

Annual Working Group Report Form

Year/time period of report: 2022

Name of Working Group: Working Group on Hypertension and the Kidney Name of Working Group Section (if applicable): NA

Composition of Working Group

Chair: Jean-Michel Halimi Email: jean-michel.halimi@univ-tours.fr Year of appointment: June 2022 Year of birth: 1962

Vice-Chair:

Liffert Vogt Email: I.vogt@amsterdamumc.nl Year of appointment: June 2022 Year of birth: 1975

Working Group Members

Current number of members: 53 2 New members approved this year:

Bénédicte Sautenet, France, 1983 Diego Francisco Marquéz, Argentina, 1980

Activities of the year

Publications on behalf of the Working Group

Published in 2021

1) Pisano A, Mallamaci F, D'Arrigo G, Bolignano D, Wuerzner G, Ortiz A, Burnier M, Kanaan N, Sarafidis P, Persu A, Ferro CJ, Loutradis C, Boletis IN, London G, Halimi JM, Sautenet B, Rossignol P, Vogt L, Zoccali C. Assessment of hypertension in kidney transplantation by ambulatory blood pressure monitoring: a systematic review and meta-analysis. Clin Kidney J. 2021 Sep 23;15(1):31-42.

2) Halimi JM, Ortiz A, Sarafidis PA, Mallamaci F, Wuerzner G, Pisano A, London G, Persu A, Rossignol P, Sautenet B, Ferro C, Boletis J, Kanaan N, Vogt L, Bolignano D, Burnier M, Zoccali C. Hypertension in kidney transplantation: a consensus statement of the 'hypertension and the kidney' working group of the European Society of Hypertension. J Hypertens. 2021 Aug 1;39(8):1513-1521.



3) Ortiz A, Ferro CJ, Balafa O, Burnier M, Ekart R, Halimi JM, Kreutz R, Mark PB, Persu A, Rossignol P, Ruilope LM, Schmieder RE, Valdivielso JM, Del Vecchio L, Zoccali C, Mallamaci F, Sarafidis P; European Renal and Cardiovascular Medicine (EURECA-m) working group of the European Renal Association European Dialysis and Transplant Association (ERA-EDTA) and the Hypertension and Kidney working group of the European Society of Hypertension (ESH). Mineralocorticoid receptor antagonists for nephroprotection and cardioprotection in patients with diabetes mellitus and chronic kidney disease. Nephrol Dial Transplant. 2021 May 4:gfab167.

4) Pisano A, Mallamaci F, D'Arrigo G, Bolignano D, Wuerzner G, Ortiz A, Burnier M, Kanaan N, Sarafidis P, Persu A, Ferro CJ, Loutradis C, Boletis IN, London G, Halimi JM, Sautenet B, Rossignol P, Vogt L, Zoccali C. Blood pressure monitoring in kidney transplantation: a systematic review on hypertension and target organ damage. Nephrol Dial Transplant. 2021 Mar 25:gfab076.

5) Sarafidis P, Ortiz A, Ferro CJ, Halimi JM, Kreutz R, Mallamaci F, Mancia G, Wanner C; 'Hypertension and the Kidney' working group of the European Society of Hypertension (ESH) and the 'European Renal and Cardiovascular Medicine' (EURECA-m) working group of the European Renal Association - European Dialysis and Transplant Association (ERA-EDTA). Sodium--glucose co-transporter-2 inhibitors for patients with diabetic and nondiabetic chronic kidney disease: a new era has already begun. J Hypertens. 2021 Jun 1;39(6):1090-1097.

In preparation:

1) Systematic review: Malignant hypertension and kidney diseases (project led by Jean-Michel Halimi and Liffert Vogt, list of authors not finalized).

WG scientific meeting

Chairpersons: J.-M. Halimi (Tours, FRANCE), P. Sarafidis (Thessaloniki, GREECE) • Diagnostic and prognostic utility of out-of-office BP monitoring in CKD | G. Parati (Milan, ITALY)

• The effects of sleep quality on overall BP control in CKD | G. Bakris (Chicago, IL, USA)

• Receptor antagonists for nephroprotection: an old concept revisited? | L.M. Ruilope (Madrid, SPAIN)

• SGLT2 inhibitors for nephroprotection in non-diabetic patients with CKD | P. Sarafidis (Thessaloniki, GREECE)

• Hypertension in patients with renal transplantation: current concepts and future directions | J.-M. Halimi (Tours, FRANCE)

Participation to the ESH Annual Meeting 2022 WG scientific meeting:

Chairpersons: Pantelis Sarafidis, Manno Pruijm

• Adherence to antihypertensive treatment in patients with CKD: a barrier to optimal renoprotection, Michel Burnier, Lausanne, Switzerland.

