

Minutes of the Meeting of the ESH Scientific Council

ESH Council Zoom cloud Meeting

May 29th, 2020

09:00 am – 12:55 pm

PRESENT

ESH-Council members and officers

R. Kreutz, President
E. Lurbe, Vice President
A. Januszewicz, Secretary
K. Tsioufis – Immediate Past President

D. Lovic	
G. Grassi	G. Parati
T. Kahan	A. Persu
T. Weber	P. Van de Borne
B. Williams	E. Agabiti Rosei
C. Borghi	A. Coca
G. Mancia	A. Manolis
J. Brguljan	M. Burnier

Other participants

M. Calderai (AIM)
M. Massaro (AIM)
R. Lynch

Apologies

M. Azizi
M. Dorobantu
J. Polonia

Absent

B. Jelakovic

1. PRESIDENT'S WELCOME

The ESH President R. Kreutz welcomed all members present to the second ESH virtual Council meeting. He conveyed the apologies of J. Polonia unable to attend due to hospital duty and M. Dorobantu for medical reasons.

He anticipated a robust agenda covering important topics, including specific topics on the COVID-19 pandemic situation. He invited everyone to comment on personal experiences, local information and social and medical impact in the Council members' specific locations.

He thanked M. Massaro and M. Calderai of AIM for organizing the call.

2. MINUTES OF THE SCIENTIFIC COUNCIL MEETING, BELGRADE, MARCH 7TH, 2020

The minutes of the Council Meeting held in Belgrade, March 7th, 2020 were unanimously accepted by the Council and are available on the ESH website.

3. TREASURER'S REPORT

A. Januszewicz presented, on behalf of J. Polonia, ESH financial data from the last six months.

INCOME

a. Membership fees: For the first time, ESH membership fees are collected directly by ESH through online payment on the ESH website. At the date of the Council meeting, EUR 25,000 had been collected.

b. Contributions: ESH has received two contributions, both linked to the ESH meeting in Glasgow. The payments were invoiced by the FESH but paid into the ESH bank account:

- Servier – EUR 41,000
- Omron – EUR 25,000

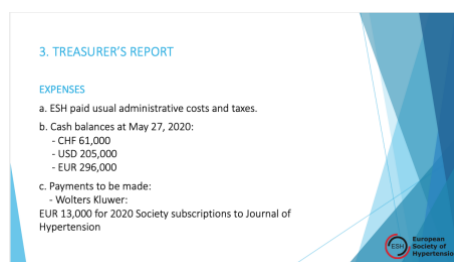
c. Payments to be receive: ESH is waiting to receive payments for a total of EUR 285,000:

- Final budge ESH meeting 2019: EUR 175,000
- Royalties 2019 Journal of Hypertension: EUR 110,000



EXPENSES

- Ordinary administrative costs and taxes were paid by ESH.
- Cash balances at May 27, 2020:
 - CHF 61,000
 - USD 205,000
 - EUR 296,000
- Payment to be made to Wolters Kluwer:
 - EUR 13,000 for 2020 Society subscriptions to Journal of Hypertension



4. ESH BUSINESS MATTERS

a. ESH Program Coordinator

R. Kreutz pointed out that the new online payment system of membership fees and the savings on the reduced Company/Agency costs will allow ESH to hire a Program Coordinator.

Only one application was received for the position. Following an interview with the candidate, who had no medical background, it was mutually agreed that he was not the right person for the position.

R. Kreutz said there are 2 further possible candidates in Germany, one is a very competent women in Frankfurt. The candidate proposed by G. Parati, a former OMRON employee based in Canada offered consultancy, which is not what ESH is looking for. The role of the Program Coordinator is to take over administrative work, coordinate ESH activities, establish and improve ESH visibility and social media activities. This could be a smart working and part-time job.

A. Januszewicz has some potential candidates in Warsaw.

K. Tsioufis reiterated that it is important to make-a-decision as soon as possible.

R. Kreutz invited the Council members to make suggestions or recommend candidates,

preferably with a medical/managerial background.

ACTION: R. Kreutz and A. Januszewicz will contact potential candidates and try to fill the position as soon as possible.

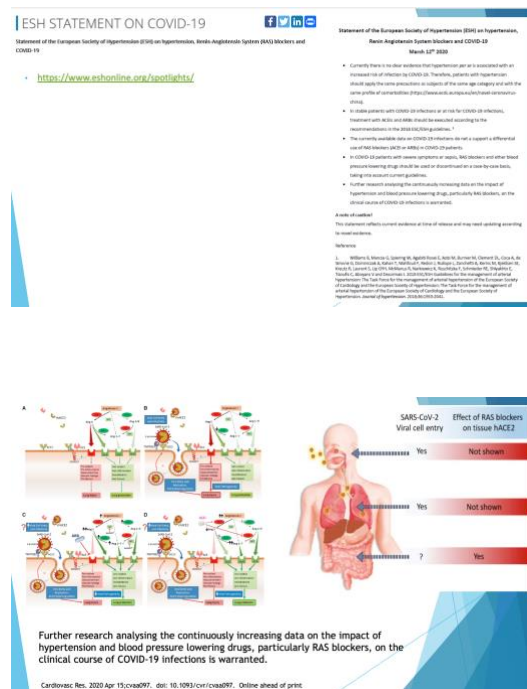
5. ESH PROJECTS ON COVID-19

a. ESH COVID-19 Task Force

R. Kreutz thanked the ESH Council members for their continued support and feedback on the emails sent out on COVID-19. It became evident that ESH need to establish a Task Force was to support the different issues on COVID-19. The Task-Force, comprised the founding members of the WG on Pharmacotherapy and Adherence, who were already taking care of some COVID-19 related issues, reviewed the available literature and decided that ESH should provide some recommendations on RAS blocker use in COVID-19. On March 12th, ESH presented its recommendations and was among the first societies to provide information by email, postings on the ESH website and on social media. An update followed a week later at the peak of the pandemic. However, there is a need to provide more evidence and more background is needed to support the recommendations.

