

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ



SPECIALIZED HYPERTENSION CLINICS

Joint EHS-Astra Zeneca Program

Two-Year Experience
(2014-2016) and Future Plans

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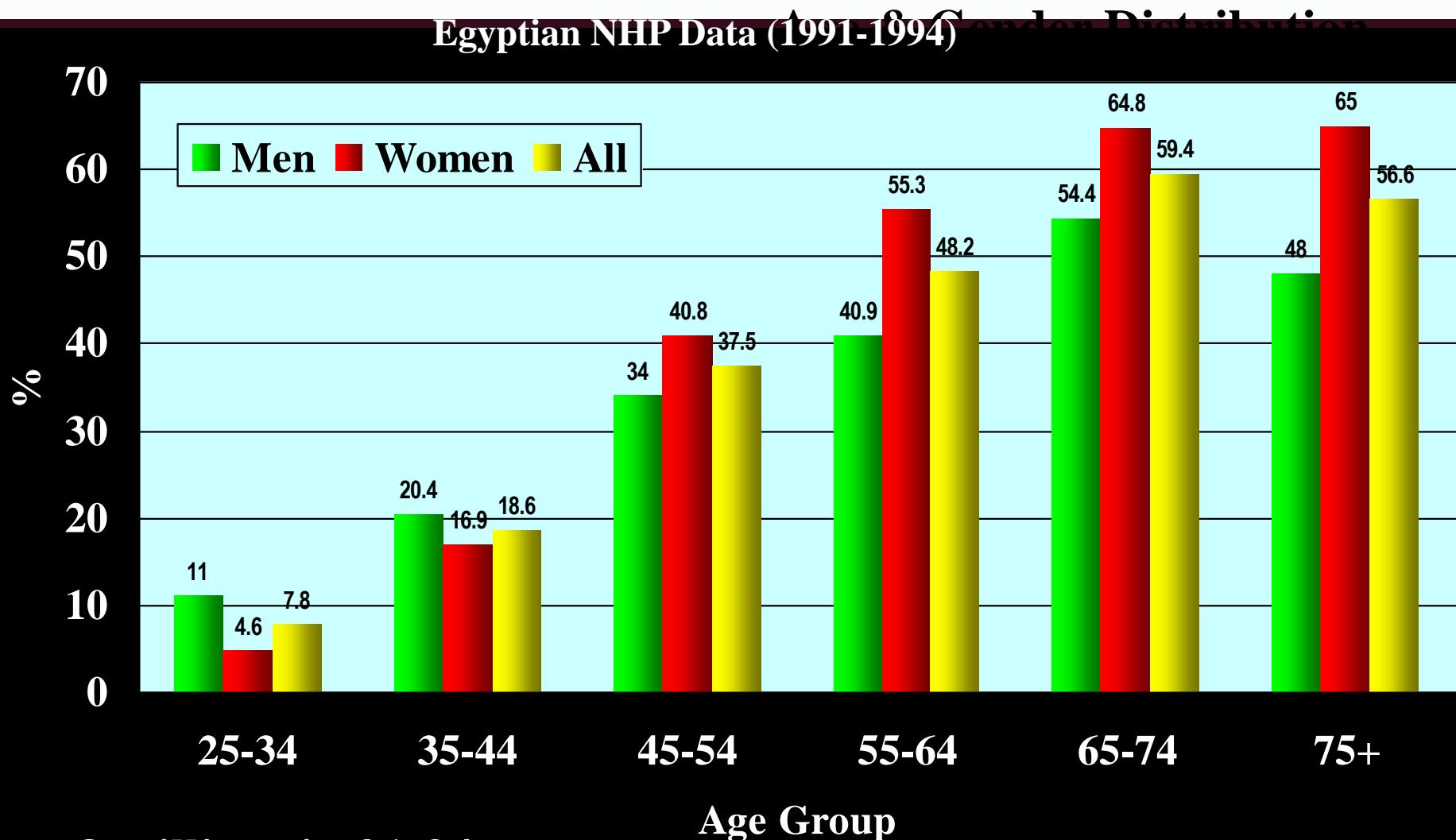
Table 1. Estimated Number of Individuals Aged ≥20 Years With Blood Pressure >140/90 mm Hg in 2000 and Predicted Number of Affected Individuals in 2025

Region	Prevalence 2000, Millions	Predicted Prevalence 2025, Millions	Increase, Millions
Established market economies	239.5	309.7	70.2
Latin America and the Caribbean	114.3	200.6	86.3
Former socialist economies	93.1	103.7	10.6
Middle East crescent	73.8	152.6	78.8
China	181.6	299.2	117.6
India	118.2	213.5	95.3
Other Asia and islands	71.4	129.4	58.0
Sub-Saharan Africa	79.8	150.7	70.9
Total	971.7	1559.4	587.7

Adapted from Kearney et al¹³ with permission from Elsevier.

PREVELANCE OF HYPERTENSION IN EGYPTIANS

Egyptian NHP Data (1991-1994)

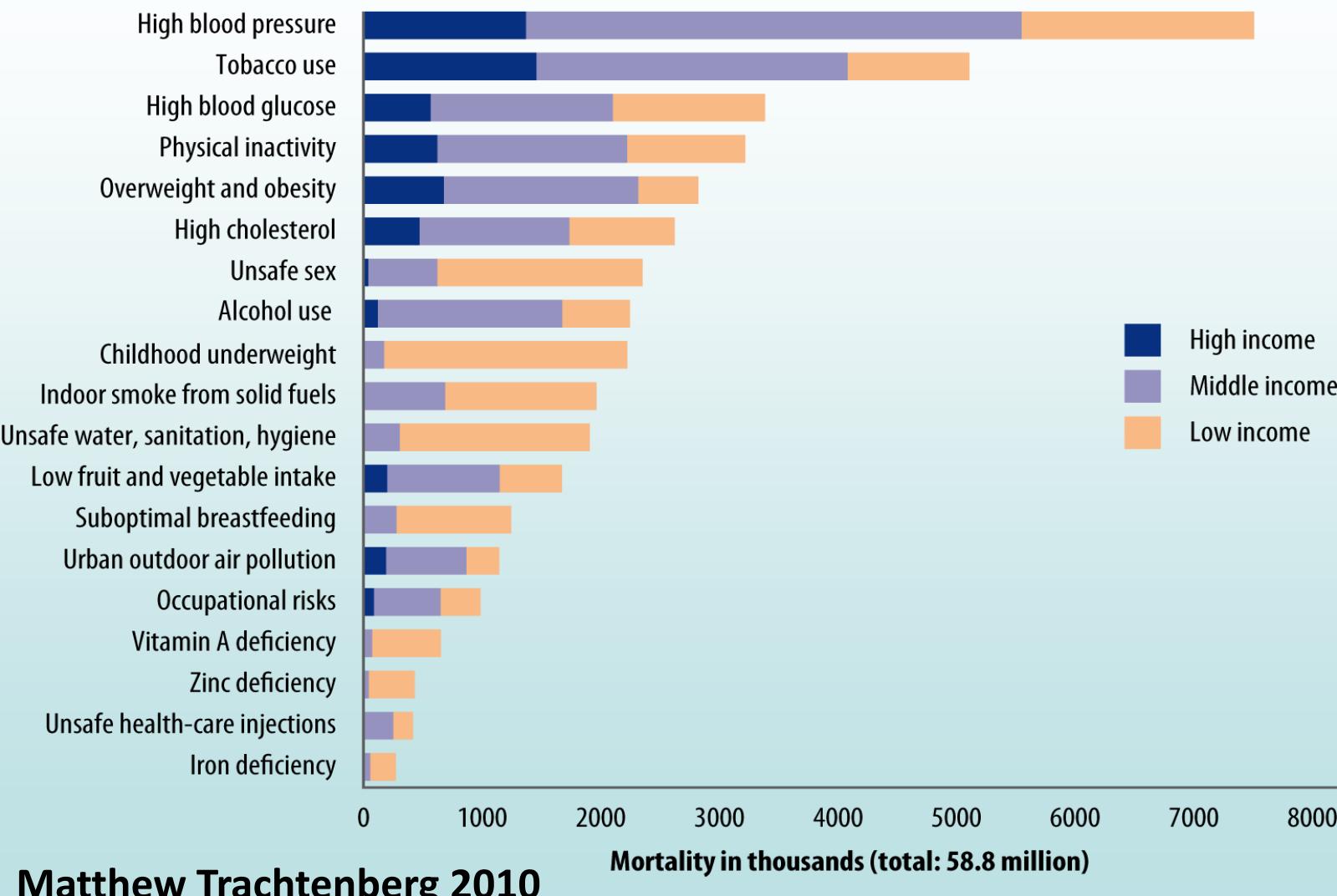


8 millions in 91-94

Problem of Hypertension in EGYPT

- More than 50% of Egyptians older than 60 y have high BP
- It is predicted that with an Egyptian population of more than 90 millions, there are more than 15 millions with hypertension.