• Sex differences in blood pressure prevalence and control in patients with predialysis CKD, ESKD and renal transplantation, Roberto Minutolo, Naples, Italy.



• Resistant hypertension in chronic kidney disease: new insights and therapeutic perspectives, Julian Segura, Madrid Spain

• Mineralocorticoid receptor antagonists and nephroprotection: from background evidence to outcome data, Maria-Eleni Alexandrou, Thessaloniki, Greece.

Presentation of the WG « Hypertension in kidney transplant recipients » consensus : Breakfast meeting (Athens, ESH, June 18th): Hypertension in patients with renal transplantation: an ESH position statement J.-M. Halimi (Tours, FRANCE)

Scientific projects

Completed this year: NA Ongoing: -European/International Fibromuscular Dysplasia Registry. A Persu -"HAMA" (a cohort of patients with malignant hypertension followed in France and now in Germany). Romain Boulestreau, J-M Halimi

Educational projects

Completed this year: NA Ongoing: Joint Statement on Standardized BP Measurement (ESH collaboration with KDIGO, P. Sarafidis)

Collaborations with other WGs/Scientific Societies:

 European Renal and Cardiovascular Medicine (EURECA-m) working group of the European Renal Association (ERA)
(through ESH) Kidney Disease Improving Global Outcomes (KDIGO)

Filled by (full name): Jean-Michel Halimi

Date: 29/12/2022

Appendix:

List of all current WG members incl. full name, e-mail Others (not mandatory): detailed statutes



	bers-Date: December 31, 2022	-	
Name	Firstname	Country	Email
Al Said	Jafar	Bahrain	jafaralsaid@gmail.com
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Statutes of the Working Group "Hypertension and the Kidney"

Article 1

The working group (WG HT & Kidney) is established as a working group of the European Society of Hypertension (ESH) according to the by-laws of the ESH. The internal governance of the WG is regulated by ESH Council-approved Rules and Regulations.

Article 2

The WG encourages research, teaching, and communication of knowledge, and participates in education focused on the effects of high blood pressure and associated cardiovascular risk factors on the Kidney.

Specific objectives include:

• To contribute to the organization of the scientific program of the annual ESH Congress and to support and participate in other ESH scientific meetings and symposia

• To contribute to task forces for the development and implementation of ESH guidelines and joint guidelines with sister societies

• To develop position papers and consensus documents on hypertension and the kidney in collaboration with sister societies

• To contribute to the organization of joint sessions with other international societies and other scientific meetings related to the Kidney

Article 3

The Board consists of:

Officers: Chair, immediate Past-Chair, Secretary, and up to five officers.

The Chair and the Secretary are elected for a non-renewable period of 4 years (2 years + 2 years if no other candidate applies). The Chair automatically becomes Past-Chair for the following 4 years, after his/her term of office has expired. The Past-Chair has an advisory role.

The officers are appointed by the Chair for the duration of his mandate. Approval from the majority of the WG is necessary. Officers have to be members of the WG in order to be appointed.

Article 4

The Secretary, with the agreement of the Chair, is responsible for preparing an annual report on the activities of the WG for the ESH Council and the membership, to be presented and approved at the Annual General Assembly.

Article 5

The members of the WG will elect the Chair and Secretary every 4 years, unless a new candidate applies after 2 years of the mandate. In this case a vote is organized after 2 years.

Article 6

The Board will consist of members with a proven record in the field of hypertension and the Kidney. Potential members should apply to the Chair by submitting a brief (one page) curriculum vitae including relevant references related to the subject of the working group. The Chair will ratify the application, but may ask for advice from the other Officers if deemed appropriate.



Article 7

The Board will meet at least once a year at the annual ESH Congress. The Board may meet in conjunction with other events and hold conference calls when required.

Article 8

The General Assembly will be held once a year during the annual ESH Congress. The agenda of the General Assembly will be drawn up by the Chair.