After reviewing all the literature in relation to the SARS-COVID-19 and the controversial use of RAS blockers, the Task Force published a paper in Cardiovascular Research, appeared online on April 15, 2020, – a statement that RAS blockers probably are not harmful, if anything, they are protective. In conclusion, further research and very good observational studies analyzing increasing data on the impact of hypertension and blood pressure drugs, particularly RAS blockers, is warranted.





b. RAAS Blockers and COVID-19 – The Lombardy Experience

R. Kreutz congratulated G. Mancia and his team in Milan who published a very important paper in NEJM and invited him to share his experience, and to provide a brief overview of the Milan situation. G. Mancia summarized the development of the project and publication accordingly.

After his report, R. Kreutz thanked G. Mancia and asked if there were any comments or questions for G. Mancia on the RAAS blocker issue. All Council members congratulated G. Mancia on the publication of this important paper. An open discussion followed:

K. Tsioufis – stated that hypertension has been an important issue in COVID-19. All the interest around RAAS blockers has been good for hypertension and for ESH. The statement published by R. Kreutz & team, the paper published by G. Mancia & team have given ESH increased visibility.

A. Coca – mentioned that the publication of this important paper has helped stop and counterbalance the fake news on social media.

E. Agabiti – proposed the Excellence Centres, involved in the care of COVID-19 patients, follow up with a registry.

G. Mancia – supported the proposal. Evidence so far, not only by the study of his team but also the other 2 studies, suggest that pre-treatment with blockers of the renin angiotensin system, leading possibly to an over expression of ACE-2, does not have much to do with the risk of infection or the severity of the infection, but whether antihypertensive treatment with RAAS blockers modify the course of the disease during infection. The data of some small

groups and papers are not consistent. There are studies showing a clear-cut benefit, including a very recent one in Lancet, but not in the final stage. For example, a study based on data provided by the Excellence Centres on BP control during infection and the use of some specific drugs that may reduce the severity of the infection, would bring a new aspect to the problem.

R. Kreutz – asked G. Mancina if there will be a follow up study and whether hypertension was analyzed as a risk factor in the multi fractional analysis? What was the impact of hypertension itself? Diagnosis yes/no? G. Mancina replied that this is not in the database. Only the use of antihypertensive drugs, not only for hypertension, heart failure, chronic kidney disease and post MI.

A. Manolis – it would be interesting to see data on the role of beta-blockers. Most patients are elderly and already under treatment with beta-blockers for cardiovascular disease. G. Mancina replied that in their database beta-blockers were not related to the infection of the severity of the infection.

c. COVID-19 Registry in Poland

A. Januszewicz congratulated G. Mancina on his paper and said it had been circulated to around 40,000 Polish doctors, including cardiologists and hypertension specialists. He gave a brief overview of the COVID-19 situation in Poland which is not as tragic as in other European countries.

The data from the Polish COVID-19 registry: over 22,000 infected patients, 10% were hospitalized and a total of 1025 deaths recorded.

In early March, A. Januszewicz and his team at the National Institute of Cardiology in Warsaw designed the project dedicated to the COVID-19 situation in Poland. The main aim was to assess the safety of cardiovascular drugs in relation to the occurrence of complications during hospitalization in infected COVID-19 patients.

Criteria: hospitalized patients

Structure of the study: 3 cohorts – A – B – C.

Cohort B - (A. Januszewicz & team) focused on a detailed evaluation of hospitalized patients with COVID-19 and collaborated with 12 referenced COVID-19 dedicated hospitals around Poland. The hospitals were uniformly distributed geographically around Poland. For epidemiological reasons an online questionnaire was designed and used.

Cohort A - conducted by the Polish Ministry of Health - mandatory nationwide registry of hospitalized COVID-19 patients.

Cohort C - provides access to a national registry of patients.

A. Januszewicz (Cohort B) & team collected detailed medical history, current medications including beta-blockers, clinical status and all major outcomes of hospitalization.

A minimum number of 3000 patients were included in Cohort A (could increase to 6-7000 patients) and Cohort B covered 500 patients (could increase to 1000 patients).

The data collected will be exchanged and combined between the 3 cohorts. A detailed analysis on the hospitalized patients will be presented. The project is registered as an official

project of the Polish Ministry of Science with a scientific grant from the National Institute of Cardiology.

An open discussion followed:

P. Van de Borne – congratulated the Polish team for the excellent study which will give an important answer to the correlation between the level of BP itself, the quality of BP control and the impact of the disease.

J. Brguljan – congratulated the Polish team and asked how were the COVID patients confirmed. Were they tested? Were they PCR tested or were they just based on the evolution of the diagnosis? A. Januszewicz replied that only patients confirmed by PCR or hospitalized patients were included in the study.

R. Kreutz – pointed out the unique strategy followed in Sweden and asked T. Kahan to briefly comment on the number of patients, infections, fatalities and perspectives for the future.

T. Kahan commented that the Swedish system is run by specialists and experts, while in other countries, the leadership are not specialists or experts on the matter. With regards to social distancing, traditionally, the Government doesn't decide but leaves it up to the population to make responsible decisions based on the information and recommendations provided. As to fatalities, the way they are recorded, how they are reported and how much testing is done is important and if we look at the average deaths recorded over the last few months the mortality rate is not much higher than in previous years. Of course, mortality is high among the elderly. As a clinician T. Kahan said he feels the solution used in Sweden to be satisfactory, but only time will tell.

d. COVID-19 Newsletters/Position Papers

R. Kreutz suggested following up immediately with summaries/synopsis on the studies published related to pharmacotherapy, the BP lowering drug, some aspects of interaction of specific potential antiviral or anti-COVID drugs that are used could be included, and whether there are some safety issues. This could be a task for our new Task Force and the new WG that deals with these matters.