Leading Causes of Deaths, by Country Income Level



Matthew Trachtenberg 2010

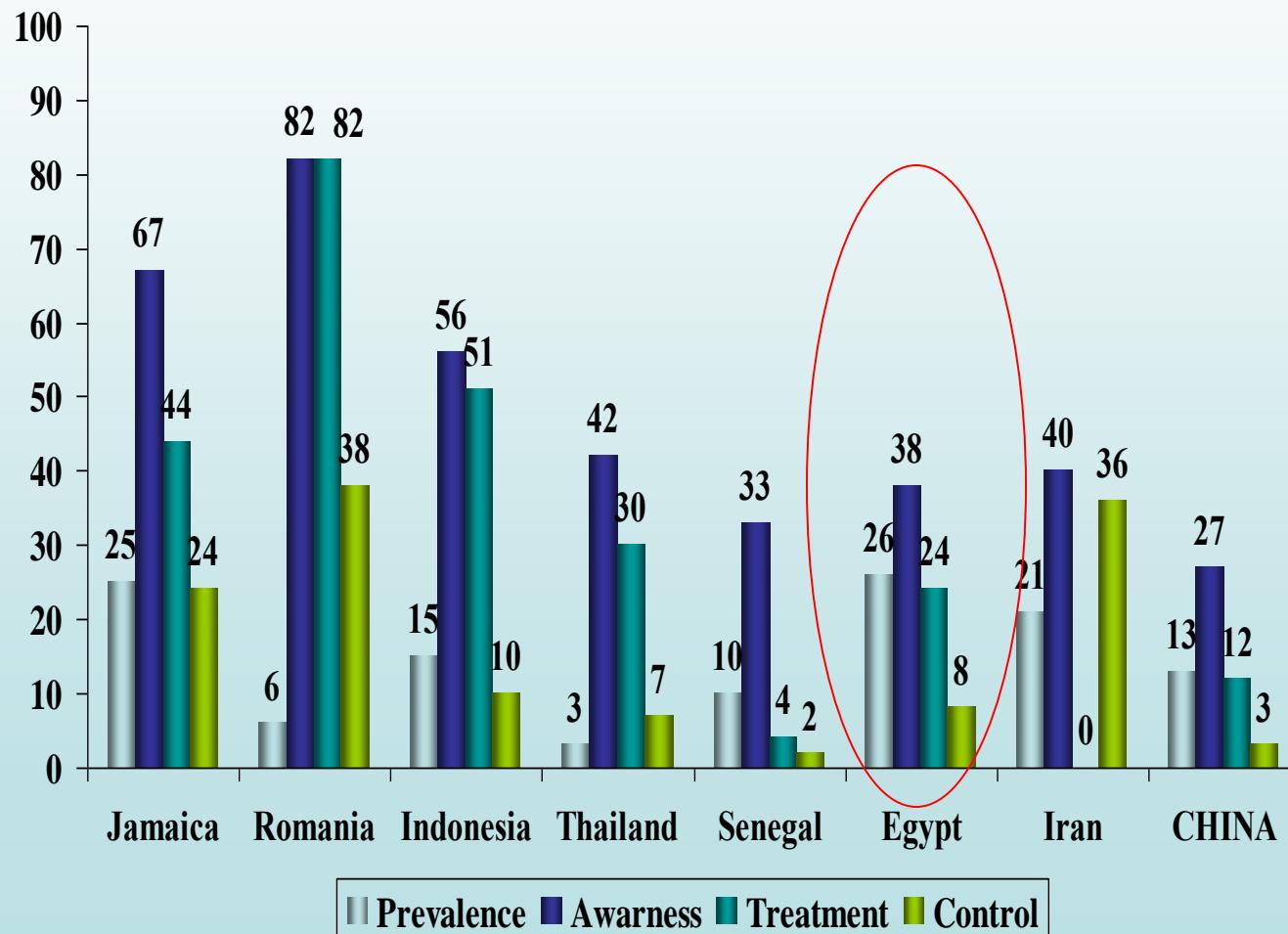
"Global Health Risks: Selected Figures and Tables." (2004).

http://www.who.int/entity/healthinfo/global_burden_disease/global_health_risks_report_figures.pdf

Rates of Awareness, Treatment and Control

HYPERTENSION –Developing World

Prevalence, Awareness, Treatment and Control



Why focus on high blood pressure?

- Main risk factor for heart disease, stroke and kidney failure
- Aging population will lead to an increase in these conditions
- Common health problem (26.3% of adults)
- Potential for reducing negative effects through prevention and control measures

The beginning of Ideas.....

WHL day 14/5/2014

اليوم العالمى لارتفاع ضغط الدم

**Cardiology Department
Zagazzig University**

Why Hypertension Clinics

- Hypertension is a major health problem in Egypt
- Rates of awareness, treatment and control are low
- Limited information and training of Egyptian physicians in the field of HTN
- No specialized hypertension clinics are established in Egypt
- The scientific approach based upon the recent Egyptian guidelines will limit cost of patients care while achieving a better BP control
- Under and over-diagnosis of HTN will be avoided

Why Hypertension Clinics ?

Problems of Over-diagnosis

- Prescribing unnecessary medications
- Psychological impact of a wrong diagnosis of HTN
- Costs & side effects of medications
- Ordering unnecessary laboratory tests
- Financial burden on Egyptian health care system.

Why Hypertension Clinics ?

Problems of under-diagnosis

- No treatment or follow-up for truly HTN Pts
- Risks of HTN complications
 - HF
 - Stroke
 - Renal failure
 - CAD
 - Aortic aneurysms
 - Aortic dissection
 - Arrhythmias

Why Hypertension Clinics

- Correct diagnosis of HTN: follow the GLs
- Proper evaluation of hypertensive pts: clinical & laboratory
- Define HTN severity
 - Assess associated CVRFs
 - Diagnose TOD:
 - LVH, proteinuria, RF, aortic aneurysms, carotid & vertebrobasilar dis,
 - Identify & manage co-morbid conditions: obesity, DM, OSA, CAD, PAD

Why Hypertension Clinics ?

Proper & Optimal Treatment

- Initiate treatment at the right time
- Correct choice of initial drug ttt
- Pt education
- BP monitoring & follow-up

Cost Containment

- Limit lab workup
- Stress LSM as essential element
- No drug therapy in low risk patients
- Initiate therapy
- Avoid prescribing unnecessary medications
- Limit office visits to the necessary

Why Hypertension Clinics ?

Factors influencing choice of antihypertensive drugs

- **Patient's age**
- **Drug cost and patient's socioeconomic status**
- **Previous experience of the patient**
- **Previous experience of the physician**
- **Presence of**
 - CV risk factors,
 - Subclinical organ damage,
 - Clinical cardiovascular disease,
 - Comorbid conditions
 - Use of drugs that may interact with antihypertensive agents.

Why Hypertension Clinics ?

- Data collected from clinics will provide the bases for new epidemiologic information
 - Prevalence of HTN
 - Patients demographic characteristics
 - Rates of awareness, treatment, control and adherence to therapy
 - Reasons for failure of BP control
 - Prevalence of hypertensive complications
 - Associated cardiovascular risk factors
 - Secondary HTN
- Increase public and community awareness of HTN
- Create and increase interest and knowledge about hypertension among young Egyptian physicians

PROCESS

Clinics

Site	Date of beginning
1.Cairo	22/12/2014
2.Ain Shams	13/1/2015
3.Helwan	8/12/2014
4.Zagazig	11/1/2015
5.Alexandria	14/1/2015
6.Suez Canal	1/1/2015
7.Beni Suef	(6/8/2014)
8.Menia	18/1/2015
9.Assiut	18/1/2015

- Personnel
 - BP

Technique

الجمعية المصرية لارتفاع ضغط الدم
مشروع عيادات ارتفاع ضغط الدم
جدول بتقارير زيارات لجنة المراقبة والمتابعة للمحافظات المختلفة

Equipment:-

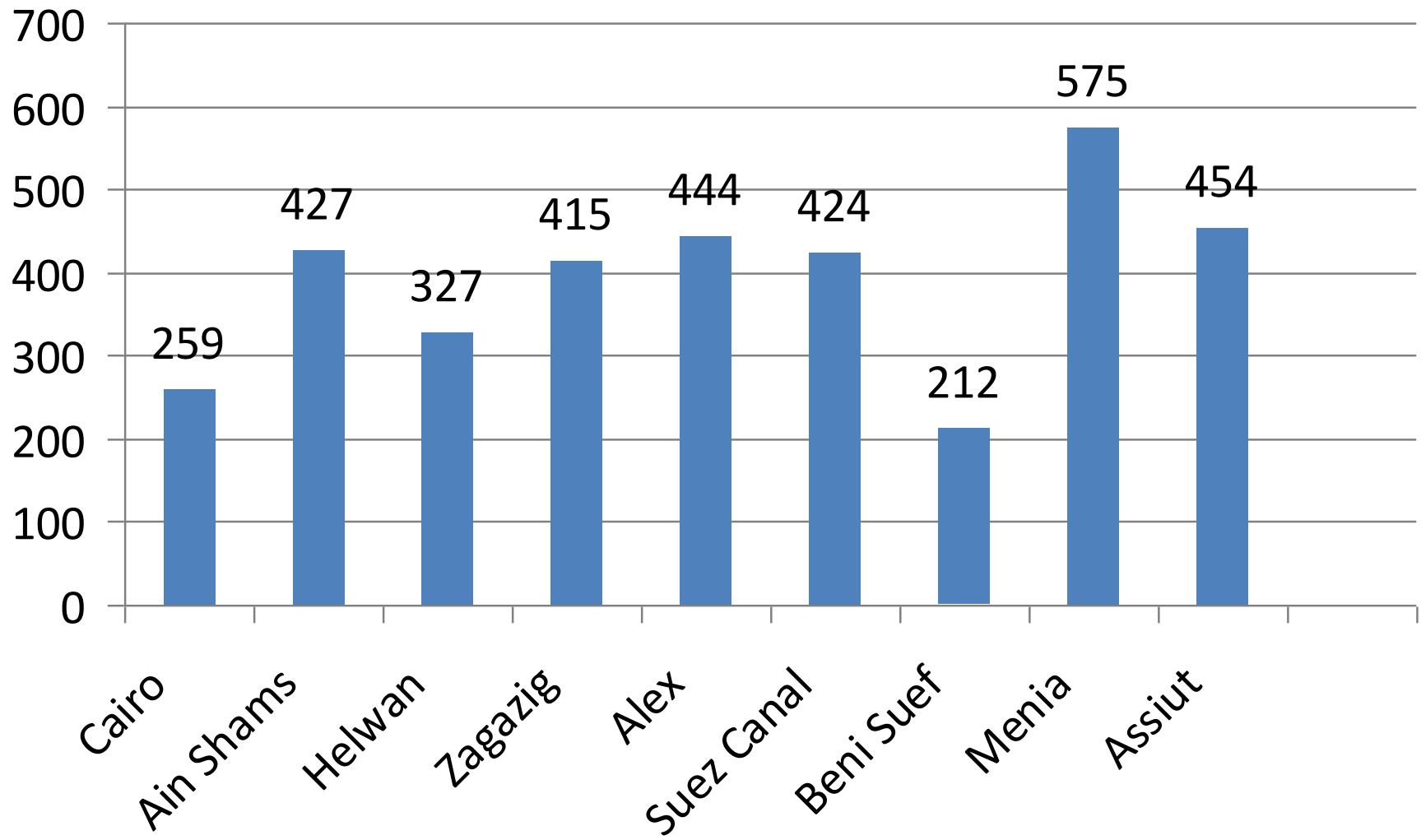
- AMBPM
 - Digital device
 - Scale
 - Measuring tape
 - Laptop/PC/net

