Korea, India, and several other
Asian nations have been published. A careful look at the individual
country reports that are presented later in this issue will give a detailed
accounting of how the leaders of hypertension are coping with the
demands for new and evidence-based hypertension guidelines. As we
have already mentioned, it would be inappropriate for Asian guidelines,
either for the region as a whole or for individual countries to follow
the traditional guidelines that have been published in North America,
Europe, and other Western centers. Even though there is now a good
understanding across most nations about how best to develop guide-
lines and evaluate the evidence that supports recommendations for
clinical practice, the circumstances in each country such as ethnicity,
dietary practices, availability of professional medical personnel, and
economic support must inevitably govern how hands-on clinical prac-
tice will develop. What is most encouraging, however, is that far more
research in hypertension—including major clinical trials—is now being
conducted in Asia. We are proud that many of the articles that we have
previously published in this journal reflect that growing trend. In turn,
this rapidly growing knowledge will greatly strengthen and add author-
ity to national hypertension guidelines in Asia.

What is perhaps quite dramatic about the content of this issue
is the focus on innovative approaches to hypertension that may
strongly affect how hypertension is managed outside Asia. There
are exceptional articles dealing with ambulatory blood pressure
monitoring, which has been available in Western countries for
several years, but is still not used as effectively or consistently as
possible. The engagement of experts from Asia in the field adds
strong insights. We are particularly encouraged by a focus on
home blood pressure monitoring, which appears to be a growing
trend that ultimately may play a dominant part on how hyperten-
sion is monitored and treated throughout the world. This is an area
in which Asian research and experience is playing a dominant role,
perhaps stimulated by the fact that the development and manu-
ufacture of modern accurate devices that stand up to rigorous vali-
dation scrutiny largely have their origins in Asia. We are still trying
to figure out, in practical terms, how non-routine measurements
such as central blood pressure can play a role in clinical practice;
again, this topic is under strong consideration in Asia and repre-
sented in this special issue.

As in much of North America and Europe, many countries in Asia are
confronting the aging of their populations. We note articles in this issue
that take these trends very much into consideration. Hypertension and
heart failure, and the role of hypertension in the development of atrial
fibrillation, are subjects of rapidly growing interest worldwide, not just
in Asia. Perhaps the most difficult and frustrating of the conditions of
aging is dementia, an enormous problem that right now remains largely
unresolved in terms adequate remedies or preventive strategies. This
topic is also addressed within these pages.

Finally, we express our particular pleasure that there are no
fewer than 12 separate articles describing progress and the state of
hypertension in individual countries of Asia. To us, this represents
the commitment and enthusiasm of national hypertension leaders
to advance knowledge and patient care in hypertension across this
entire continent.

OUR THANKS

Let us both say how delighted we are that this journal has enthusi-
asticly embraced Professor Kario’s proposal to produce an issue
focused on hypertension in Asia. Our distinguished friends and
colleagues from Asia have made a major contribution to the under-
standing and management of hypertension not just in Asia, but also
in the most positive fashion globally to all those who work across the
full spectrum of hypertension.

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