Discussions on the creation of a new WG on Environmental and lifestyle factors should be continued during the next meeting as J. Polonia was not present. The outline of the WG has been drafted.

ACTION: ESH COVID-19 Task Force will write a short Newsletter with updates on recent publications on hypertension, RAAS blockers and other BP lowering drugs, to be published for instance in J Hypertens News Section and appearing in PubMed.

e. Any other suggestions

G. Mancia pointed out that each society has 8 free pages in Journal of Hypertension, equivalent to 2 newsletters.

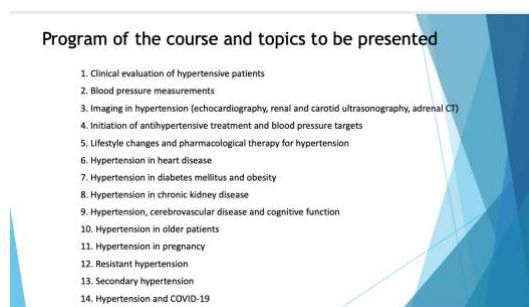
G. Parati commented that additional information on the other complex interactions characterizing the severity of the disease on top of the use of drugs should be collected. The collecting of data to provide clinical support to these ideas supported by the Excellence Centres is an excellent idea.

6. ESH Education web-based activities 2020/2021

R. Kreutz briefly introduced this item. Due to the COVID-19 outbreak all ESH activities have been postponed and the question asked was, should we do something to fill the gap, taking into consideration there is no annual meeting this year? A. Januszewicz will present the proposal for an online educational program supported by AIM in terms of infrastructure and logistics.

a. ESH web course on Hypertension

A. Januszewicz gave a brief overview of the proposal to create a web course on hypertension to fill the vacuum caused by the suspension of ESH educational activities. The topics proposed range from clinical evaluation of hypertensive patients to hypertension and COVID-19.



The course would feature 60-90-minute sessions divided into five sections:

1. Introduction
2. Case presentation
3. Two-four lectures
4. Discussion
5. Take-home message

60'-90' Sessions following the scheme:

Introduction 2'
Case presentation 10'
Two-Four lectures 15'
Discussion 15'
Take-home message 3'

The case presentations, lectures and take-home messages would be recorded beforehand. The introduction and discussion would be live, and the lecturers would join the live discussion.

60'-90' Sessions following the scheme:

Introduction 2'
Case presentation 10'
Two-Four lectures 15'
Discussion 15'
Take-home message 3'

Case presentation, lectures and take-home message will be recorded and prepared before the broadcast.

The program would start September-October and the sessions would be made available every 3-4 weeks up till the annual meeting in Glasgow. Each session will include multiple choice questions and the program would be CME accredited.

60'-90' Sessions following the scheme:

Introduction 2'
Case presentation 10'
Two-Four lectures 15'
Discussion 15'
Take home message 3'

The broadcast will begin with live introduction of the chairman than case presentation and lectures will be shown.
"Live" online discussion will be led by the chairman and all the lecturers will join live the discussion.
At the end take home message will be shown.

Clinical evaluation of hypertensive patients (example)

Introduction 2' (live)
Case presentation 10'
Medical history, physical examination and clinical investigation – 15'
Blood pressure measurements – confirming the diagnosis of hypertension – 15'
Assessment of cardiovascular risk – classic and novel risk factors – 15'
Using hypertension-mediated organ damage to help stratify risk in hypertensive patients – 15'
Discussion 15' (live)
Take-home message 3'

b. ESH on-air web channel



M. Massaro presented the ESH on-air web channel designed to keep the hypertension community active, keep the dialogue between the Society and its members and the National Hypertension Societies alive during this particular time and the possibility of new revenue from sponsorship and endorsement fees. The on-air web channel is a customized web channel for a term of one year, or longer if successful, and offers live webinars, a sponsor area and on-demand contents.

M. Calderai continued with technical information on the web channel. *

R. Kreutz thanked M. Massaro and M. Calderai.

An open discussion followed:

The first question is, should ESH do something from now until Glasgow under the ESH umbrella?

Second question is, what content and format should be used, and should ESH avail of the proposal by AIM?

M. Burnier – Menarini is starting a series of webinars next week so ESH should coordinate and avoid using the same people and repeating the same topics. He likes the idea of the project, but it looks too much like the text book online. It would be a lot of work.

A. Manolis – this is the right time to go ahead with this project as sponsors have budget that was destined to satellite symposia, but due to the COVID outbreak, has not been used. ESH should approach the sponsors to support the satellite symposia from the Glasgow meeting and organize webinars in Central America, Middle East and Asia.

K. Tsioufis – agrees that ESH should move forward with the web-channel. Even though it's not an easy task. Physicians have unlimited access to webinars, and to make the program attractive, a very careful selection of the topics to be covered should be made and also the format in which they will be presented.

T. Kahan – it's a good concept and it's time that ESH became active on the web. The target audience should be carefully chosen: do we want to target specialists, or do we want to target young fellows teaching them the basics in hypertension, or do we want to target cardiologists? Webinars on a continuous basis on a teaching platform to replace the obsolete eLearning Program on the ESH website is a good idea.

J. Brguljan – agreed with T. Kahan that there are too many webinars available and the program should be of a very high quality. Also, if the program is not free it is unlikely doctors will participate.