الجمعية المصرية لارتفاع ضغط الدم
مشروع عيادات لارتفاع ضغط الدم
جدول بنتائج زيارات لجنة المراقبة والمتابعة للمحافظات المختلفة

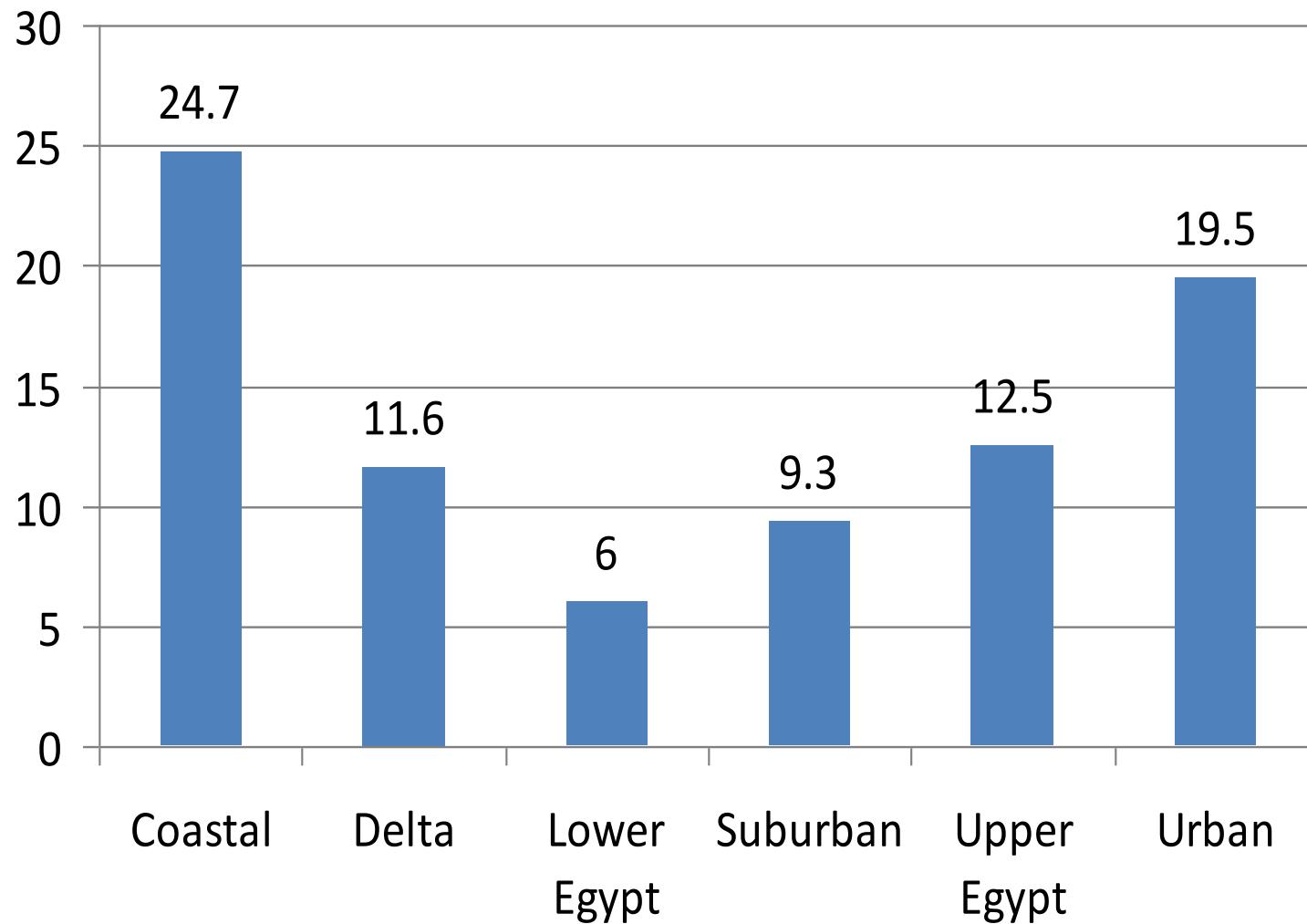
Main Results

n = 3505

Population



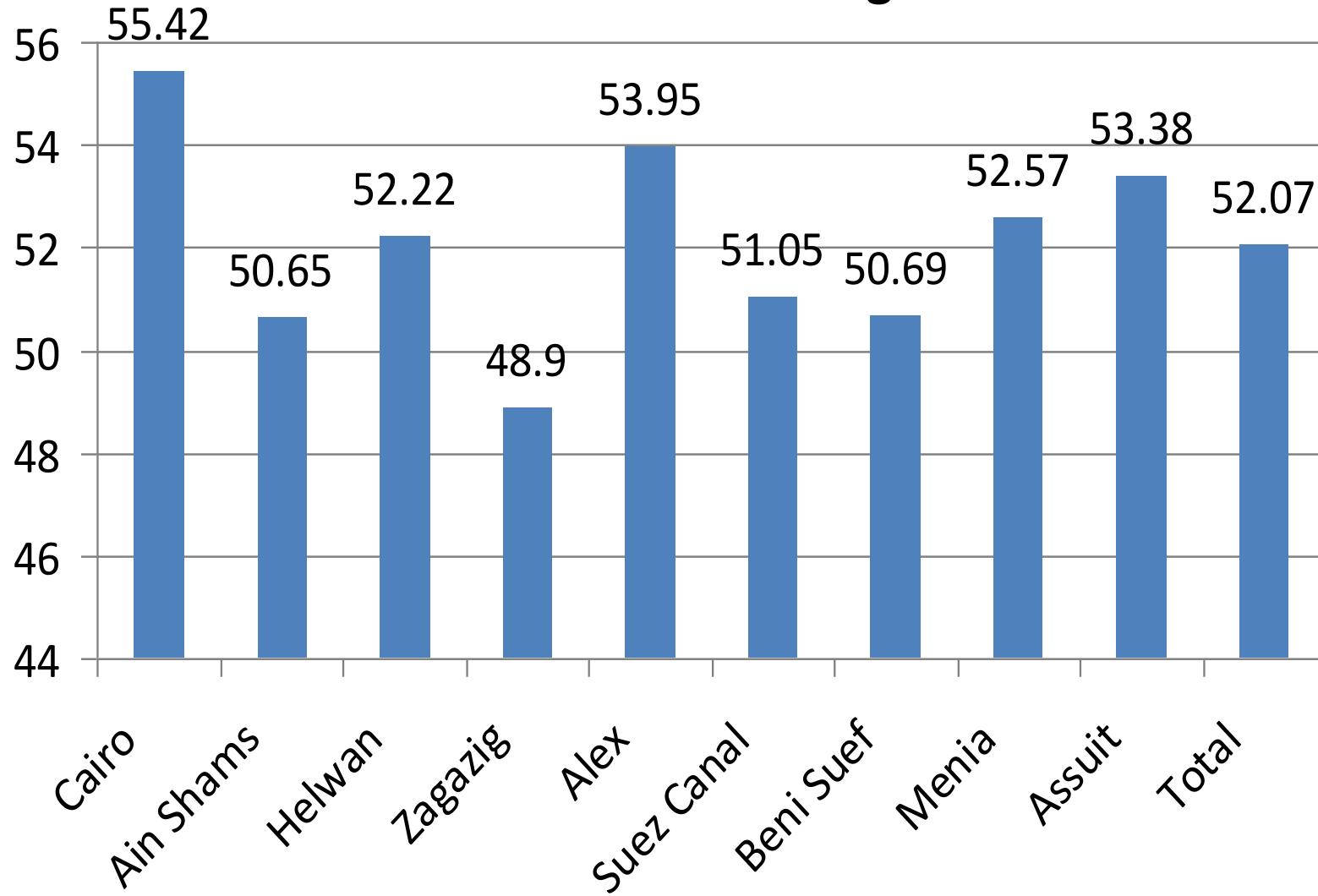
