A GOOD YEAR

Energized and enlightened by its rigorous strategic planning initiative, the American Society of Hypertension (ASH) has spent a busy and productive year in reshaping its ongoing activities and generating new initiatives directed toward its vision, mission, and goals. The theme for the 22nd Annual Scientific Meeting and Exposition, “Translating Hypertension Research into Cardiovascular Health” sprang from ASH’s core values of “translating basic and applied research into effective hypertension prevention and treatment strategies” and “concern for patients with hypertension and those who treat them.” The emphasis on innovative health care delivery research and implementation clearly reflects the Society’s mission statement, “To improve the care of patients with hypertension and associated disorders...by assisting health care professionals in addressing the challenges of modern-day care of patients with hypertension.”

We have gained remarkable insights from successful programs to improve blood pressure control in other countries, including the United Kingdom and Canada, as well as in our own Veteran’s Administration Health System, that were presented at the annual meeting. Strategies as diverse as pay-for-performance incentives, monitoring of prescribing practices and outcomes with feedback to providers, enhanced communication with use of a team approach with reminders to both providers and patients, and active participation of pharmacists and nurses in patient care have been shown to vastly improve blood pressure control and are being tested for their effects on cardiovascular disease outcomes. These approaches are ripe for testing in the community practice setting by ASH chapters and/or by the national Society.

We can look to our colleagues in the ASH Carolinas-Georgia chapter for a sterling example of what can be done when clinical hypertension specialists join forces with primary care providers with the common goal of improving blood pressure management in the community. The Carolinas-Georgia chapter has collaborated with the Hypertension Network, based at the Medical University of South Carolina, and the Community Physicians Network, a consortium of practices in Georgia that includes mainly urban clinics serving predominately low-income African American patients, to develop a comprehensive program that includes establishment of locally based education for primary care providers, referral networks for complex hypertension patients, and a practice network with a central database. The database, which includes more than 500,000 patients with hypertension and other cardiovascular disease risk factors, supports practice audit and feedback reports to enhance quality improvement, identify continuing medical education topics, and facilitate clinical trials to test new therapeutic and best-practice approaches to risk factor management. Striking improvements in control of blood pressure (from 49% to 66%) and related cardiovascular disease risk factors have been reported in this patient cohort in the 2000 to 2005 period.

ASH is fostering the extension of the Carolina-Georgia effort to other venues through a phase 1 pilot project for the Regional Health Information Organization (RHIO)—National Hypertension and Cardiovascular Risk Factor Registry. This project aims to assess the interest of practices, especially those with designated clinical hypertension specialists, in participating in a network with a centralized database that uses a novel data acquisition and management system. Practices that express interest will be invited to join in this collaboration between ASH and the Hypertension Initiative. Ultimately, the project will develop and implement a strategy for each of the 8 ASH chapters to enroll clinical practices within their region to participate in a network with a centralized database. This exciting initiative will provide an ideal vehicle for the 1300 ASH designated clinical hypertension specialists to leverage their expertise by working with primary care providers who share in our vision: to eliminate hypertension and its consequences.

Recognizing that the care of the approximately 130 million hypertensive and prehypertensive persons in the United States resides with primary care providers, ASH has undertaken a number of initiatives to reach out to this important professional group by:

• Engaging leaders in the primary care community, both academic and office-based, to become actively involved in planning for and supporting the Society’s future activities, including the annual scientific meeting, local and regional freestanding educational programs targeted to primary care providers, and the ASH clinical hypertension review
course. We foresee that this alliance will enable broader dissemination and utilization of the ASH position papers, the ASH hypertension rounds, and the hypertension update, as well as broader readership of the ASH journals.

- Conducting a series of Town Hall meetings in various regions of the country to assess the needs and capabilities of ASH members and their primary care counterparts to implement the ASH strategic plan. The aim of this endeavor is to actively engage wider participation of our membership in hypertension education at all levels, including contributing to ASH writing groups, submitting manuscripts to the ASH journals, networking with primary care providers on a local and regional basis to enhance quality of care, and participating actively in the annual scientific meeting.

Collectively, these initiatives, which were warmly received at our annual business meeting, are designed to transform the Society from a "top down" organization into one with broad grass roots involvement and commitment to our core values, mission, and vision. From the enthusiasm and energy expressed by the members at the annual meeting, it is clear that ASH has a new vision and a new feeling of collegiality that will greatly enhance the care of our patients. By working together in a collaborative environment, we believe that the Society can broaden the scope of its activities and extend its reach without losing focus. We are counting on your active participation in this exciting endeavor.

Suzanne Opario, M.D.
President, American Society of Hypertension, Inc.

REFERENCE