E. Agabiti – it's time ESH moved in this direction and we need to decide which path to follow: educational or updated research? The second option is very important because ESH is the core of the topic of hypertension. We need to start as soon as possible. He agreed with A. Manolis that there is a great need in remote areas of the world to disseminate information.

A Persu – proposed to use the platform for the Summer School making it more interactive and interesting for the students. J. Brguljan intervened saying it could also be used to prepare the candidates for the Summer School and at the same time get input from them.

G. Grassi – to avoid overlapping with other similar meetings, a single case presentation with two discussants could be a new format.

M. Burnier – as there will be no Summer School this year, the FESH could financially support the education through the webinar for the Summer School or in between the Summer Schools. If ESH decides to go in this direction the Foundation should invest some money in it and not just rely on industry.

T. Weber – good idea and also applies to the Excellence Centres who should be invited to join the webinars asking them if they have questions or topics of particular interest, so we have some feedback

D. Lovic – he agreed it's necessary for the society to have webinars during this particular time, but we should be aware that we need two different types of webinars. Commercial webinars to raise money for the Society, and specific topic webinars for members.

G. Mancina – fully supports the idea of webinars. There is an abundance of webinars, and the Society should study a much better and more balanced program ESH has traditionally a large audience in Asia and Latin America. He also said it is time to go back to traditional medicine, there is an excess of COVID webinars. He supports the idea of a Summer School webinar.

Consensus under ESH umbrella, explore different options and collaboration with AIM.

R. Kreutz asked for volunteers to start the program as a Task Force on web-based educational activities:

G. Mancia – Responsible as coordinator

A. Januszewicz, R. Kreutz, K. Tsioufis, E. Agabiti, P. Van de Borne

* Copy of the AIM ESH On-Air Web Channel proposal attached as appendix to the Minutes.

ACTIONS: AJ contact the colleagues assigned to this Task Force and AIM to generate an action plan.

7. WORKING GROUPS

a. Contribution of Working Groups to Glasgow ESH/ISH Meeting

A. Persu noted that the structure of the WG meeting program will not change in 2021, however, as the meeting in Glasgow will begin on Sunday, he asked that the WG sessions scheduled for Friday be moved to Sunday and that the WG Business meetings to the beginning of the week.

Scientific Meetings and Hands-on Workshops

Glasgow 11-14 April 2021 Unchanged program? Sunday?									
TIME	11TH	12TH	13TH	14TH	15TH	16TH	17TH	18TH	19TH
08.00-09.00	Registration	Registration	Registration	Registration	Registration	Registration	Registration	Registration	Registration
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Separate business meetings : Monday or Tuesday 18-19-20?

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b. Contribution of WGs to COVID-19-related and other new initiatives

A. Persu informed the Council that following a telecon with the founding members of the WG on CV Pharmacotherapy and Adherence, it was unanimously decided to proceed and not wait until the meeting in Glasgow. M. Burnier will prepare, with the support of A. Persu, the statute in line with the general rules, and will organize online voting for the Chair and Vice-Chair.

There is already a good list of participants, and members with expertise in clinical biochemistry and pharmacology will also be invited to join.

As a first initiative of the WG, a survey on experience and availability of adherence evaluation tools will be set up for ESH Excellence Centres. Another project may include a White Paper on Therapeutic Drug Monitoring.

A. Persu confirmed a Task Force to deal with hot issues such as tentative adverse effects of drugs is needed.

SELECTED UPDATES on WG ACTIVITIES
WG ON CV PHARMACOTHERAPY AND ADHERENCE
Teleconference with founding members on 21th May (M. Burnier, A. Persu, M. Asti, M. Tomaszewski, A. Januszewicz, R. Kreutz + A. Prejbisz)
> Consensus to proceed before Glasgow ISH/ESH 2021
• M. Burnier will prepare statutes in line with general rules and organize online voting for Chair and Vice-Chair with support of A. Persu
• Additional members with expertise in clinical biochemistry and pharmacology will be approached
• A survey on experience and availability of adherence evaluation tools will be set up for ESH Excellence Centres
• Other projects may include a White Paper on TDM monitoring
• A reactive Task force dealing with burning issues on tentative adverse effects of drugs etc. is definitely needed (last example: RAS inhibitors and COVID-19)

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A. Persu gave a brief overview of the other WG activities.

SELECTED UPDATES ON WG ACTIVITIES
WG ON BP MONITORING AND CV VARIABILITY (Chair: G. Stergiou)

Practice Guidelines office and out-office BP measurement
Currently circulated for review to a group of deliberately younger HTN specialists + 1-2 general practitioners


WG ON HYPERTENSION AND CARDIOVASCULAR RISK ASSESSMENT IN SUBJECTS LIVING IN OR EMIGRATING FROM LOW RESOURCE SETTINGS (Chair P. Modesti)

Position paper
Implications of COVID-19 prevention strategies on the outpatient care for those affected by non-communicable diseases (submitted BMC Medicine).



SELECTED UPDATES ON WG ACTIVITIES
WG ON VASCULAR STRUCTURE AND FUNCTION (Chair: B. Spronck)

- Strong involvement in the Covid-19 **ARterial Stiffness and vascular AgeiNg (CARTESIAN)** study launched by ARTERY and aiming at studying the medium- and long-term effects of COVID on arterial stiffness and central hemodynamics.
Main drivers and PIs: Rosa Maria Bruno (Secretary) and Pierre Boutouyrie (Past President)
Growing list of 35 participating centres from 16 countries.
<http://www.arterysociety.org/our-activities/cartesian-2/>.
- Establishment of a Core group to revise the current guidelines for Pulse Wave Velocity device validation.