Geographical Distribution



Age Distribution

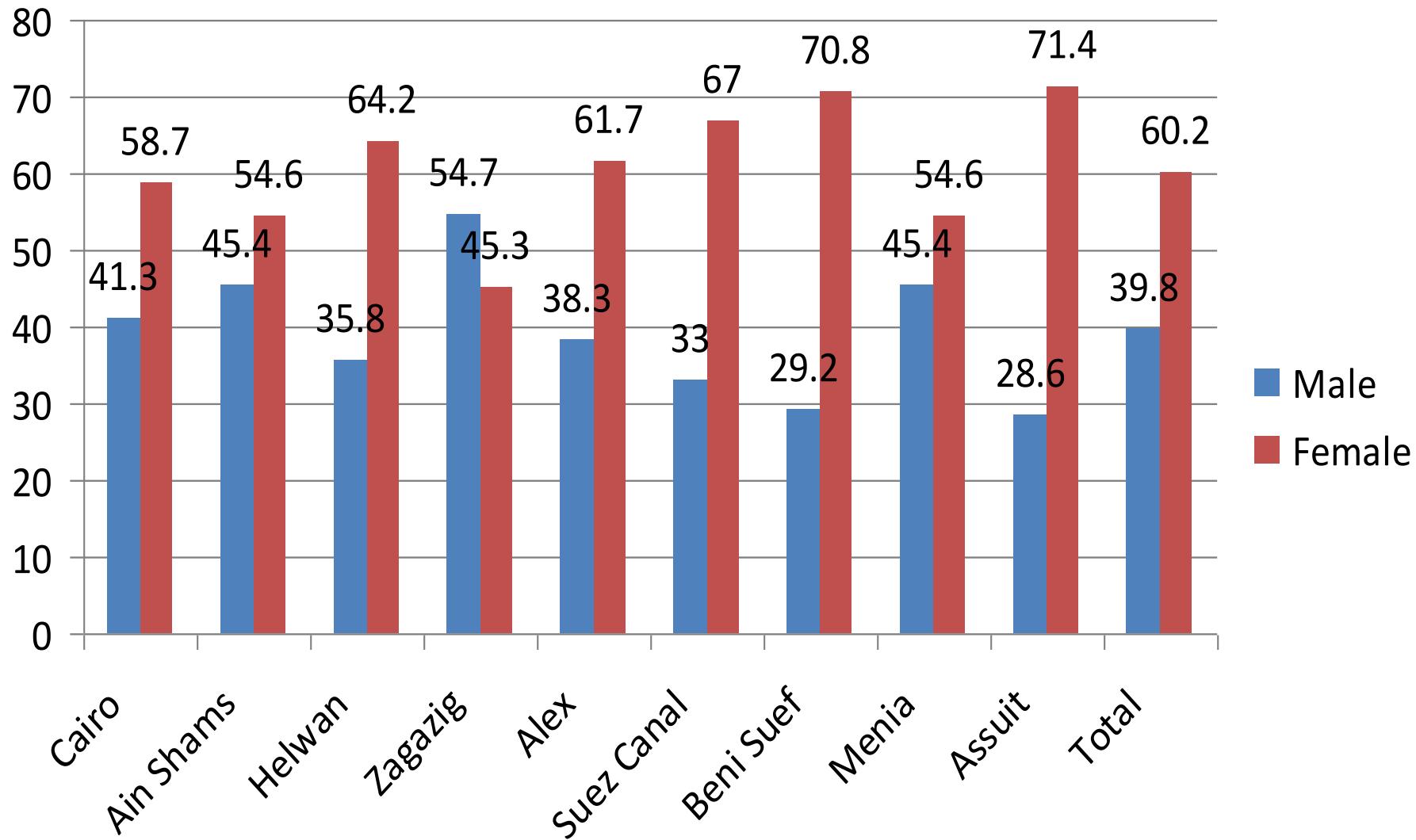
(range 17 – 91y m 52.1 ± 11.6)

Mean Age

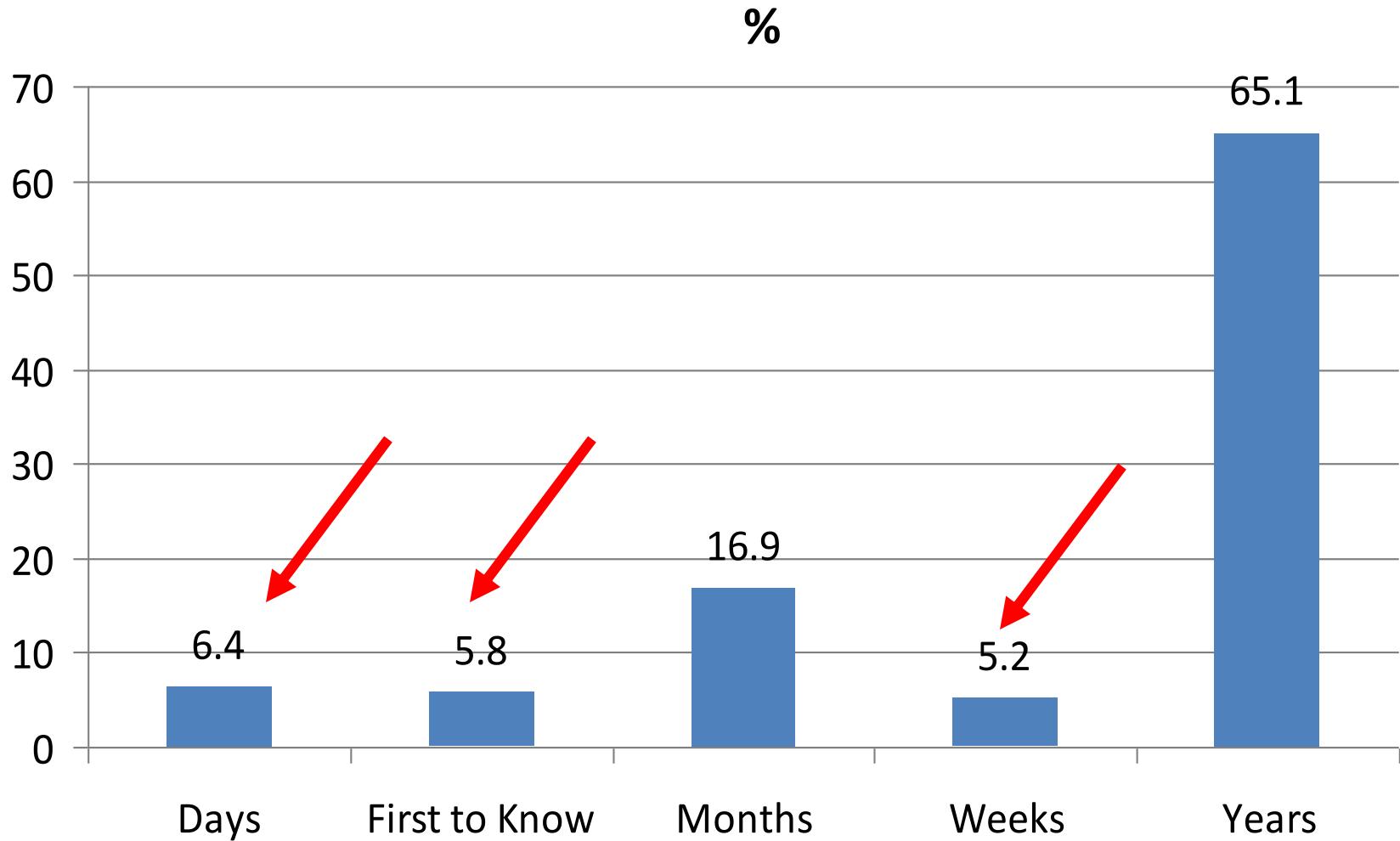


Gender Distribution

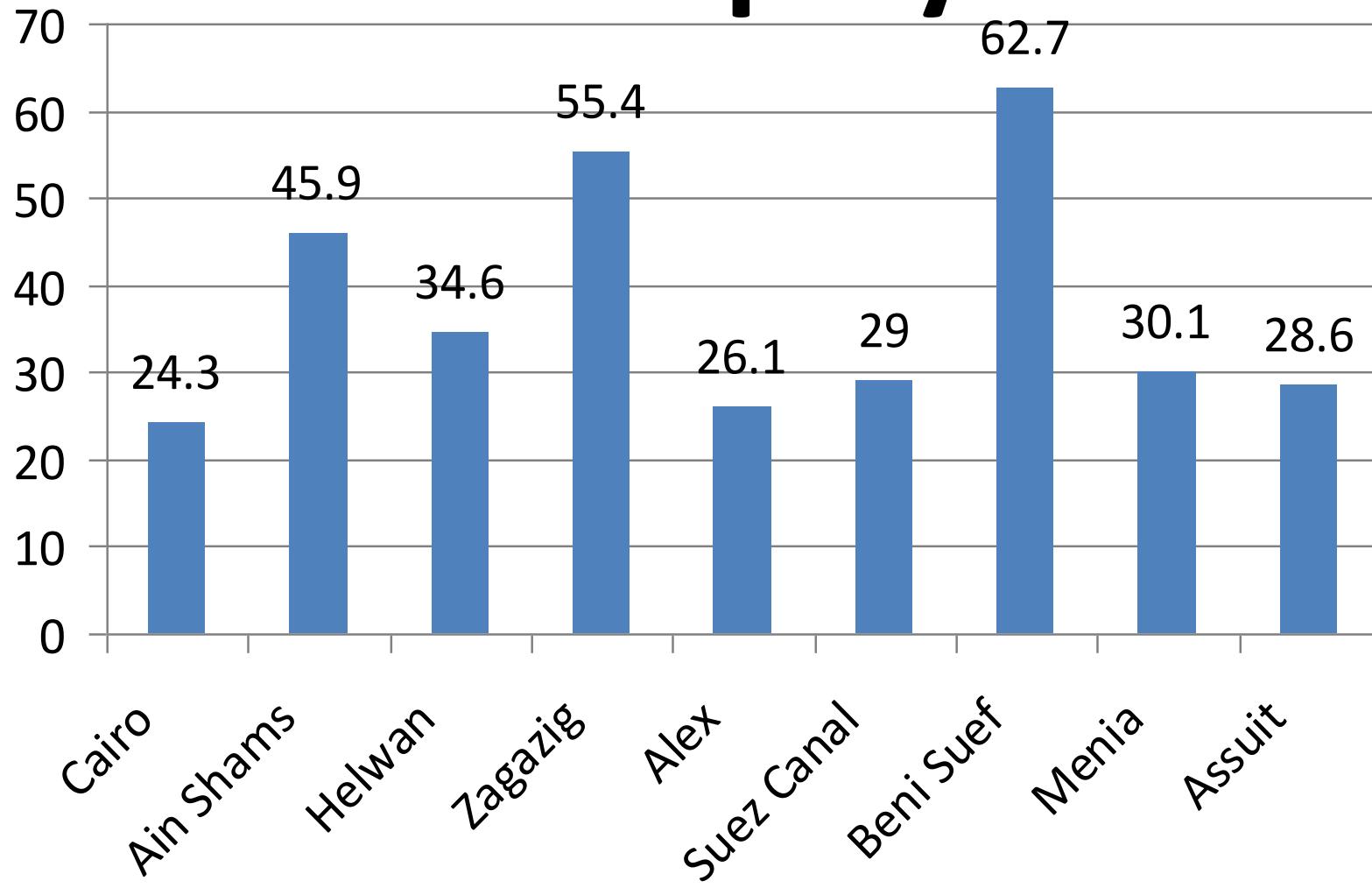
(60% F , 40% M)



