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The World Health Organization Recognizes Noncommunicable Diseases and Raised Blood Pressure as Global Health Priority for 2025

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The World Health Organization (WHO) Global Monitoring Framework includes a set of nine voluntary noncommunicable disease goals for 2025.¹ It was endorsed by the World Health Assembly in 2013 and includes for the first time a shared target to reduce the prevalence of raised blood pressure (BP; 140/90 mm Hg) globally by 25% by 2025. Other related priorities include reducing salt intake by 30% and physical inactivity by 10%.

Hypertension affects 1 billion people worldwide and one third of adults have the condition. In addition to a significant increase in morbidity and mortality, the economic impact of suboptimal BP control is substantial. Reasons for poor BP control are many, ranging from poor medication adherence as a result of drug cost and complex medication regimens, to an inability to deliver effective treatment because of inadequate patient medical care, initial access, and follow-up, to complicated treatment algorithms for providers to follow.

To address these issues, the Centers for Disease Control and Prevention (CDC), Pan American Health Organization, and other major stakeholder organizations are collaborating on the Global Standardized Hypertension Treatment Project.² The Project aims to standardize and simplify the treatment of hypertension through the development of a framework that is flexible and has worldwide applicability. In Latin America and the Caribbean, regional workshop participants developed a primary core set of medications appropriate for the treatment of most adults with the condition. They include a diuretic (chlorthalidone), angiotensin-converting enzyme inhibitor (lisinopril), angiotensin receptor blocker (losartan), calcium channel blocker (amlodipine), b-blocker (bisoprolol), and a

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mineralocorticoid antagonist (spironolactone). Additional combination pharmacologic regimens were developed as well. Mechanisms to increase the availability and affordability of these medications in the region are also being pursued.

Other Project aims are to identify and promote the integration of specific key evidence-based healthcare delivery elements that are central to improving hypertension control. Examples are patient registries, standardized treatment protocols, the promotion of multidisciplinary team-based care, and patient self-management.

For the first time, the WHO has specific targets to address noncommunicable diseases and raised BP, in particular, as a worldwide health priority. Towards this end, the introduction of a global standardized treatment approach to hypertension has great potential to enhance BP treatment and control worldwide.

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