SELECTED UPDATES ON WG ACTIVITIES
WG ON HYPERTENSION AND THE HEART (Chair: E. Agabiti-Rosei)

- Project Consensus document on 'HFpEF and HTN, an update on the current therapeutic management'.
- Feasibility of a Registry on CV complications in patients infected by COVID-19 in Europe. Involvement of Excellence centres?

Application of Dr Luca Faconti: a good example of young enthusiastic candidate!

- Training in Internal Medicine at the University of Pisa (Stefano Taddei)
- Joined the BHF Centre of Excellence at King's College London.
- Hypertension specialist at Guy's and St Thomas' Hospital NHS Foundation Trust
- Academic career at King's College London
- Interest in HTN-mediated organ damage and hypertensive cardiomyopathy
- Chair Young Investigator WG and YI representative BHS Executive Committee.




c. General architecture of Working Groups: need for change?

A. Persu presented several ideas to update the current structure of the Working Groups, also based on previous suggestions from Council members.

CURRENT ARCHITECTURE OF WGs: NEED FOR UPDATE?

A few ideas/ suggestions

- WGs should cover the main topics included in the guidelines.
- WGs may not only address clinical practice and research, but also bench and translational research.
- While some WGs address a permanent need, others may have a more transient existence according to the evolution of knowledge and focus of research.
- The website indicates:
WGs are not permanent, they may be cancelled or merged with other WGs, if appropriate.
- When creating, cancelling or merging WGs, one should have in view the whole architecture of the WGs. Is the problem of enough importance? Can it be addressed by already existing WGs?
- The initiative of new WGs may come either from individuals or from the Council.



A. Persu suggested to discuss a novel grouping of the WGs according to the topic addressed and to proposals that have been made. He presented these as shown in the slides below:

CURRENT ARCHITECTURE OF WGs: NEED FOR UPDATE?	
Now	Proposals
ORGAN-BASED HTN and Kidney HTN and Heart HTN and Brain Endocrine HTN Vascular structure and function Sexual dysfunction	> Large Vessels + Microcirculation and inflammation (A. Virdis) > Small Vessels

CURRENT ARCHITECTURE OF WGs: NEED FOR UPDATE?	
Now	Proposals
ORGAN-BASED HTN and Kidney HTN and Heart HTN and Brain Endocrine HTN Vascular structure and function Sexual dysfunction	> Large Vessels + Microcirculation and inflammation (A. Virdis) > Small Vessels

CURRENT ARCHITECTURE OF WGs: NEED FOR UPDATE?	
Now	Proposals
MANAGEMENT BP monitoring/ CV variability CV Pharmacotherapy and Adherence Interventional treatment	Lifestyle and physical activity (J. Polonia)

CURRENT ARCHITECTURE OF WGs: NEED FOR UPDATE?	
Now	Proposals
RESEARCH Arterial stiffness etc...> arterial structure/function Endothelin/endothelial function	Omics in Hypertension (suggestion Bryan Williams) > Merge with Small vessels

Following an open discussion, it was agreed that the WGs with a vascular focus should be re-organized into 2 Working Groups – Large Arteries and Small Vessels. R. Kreutz proposed to contact the vascular groups before the Glasgow meeting and to organize a TC (Zoom) to discuss with them how to move forward. The proposal was agreed upon unanimously.

d. Final approval submission procedure of position papers

A. Persu informed the Council members that the document on approval and submission procedure of position papers has been circulated and is approved.

G. Mancia said the documents should be short, no more than 6000 words including references with 4 tables/figures. He also mentioned there is no limit to the use of supplementary material and authors should be encouraged to use it as well as the use of graphical abstracts.

e. Working Group statutes: advanced proposal

A Persu briefly summarized the current situation and the proposed changes to the statutes of the Working Groups. The Council agreed on all points.

ACTIONS. A. Persu will therefore adapt the website accordingly, send an e-mail to inform the WG heads and make sure that elections are organized in due time when appropriate. Unless the leadership of the WG already changed within the last 2 years, a vote should take place no later than the next Glasgow ESH/ISH meeting in April 2021. WGs are encouraged to use online voting to move forward.

8. EXCELLENCE CENTRES

T. Weber informed the Council the papers published on COVID-19 were circulated to the Excellence Centres. He mentioned the importance of keeping up communications with the Centres.

He advised no new applications had been received. There are some applications for re-accreditation that need to be confirmed and he asked what the requirements are for re-accreditation. R. Kreutz replied if they fulfilled previous criteria they can be considered approved. He also suggested considering eliminating inactive Centres.

R. Kreutz commented G. Mancia's surprise at the number of Centres that are not participating in the BP Control Study. Participation in ESH activities such as meetings, studies, etc. should be a criteria for re-accreditation.

T. Weber proposed to use the network of Excellence Centres throughout Europe to create a Registry on BP control during COVID-19. E. Agabiti suggested the heads of the Excellence Centres working in large units could provide a large amount of data on patients during COVID-19. This information could be used for the Registry. K. Tsioufis suggested a survey among the Excellence Centres on how BP was managed during COVID-19.

ACTION: R. Kreutz agreed T. Weber, K. Tsioufis and E. Agabiti should go ahead and start the survey.

9. ESH NEWSLETTERS - Update

R. Kreutz pointed out that the aim of the Newsletters is to be new and concise. They should increase visibility and impact and ensure up-to-date quality. Establish within the Council a rapid and critical review of the Newsletters. Benefit from the option to publish them in Journal of Hypertension or Blood Pressure and generate the possibility of citation, use as reference and assign at least a DOI.