Duration of HTN

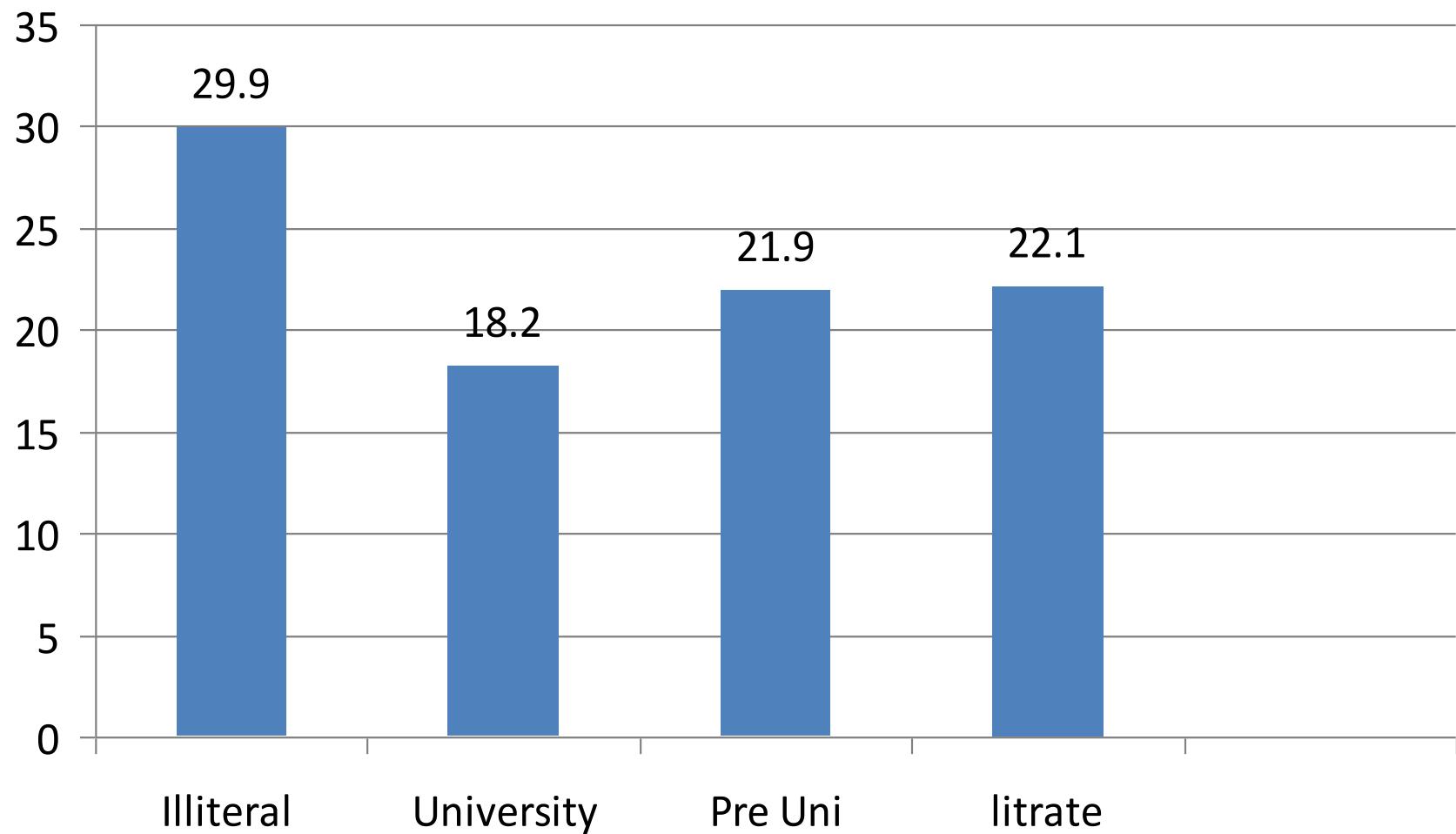


Employment

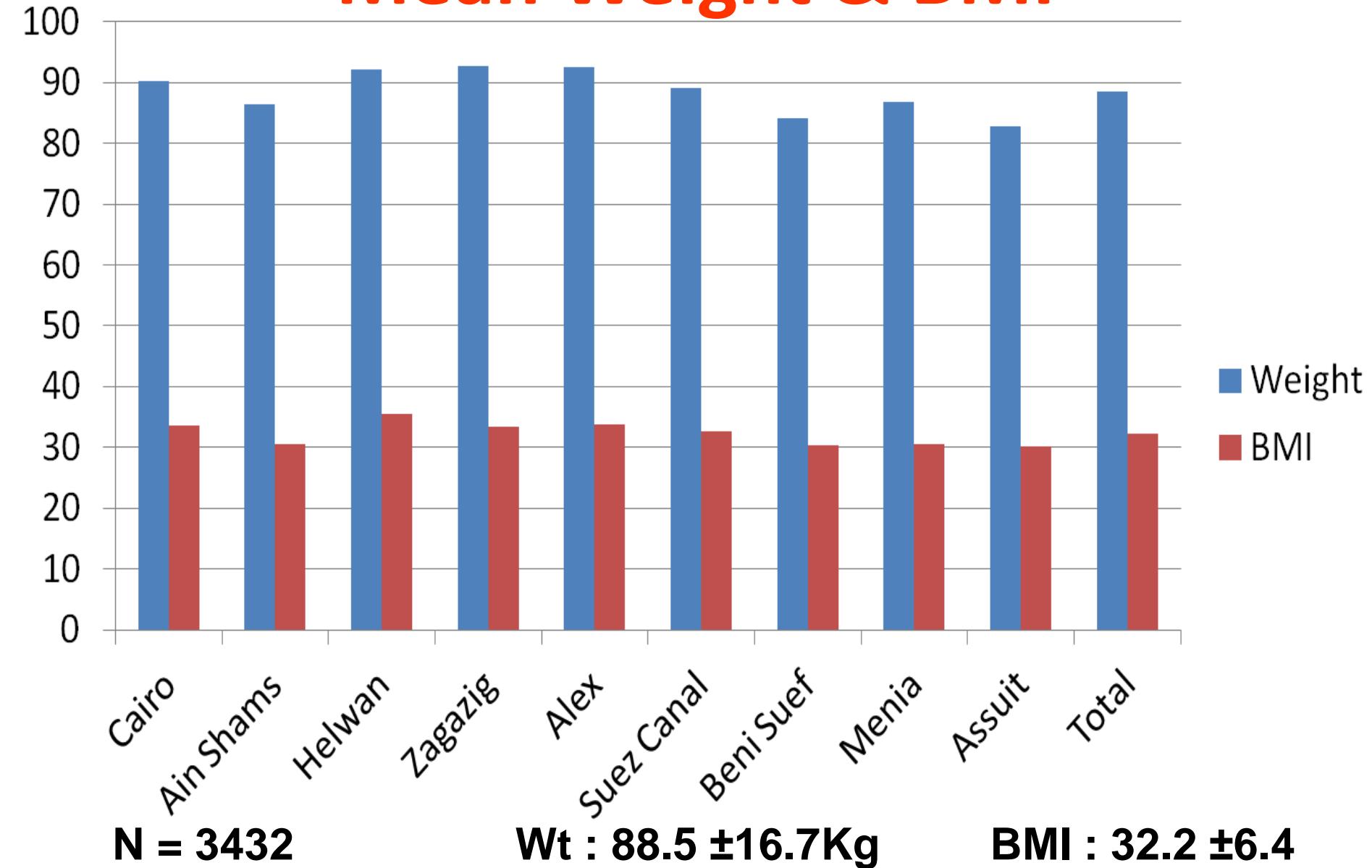


Education of Total Population

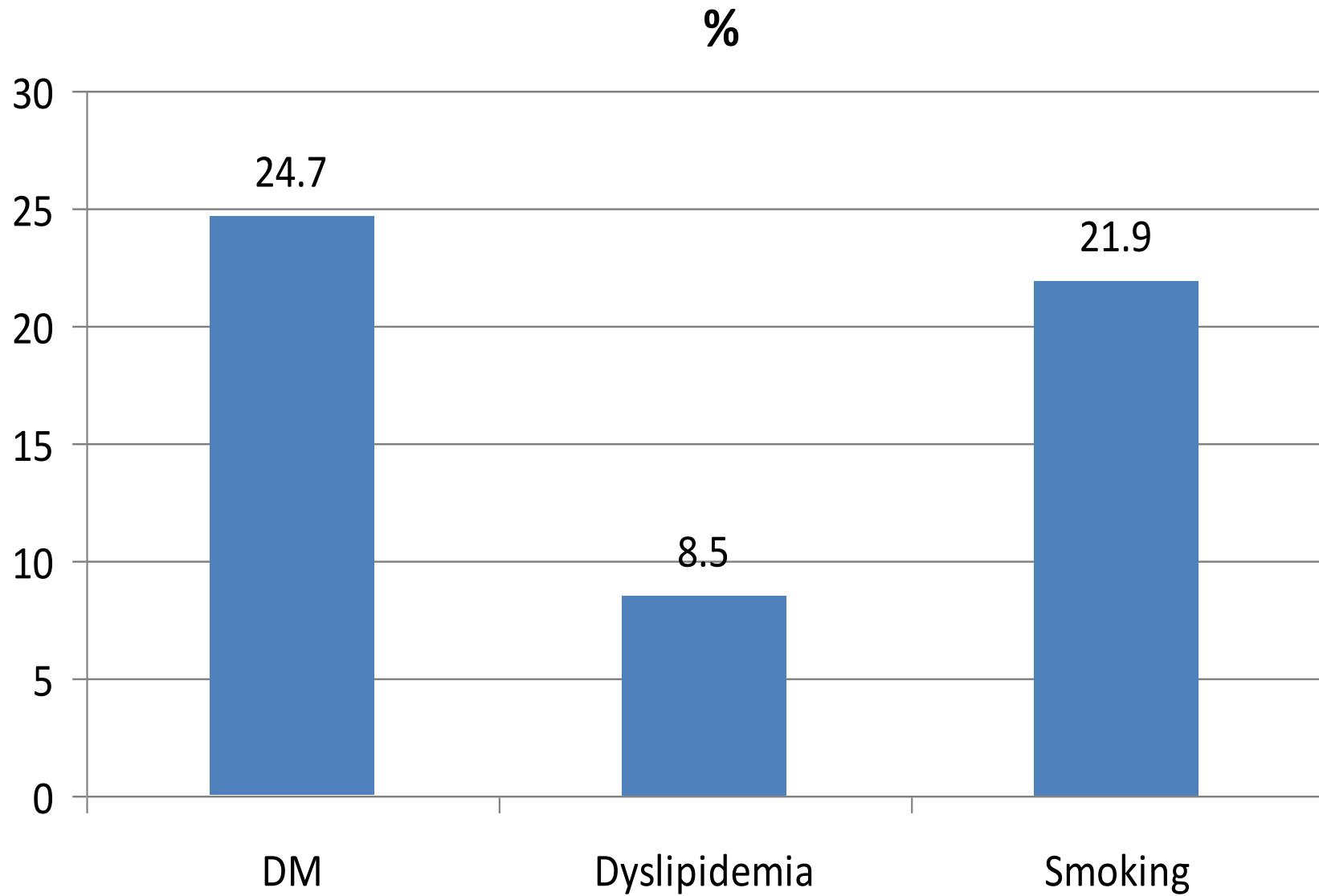
%



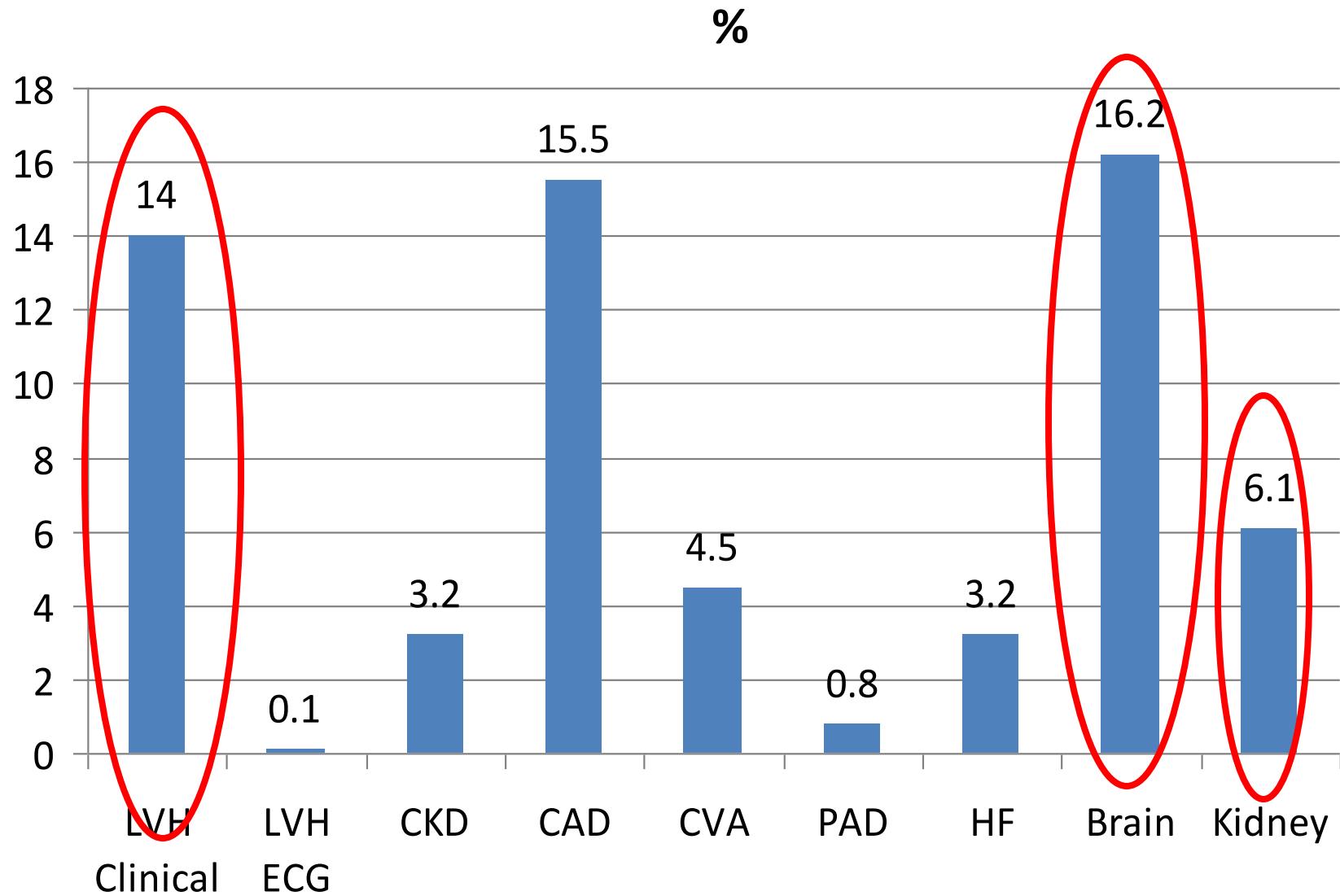
Mean Weight & BMI



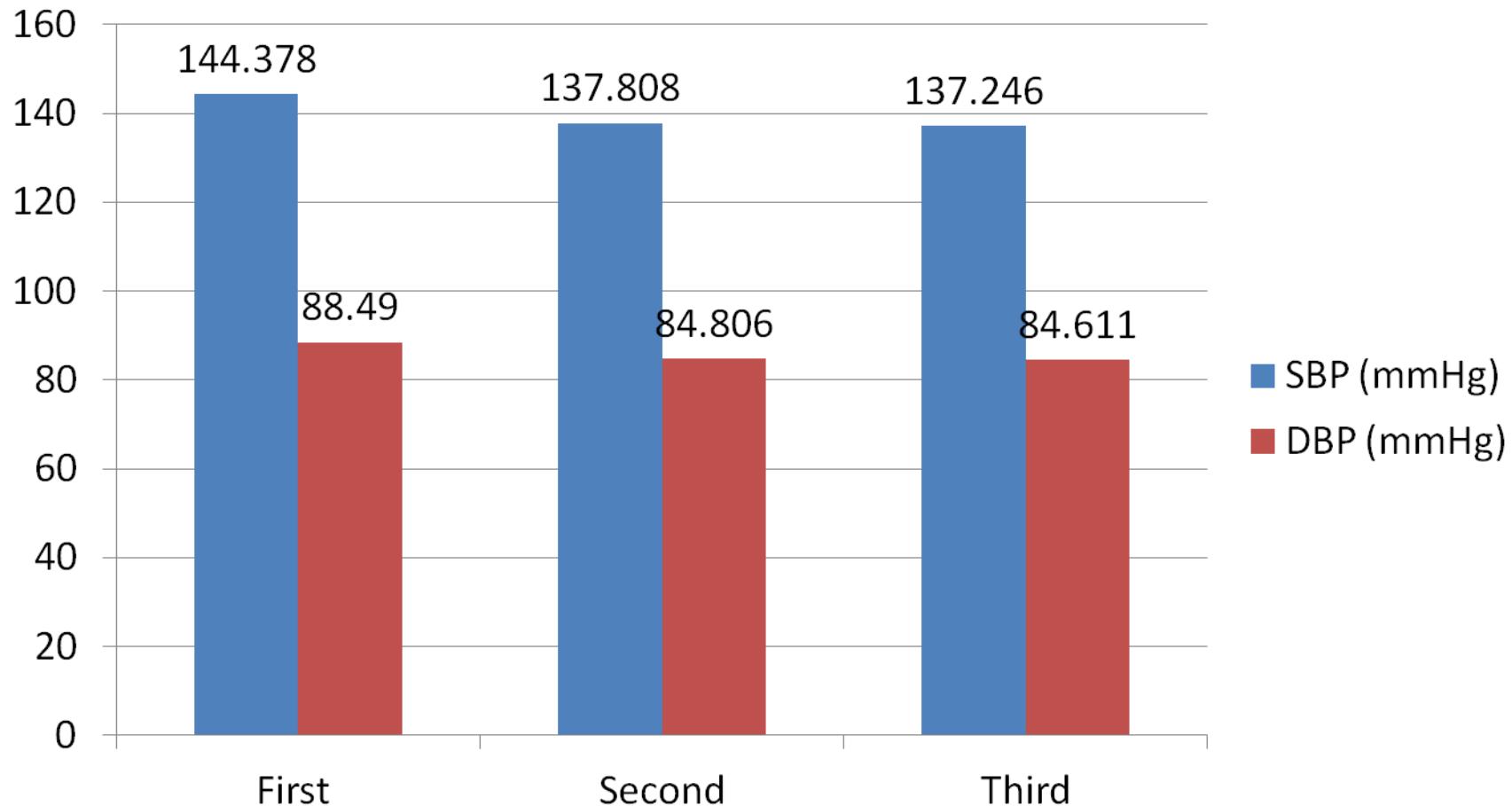
Cardiovascular Risk Factors



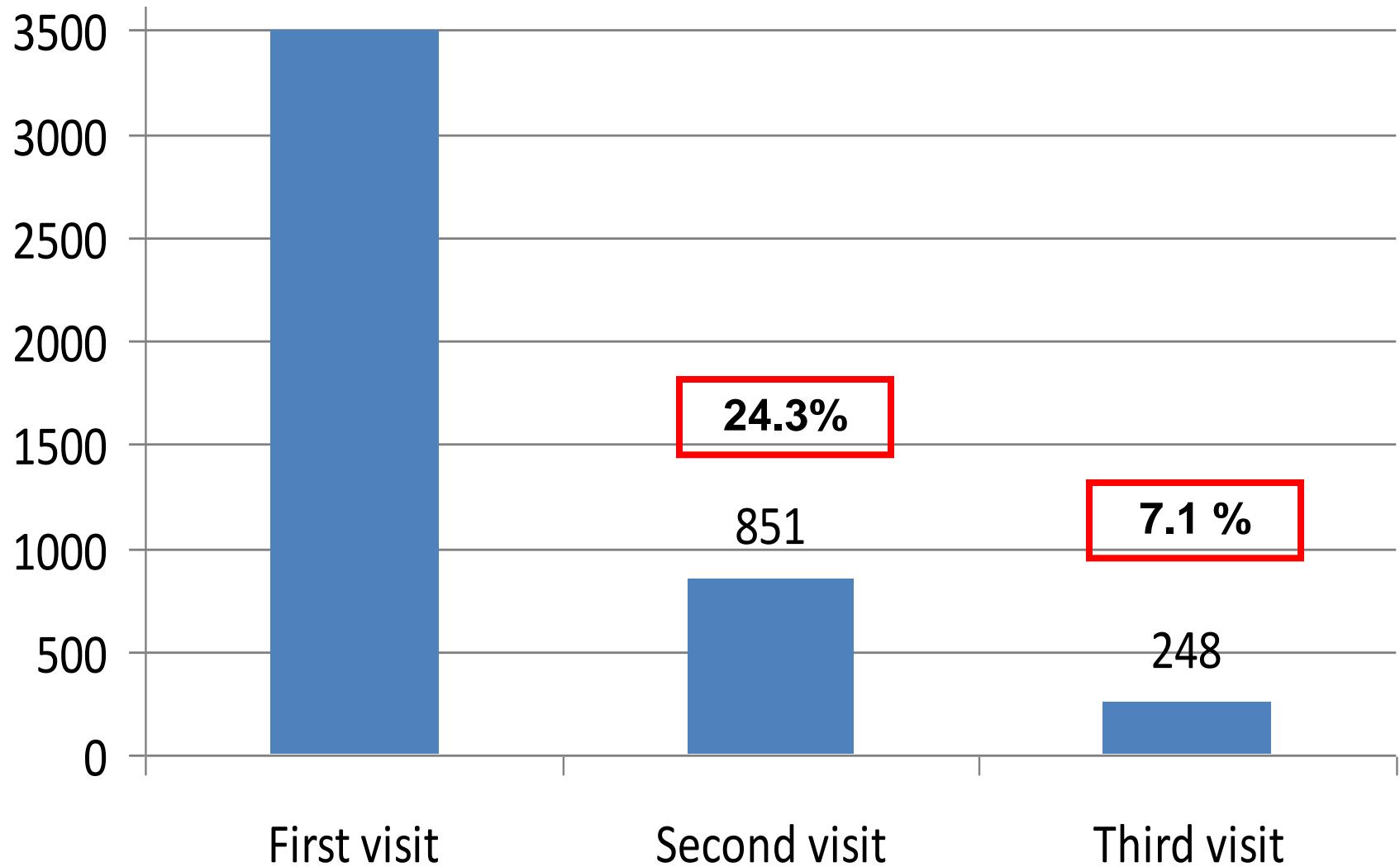
Target Organ Damage



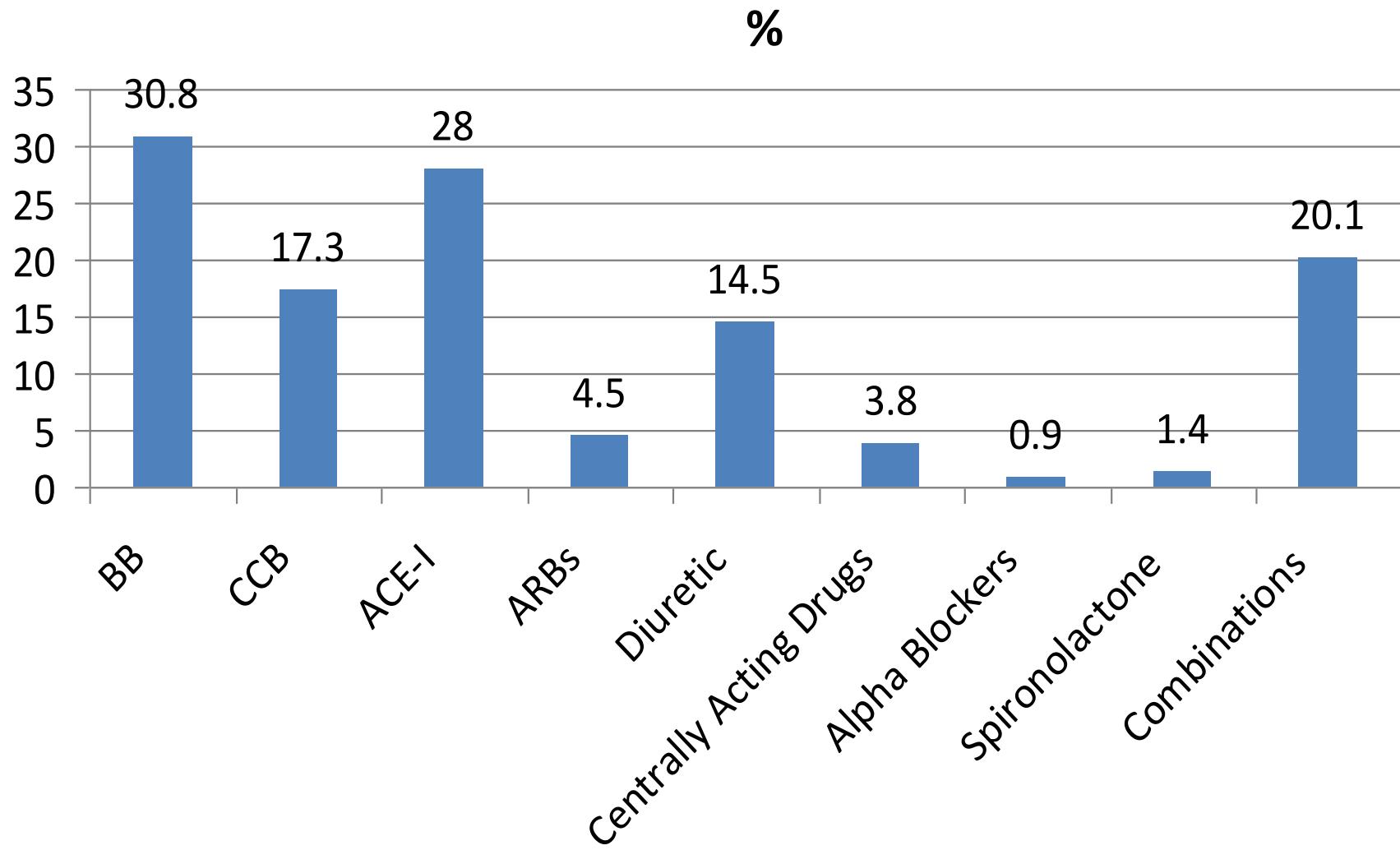