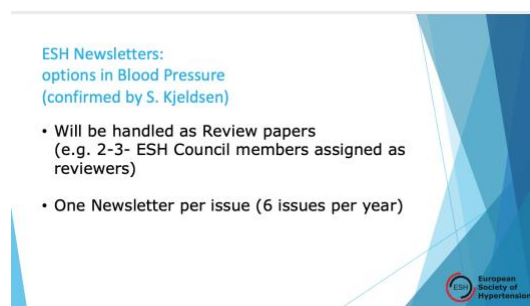
ESH should take advantage of the 8 free “White pages” per year provided by J Hypertension, which is the equivalent to 2 Newsletters. The last Newsletter was published in J Hypertension 2012



ESH can also publish Newsletters, without limitation of space, in any issue of Blood Pressure (6 issue/year).

The 6 issued in Blood Pressure together with 8 pages in J Hypertension provides ESH with the option to publish 8 Newsletters per year.

ESH will assign 2-3 Council member to critically review the Newsletters. Publishing the Newsletters in J Hypertension or Blood Pressure should become a standard procedure.



G. Grassi reported 2 Newsletters have been published, another two are in revision. No reply from G. Rossi to the invitation to write a Newsletter. A friendly reminder will be sent.

9. ESH NEWSLETTERS - UPDATE
(G. Grassi, R. Kreutz)

Newsletters published 2020	Ongoing Newsletters	Pending Newsletters
COVID-19 AND RAS BLOCKERS: A PHARMACOLOGY PERSPECTIVE Year 2020 Issue 22 Newsletter N. 73 Author: A.H. Jan Daner	FIBROMUSCULAR DYSPLASIA - WHAT THE HYPERTENSION SPECIALIST SHOULD KNOW IN 2020 Author: Alexandre Persu	GUIDELINES FOR DIAGNOSIS AND MANAGEMENT OF PRIMARY ALDOSTERONISM Author: Gianpaolo Rossi
ATTENDED VS. UNATTENDED BLOOD PRESSURE - LEARNINGS BEYOND SPRINT Year 2020 Issue 21 Newsletter N. 74 Authors: Sverre E. Kjeldsen, Guido Grassi, Reinhold Kreutz, Giuseppe Mancini	ATRIAL FIBRILLATION, ANTICOAGULATION TREATMENT AND TREATMENT AND HYPERTENSION (first draft ready) Authors: Athanasios Manolis et al.	

M. Dumas was suggested by A. Manolis as an option to G. Rossi.

10. INTERACTION WITH NATIONAL SOCIETIES

M. Dorobantu was unable to participate for medical reasons.

K. Tsioufis noted that due to the postponement of the 2020 meeting there will be no face-to-face meeting with the Presidents of the National Societies. Therefore, he proposed to divide the National Societies into 3 groups and organize 3 Zoom calls during the summer with the Presidents of the National Societies to discuss the present situation.

ACTION: Maria Dorobantu together with Costas Tsioufis, AJ and supported by Robyn will organize Zoom Meeting with National Society Presidents.

11. ESH HYPERTENSION SUMMER SCHOOL

D. Lovic confirmed the 2020 Summer School has been postponed to 2021 at the same venue. The Presidents of the National Societies were informed by email of the decision by the ESH Council.

D. Lovic said they are working on the program timetable is continuing and more definite version will be available for discussion during the next Council meeting in Warsaw.

SUMMER SCHOOL 11.- 16. September 2021.

	11.09 Saturday	12.09 Sunday	13.09 Monday	14.09 Tuesday	15.09 Wednesday	16.09 Thursday
7.00-9.00		Breakfast and some sport activities				
9.00-11.00	Arrival all day	Session II	Session IV	Session VI	Session VIII	Session X
12.00		Session III	Session V	Session VII	Session IX	Panel Discussion / Workshop
14.00		LUNCH	LUNCH	LUNCH	LUNCH	LUNCH
15.00		Students Presentation	Students Presentations	WG Presentation	II Tour, Belgrade departure	
16.30		WG presentation	WG presentation	Panel Discussion		
18.00	Session I : How to...	Case Reports	I Tour, visit of near by City	Case reports		
19.30	DINER					

The question of whether this year's applicants can participate in the 2021 Summer School or if new applications should be considered? R. Kreutz confirmed the decision this year's applicants can participate, however, the National Societies have the final decision.

SUMMER SCHOOL 2021 APPLICATIONS

COUNTRY	N.	COUNTRY	N.
AUSTRALIA	1	KAZAKHSTAN	1
BELARUS	2	NETHERLANDS	2
BOSNIA	2	NORWAY	2
CZECH REPUBLIC	1	RUSSIA	2
DENMARK	2	SWEDEN	2
FINLAND	1	SWITZERLAND	1
FRANCE	2	UKRAINE	1
GREECE	3		

11. ESH SUMMER SCHOOL
(D. Lovic, J. Brguljan)

a. 2021 – Sremski Karlovci (Serbia) – 11-16 September
b. 2022 – Lake Maggiore Milan (Italy) - Date TBD (G. Parati)
c. 2023 – Venue TBD (France) – Date TBD (M. Azizi)
d. 2024 – Venue TBD (Sweden) - Dated TBD (T. Kahani)

To be discussed !

J. Brguljan proposed to organize a webinar with all the participants to gather their feedback on what they are interested in, and to organize groups and give them special tasks to work on together. However, they will wait to see how the COVID situation evolves before definitely before confirming.

R. Kreutz pointed out that postponing the 2020 meeting to 2021, will subsequently result in moving all the future Summer Schools forward one year. This proposal was accepted.

12. ESH ANNUAL MEETINGS

R. Kreutz reported on the difficult decision to postpone the annual meeting to 2021. Unfortunately, this means sacrificing the Milan meeting. He expressed his sincere thanks to G. Mancina and the Milan team.

M. Massaro gave an overview of the current situation. The meeting will be held in April 2021 from Sunday 11 to Wednesday 14. The Presidential dinner will be on Monday April 12. The venue has been very supportive and there are no cancellation or new costs.



JOINT MEETING ESH-ISH 2021 Glasgow	
CONGRESS DATES	
Sunday, April 11	CONGRESS OPENING
April 12, 13 & 14	CONGRESS DAYS SCIENTIFIC SESSIONS & POSTERS
Monday, April 12	PRESIDENTIAL DINNER

Once the decision to postpone was final, all delegates and sponsors were informed. Registration fees already paid were transferred to 2021. An update on the registrations, grants and sponsorships was provided.

JOINT MEETING ESH-ISH 2021 Glasgow	
FIGURES' UPDATE	
REGISTRATIONS Received until March 20, 2020: 1.401 of which - CONFIRMED 1.158 - CANCELLED 243	
SPONSORSHIPS based on 2020 database - CONFIRMED with same package 9 - CONFIRMED package to be confirmed 7 - PENDING 11	
GRANTS - SELECTED 87 - CONFIRMED 47 - PENDING 40	
SPEAKERS All speakers have been informed about the new congress dates. We received 26 positive replies and no cancellations so far.	

M. Massaro highlighted the good financial situation for 2021.

JOINT MEETING ESH-ISH 2021 Glasgow	
FINANCIAL UPDATE	
REGISTRATIONS confirmed at 26/05/2020 € 547.935,33	
SPONSORSHIPS CONFIRMED with same package € 491.300,00 CONFIRMED package to be confirmed € 497.290,00	

The sponsorship situation has not changed.

JOINT MEETING ESH-ISH 2021 Glasgow	
SPONSORS' UPDATE	
Same sponsorship package: ✓ A&D ✓ Abbott ✓ InBody ✓ Microlife ✓ Novacor ✓ Omron ✓ Servier ✓ SomnoMedics ✓ Vifor	Package to be re-confirmed: ✓ Bayer ✓ Egis ✓ Medtronic ✓ Menarini ✓ Merck KGaA ✓ Recor ✓ Sanofi
Pending: ✓ Alcam Medical ✓ AstraZeneca ✓ Boryung ✓ BP Lab ✓ Ferrer ✓ IEM ✓ Inferum Corporation ✓ Oxford University Press ✓ Spacelabs ✓ TensioMed ✓ WisePress	

JOINT MEETING ESH-ISH 2021 Glasgow

SPONSORS' UPDATE

6 CONFIRMED SPONSORED SESSIONS:

- ✓ Abbott - minisymposium
- ✓ Omron - 2 minisymposia
- ✓ Servier - satellite symposium + 2 minisymposia

12 TO BE RE-CONFIRMED:

- ✓ AstraZeneca / IMC Group - minisymposium
- ✓ Bayer - educational session
- ✓ Boryung - 2 minisymposia
- ✓ Eisai - minisymposium
- ✓ Medtronic - 2 minisymposia
- ✓ Menarini - minisymposium
- ✓ Merck KGaA - satellite symposium
- ✓ Recor - 1 minisymposia
- ✓ Vifor - 2 minisymposia

12 @ESH2019

Waiting confirmation from Merck and Medtronic for the Web-TV tool.

JOINT MEETING ESH-ISH 2021 Glasgow

WEB-TV

This year we are promoting for the second time the WEB-TV as new sponsorship opportunity.

This very innovative tool consists in a real-time web TV channel, which allows the ESH, ISH, BIHS and the sponsor companies to share all around the world their high quality scientific contents, overcoming the time zone limits.

Waiting for final confirmation from Merck and Medtronic for the WEB-TV during the Joint Meeting ESH-ISH 2021.



JOINT MEETING ESH-ISH 2021 Glasgow

EXHIBITION

N. 9 CONFIRMED EXHIBITORS
279 sqm
+
N. 17 PENDING EXHIBITORS
211 sqm to confirm

N. 27 EXHIBITORS
TOTAL SURFACE
Approx 490 SQM

@ESH2019

1607 abstracts received at first submission date and 210 late-breakers. All the authors will be contacted by mid-July to ask if they wish to keep their abstract, revise it or withdraw it. A new abstract submission date will open between September/October for the inclusion of latest cutting-edge research related to cardiovascular topics associated with COVID-19 and other late-breaking abstracts in the field of hypertension and cardiovascular disease.

JOINT MEETING ESH-ISH 2021 Glasgow

ABSTRACT UPDATE

ABSTRACTS RECEIVED

AT THE FIRST SUBMISSION: 1607 961 @ESH2019

LATE-BREAKERS: 210 118 @ESH2019

TOP 10 COUNTRIES

CHINA
JAPAN
RUSSIA
ITALY
UNITED KINGDOM
SOUTH KOREA
GREECE
INDIA
FRANCE
AUSTRALIA

All the authors will be contacted by mid-July to ask whether they wish to keep their abstract as it is, revise it, or withdraw it.

Moreover a new abstract submission will be open by September to allow for inclusion of the latest cutting-edge research related to cardiovascular topics associated with COVID-19 and to other late breaking abstracts in the field of hypertension and cardiovascular disease.

Promotional on social media continues and has increased the number of followers on Facebook and Twitter.

JOINT MEETING ESH-ISH 2021 Glasgow

DIGITAL PROMOTION

We improved our presence on social media with a special focus on Twitter and Facebook, intensifying our daily activity and followers are increasing in both social media:

- Twitter: 874  @ESH_Annual / @ISHBP / @BHSoc_Events
- Facebook: 607  @ESHAnnualMeetings / @ISHBP / @bhsocvents

Help us to promote!