BP on First, Second & Third Visit



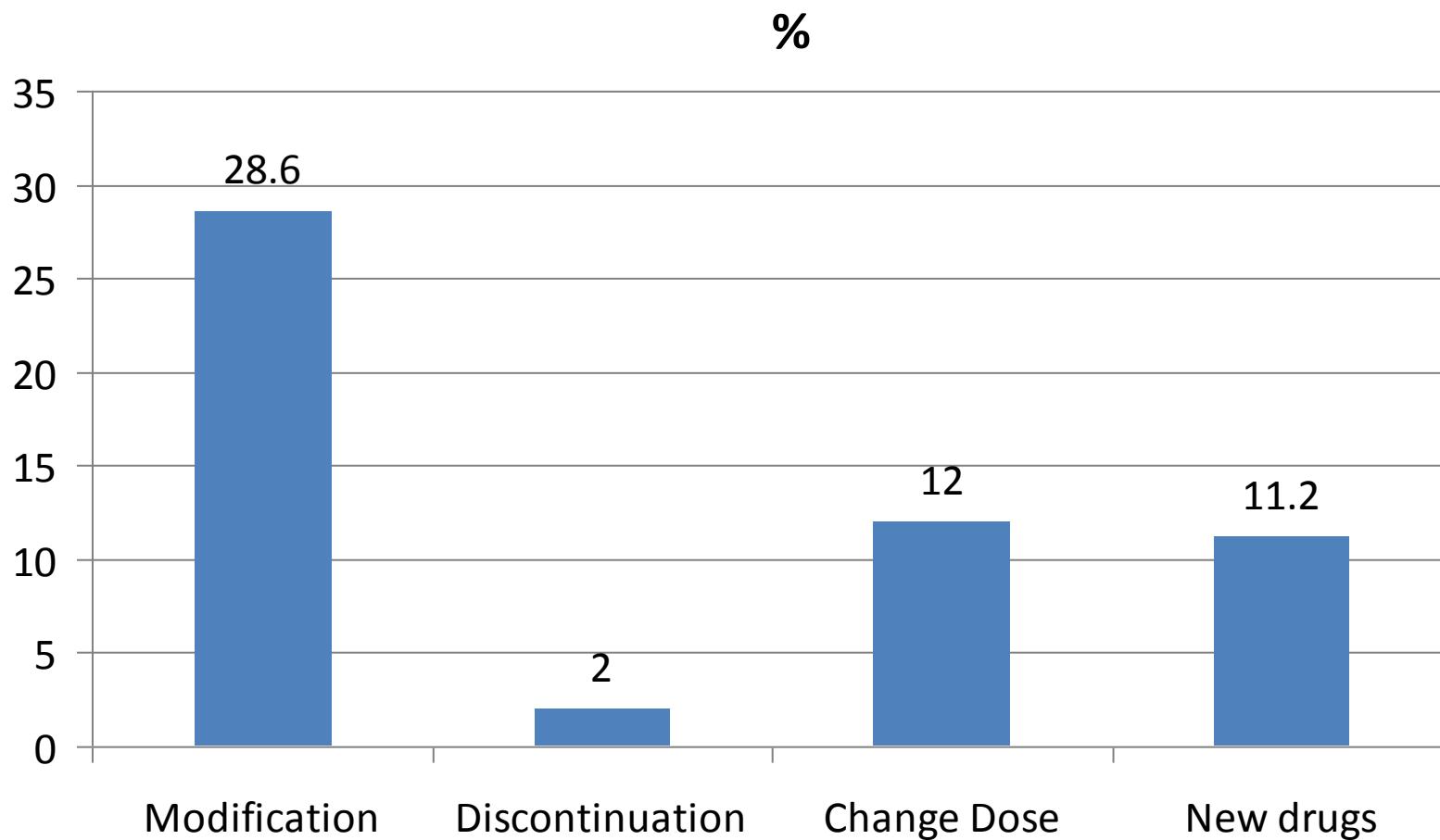
Number of Patients



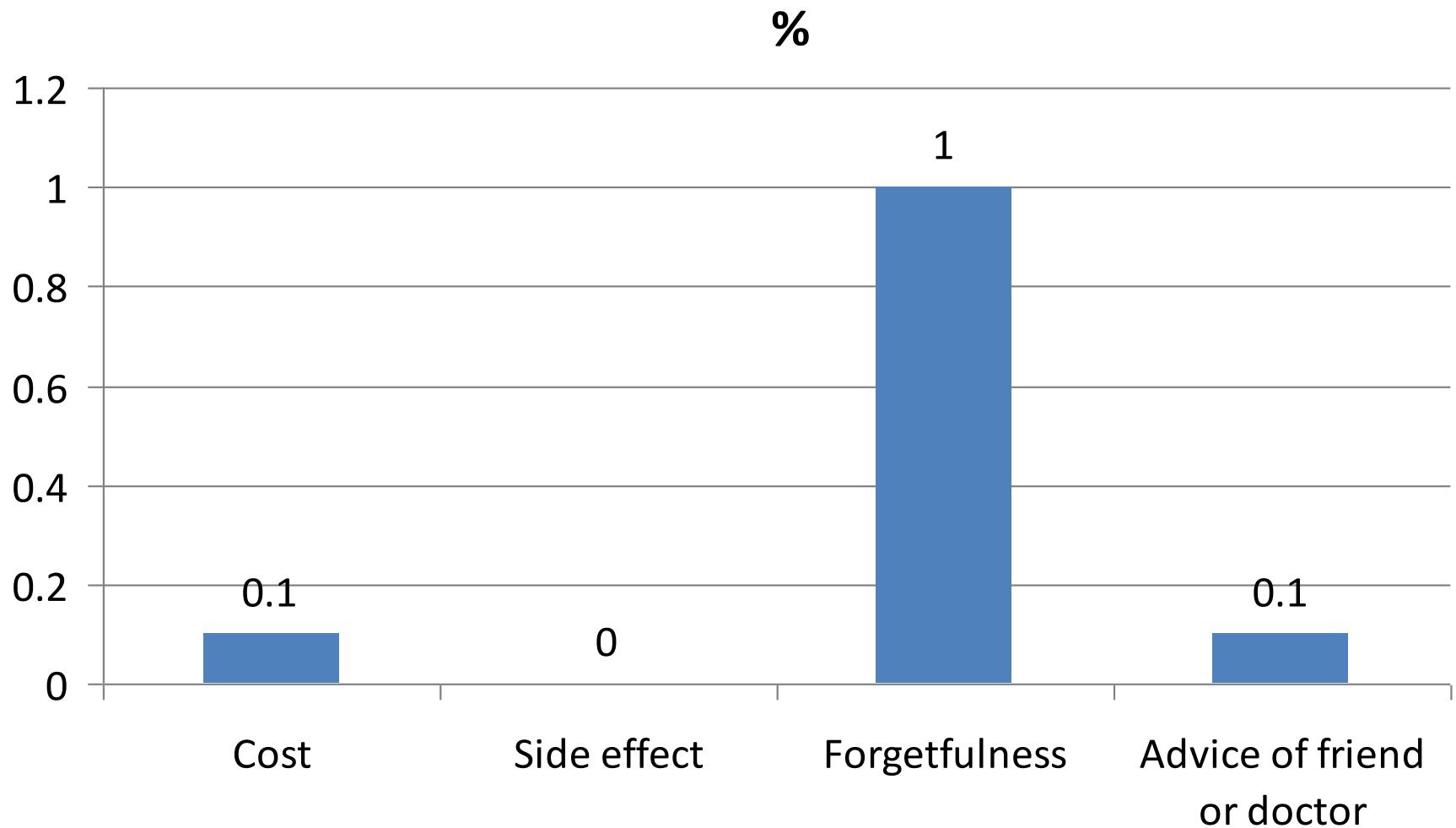
Classes Drug Therapy



Drug Therapy



Reasons of Non-Compliance



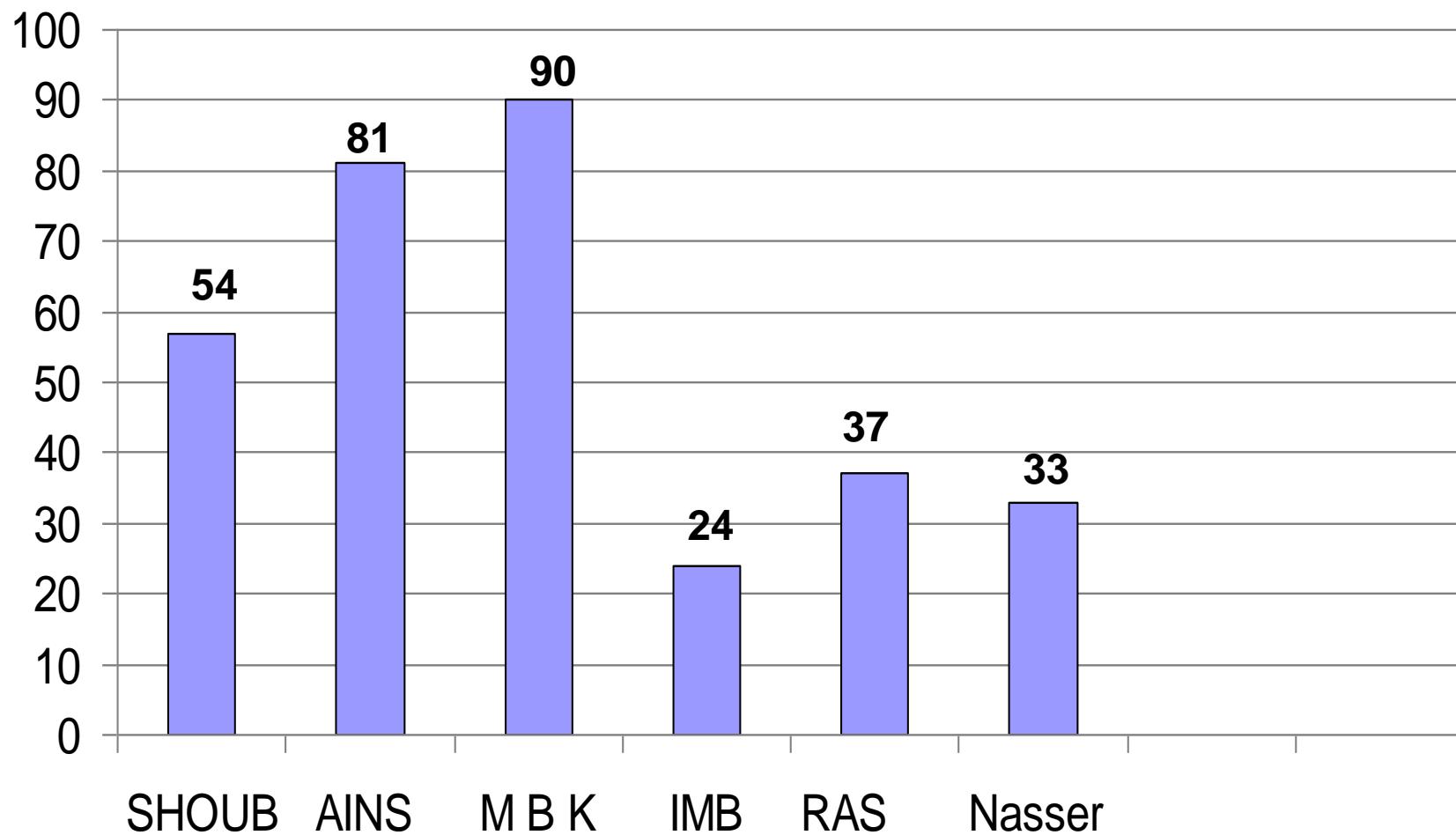
Future Plans

MOH Specialized HTN Clinics

August 2016

Population

N = 322



C O D E	Governorate	Clinics of MOH	Principal investigator	Co. invest igator
1	<u>Cairo Governorate</u>	Shubra El-Aam Hospital	Dr. Vinous Fransis	Mr. Ahmed Galal
2		Ain Shams EL-Aam Hospital	Dr. Atef Khamis	Miss. Amal Makram
3		Manshiet EL-Bakry Hospital	Dr. Maha Shafeek	Dr. Manal El-Sonbatty
4	<u>Guiza Governorate</u>	Embaba El-Aam Hospital	Dr. Treeza Labeb	----
5	<u>Alexandria Governorate</u>	Ras EL-Teen EL-Aam Hospital	Dr. Heba Abdel Salam	----
6	<u>Qaliobia Governorate</u>	Nasser EL-Aam Hospital	Dr. Atef Fath Alla	Miss. Sahar El-Sayed

New MOH Clinics

February 2017

New MOH Clinics - Eight more ...

1.Cairo : Almonira

2.Ismailia : Elismailia Elaam

3.Eldakahleya : Almansoura Elaam

4.Elmenoufia : Koweisna Elmarkazi

5.Elshakeya : Elkenayat Elmarkazi

6.Dameita : Domeit Elaam

7.Almenia : Elfekreya Elmarkazi

8.Kafr Elsheikh : Kafer Elsheikh Elaam

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