#hypertension2021

JOINT MEETING ESH-ISH 2021 Glasgow

VENUE – SEC Centre

Distances:

- Airport – 15 minutes by car
- City Centre – 5 minutes by car
- Selected hotels – 5 minutes walking



JOINT MEETING ESH-ISH 2021 Glasgow

Faculty Accommodation

Crowne Plaza Glasgow
Set on the banks of the River Clyde,
with a direct internal link to the SEC Armadillo and Centre
283 modern and superbly furnished bedroom



JOINT MEETING ESH-ISH 2021 Glasgow

Social Programme

Opening Ceremony & Welcome Cocktail
Sunday, April 11/ CLYDE AUDITORIUM – SEC
Waiting for confirmation of young bagpipers by The National Piping Centre performing at the end of the opening Ceremony.

Presidential Dinner
Monday, April 12 / BUTE HALL – University of Glasgow



Several healthy meeting initiatives in collaboration with SEC have been organized.

JOINT MEETING ESH-ISH 2021 Glasgow

Healthy Meeting Initiatives

in collaboration with SEC:

- **Trees for life:** SEC will donate a grove of trees on behalf of our conference delegates. A tree certificate will be seen on SEC Centre concourse digital screens during our meeting, and will be shared on our communication channels.
- **Step challenge:** everyone can easily participate by using a pedometer app with his smartphone and sharing the total number of steps on twitter using the official account and hashtag, with the possibility to win the challenge and be awarded. A good initiative to encourage people walking more.
- **Next bikes and walking routes information:** our delegates will have free, unlimited access to Nextbikes, which are located directly outside of the Armadillo. We will promote the use of Nextbikes on the digital screens throughout the venue and through our communication channels.
- **Fun Run:** with the aim to organize a run for our delegates, we are getting in touch with a local charity which could be able to support this initiative in order to have the lowest possible economic impact on the event budget. To be Confirmed.



R. Kreutz thanked M. Massaro for all the work done.

b. 2022 ESH MEETING, ATHENS

K. Tsioufis reported they will start working on the meeting in Athens after Glasgow.

c. 2023 ESH MEETING, MILAN – Nothing to report

d. 2024 BID STATUS

K. Tsioufis reported, that he will act as the chair of the 2024 BID selection committee. He reported that three applications have been received from Germany (Berlin), Poland (Poznan) and Spain (Seville).

In a first TC, the Selection Committee: E. Lurbe, J. Polonia (not participating), G. Mancina and B. Jelakovic (not participating), discussed the process to follow for the selection of the host city.

A. Januszewicz declared that he was not aware of the initiative from Poland and reported that for reasons of a conflict of interest, due to the Polish candidature, he stepped down from his position as a member of the Selection Committee.

R. Kreutz also declared that for reasons of conflict, due to the German candidature, he is not on the Selection Committee. His only comment to the Selection Committee is that they should not delay the decision until next year, because the selected candidates need to be informed this year as soon as possible in order to proceed with appropriate planning of the meeting.

13. ESH MEMBERSHIP

Nothing to report. Will be discussed in November during the next Council meeting

14. ESH 2020 AWARD STATUS

A. Januszewicz informed the Council no nominations were received for the 2020 Awards. After discussion, the Awards Committee decided, because of the postponement of the 2020 Annual meeting, no Awards will be conferred in 2020.

15. ESH RESEARCH PROJECTS

a. MASTER Study

G. Parati reported on the MASTER Study. As of February 2020, 26 centres have signed up for the study and 22 centres are pending signature of the contract. 85 patients have been screened aiming at 1300 total patients. Due to the COVID-19 outbreak, many hospitals involved in the MASTER study have been converted into COVID-19 centres and routine visits in the clinic have been temporarily suspended.

b. ESH EMERGENCY BP Study

K. Tsioufis reported this is a joint effort with a French team. The study has been affected by the current situation but should move forward in the next few months. More information will be provided during the Council meeting in November.

c. ESH APP Pilot Study

K. Tsioufis reported that due to the COVID-19 outbreak the study has slowed down. Enrollments will begin in June. Pilot study in 6 European countries. More information will be provided during the Council meeting in November.

d. ESH CARE APP

G. Parati gave an update on the ESH CARE APP. A new section on children with high BP has been completed and is available online.

Additional sessions on global CV risk assessment are in progress. The CHARGE APP Study is ready to start recruiting and will be carried out in Buenos Aires and in Shanghai.

16. OTHER ISSUES

G. Mancia informed the Council that according to trial design and protocol the ESH-CHL-SHOT Trial will be terminated. The trial will be closed in Europe on June 30th and in China on September 30th. A closing visit will follow up 3 months after the closure. Less than 200 patients were enrolled in Europe and less than 3000 were enrolled in China. G. Mancia has slides but to save time will send the slides and letter to R. Kreutz for ESH approval. How to communicate the closure of the study can be discussed after the Chinese closure.

*The slides and letter are attached as Appendix to the Minutes.

17. DATES FOR FUTURE COUNCIL MEETINGS

a. Saturday November 7th, 2020 – Warsaw.

M. Massaro provided a brief overview on the organization of the next Council meeting in Warsaw. The venue has been confirmed and invitations will be sent out in July. All conditions provided by the Hotel venue are currently unchanged. Due to the uncertain situation, options

with the hotel are open. AIM is monitoring travel regulations, as this could be a major problem.

b. Saturday January/February 2021

Decision in Warsaw on whether this meeting is necessary.

18. CLOSURE

R. Kreutz thanked M. Massaro and M. Calderai for organizing the second successful Zoom meeting. He said he was very happy with how the meeting went. Several actions have been taken and a new Task Force for education events was set up on web-based Educational activities, G. Mancina will head the Task Force. He thanked everyone for their continuing support over the last few months. He closed the meeting wishing everyone all the best and looks forward to seeing everyone soon.



Reinhold Kreutz
ESH President



Andrzej Januszewicz
ESH Secretary