

## Hypertension: Update 2018

Anna F. Dominiczak, Denise Kuo

*Hypertension* has enjoyed another successful year; a year in which our sustained efforts to increase clinical content of the Journal have seen success. On behalf of the entire editorial team, it is with pleasure that we share with you a few key highlights from the past 12 months as well as a glimpse of what you may expect from the Journal in 2018.

### Guidelines

Early in 2016, we invited many regional hypertension societies to contribute to a guideline debate series with the goal of bringing opinions and comments of key leaders involved in regional and international hypertension guidelines to the hypertension community. Researchers representing Hypertension Canada, Latin American Society of Hypertension, International Society of Hypertension, and European Society of Hypertension shared their opinions on the challenges facing guideline writers as well as clinicians referring to guidelines in their daily practice.<sup>1-4</sup>

Just a few weeks ago, the latest Hypertension Clinical Practice Guidelines<sup>5</sup> were published in *Hypertension*. The expert writing group developed the latest iteration of guidelines with the support of several US-based societies including the American Heart Association (AHA) and the American College of Cardiology. Thus, we are poised to continue the conversation we began in 2016. We have, therefore, invited regional and continental hypertension societies to share the opinions of their member clinicians, practitioners, and guideline developers on the 2017 Hypertension Clinical Practice Guidelines in the pages of *Hypertension*.<sup>6</sup> Look for additional articles throughout the coming months discussing the impact of guidelines on clinical practice and future research.

### Top Papers Published in *Hypertension*

Each June, *Hypertension* editors select the top papers published in the Journal throughout the previous calendar year. One or 2 papers are selected from each of 3 categories, basic science, clinical science, and population science. The six 2016 Top Paper Award articles,<sup>7-12</sup> published in 2016 and selected in 2017, were highly accessed by readers, clearly novel, and have important clinical implications. The 2016 award-winning articles highlight many important topics within hypertension research. Those topics

include the role of reduced renal function in risk of cardiovascular disease, the role of sleep restriction with circadian misalignment in risk of cardiovascular disease, the effect of Etanercept on the uterine vasculature during pregnancy, additional explanation for the protective effects of mineralocorticoid receptor antagonists in cardiovascular disorders with sympathetic activation, prognostic effect of nocturnal systolic blood pressure fall, and trends in hypertension management among octogenarians.

Continuing a tradition started in 2016, corresponding authors of each selected Top Paper were not only invited to attend the Joint Hypertension 2017 Scientific Sessions to accept the award in person but also invited to discuss the novelty and clinical implications of their work in front of the camera. The short interviews filmed in San Francisco during the conference sponsored by the AHA Council on Hypertension, AHA Council on Kidney in Cardiovascular Disease, and the American Society of Hypertension are available from *Hypertension's* playlist on AHA's Science News YouTube channel (<https://www.youtube.com/playlist?list=PLzCpCvMeTCs5qu6yFin9oyfgIJPn7Db-j>).

### Clinical-Pathological Conferences

*Hypertension* held another successful Clinical-Pathological Conference (CPC) at the European Society of Hypertension's annual meeting in 2017. The 90-minute session focused on 2 cases. Prof Alexandre Persu (Brussels) presented a case focused on management of hypertension in a pregnant woman with fibromuscular dysplasia and Dr Marc George (London) led the international audience through discussion of a patient with presumably resistant hypertension, confirming the diagnosis and contemplating alternative therapies.

This feature of *Hypertension* continues in popularity; therefore, a session was again held at the AHA Hypertension Scientific Sessions. The 2017 conference in San Francisco, California, 14 to 17 September, was jointly sponsored by the AHA Council on Hypertension, AHA Council on the Kidney in Cardiovascular Disease, and the American Society of Hypertension. Two difficult clinical cases were presented. Dr Michael Bursztyrn (Jerusalem) discussed a woman with severe hypertension and nephrotic-range proteinuria, whereas the team from Alabama, Dr Mohammed Siddiqui and Dr David Calhoun (Birmingham) presented a case of refractory hypertension controlled after aortic and mitral valve replacement and coronary artery bypass grafting.

The videos for all CPC cases are available on *Hypertension's* website,<sup>13</sup> and accompanying manuscripts will be published in future issues of the Journal.

### Coming in 2018

There will be multiple opportunities for hypertension researchers to participate in Journal-sponsored CPC case presentations and discussions in 2018. Because each CPC case discussion is not only filmed but also published as a manuscript, all audience members are acknowledged, and audience members who significantly contribute to the discussion may be included as coauthors

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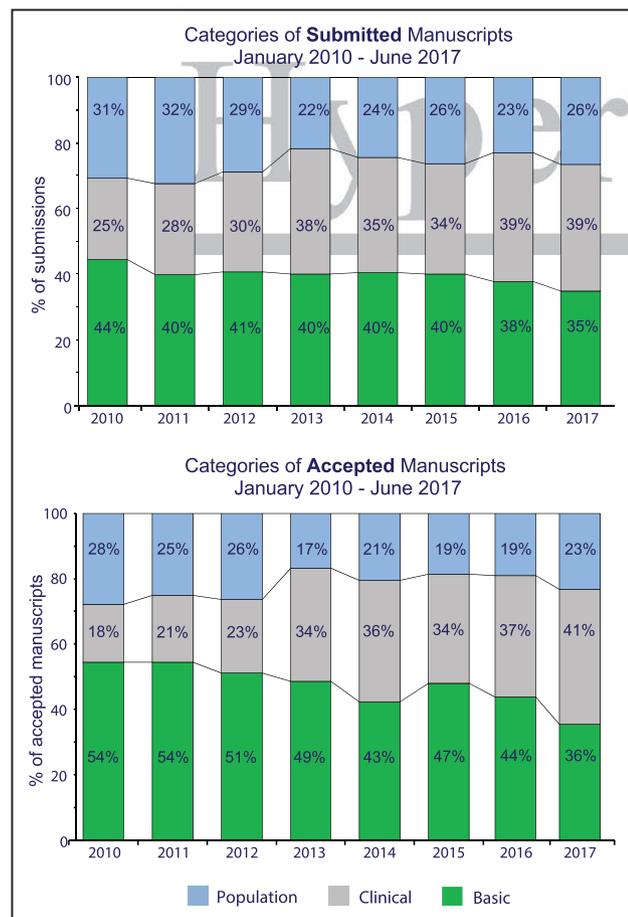
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of the CPC article. The first opportunity to participate in a CPC in 2018 will be in Barcelona at the 28th European Congress on Hypertension and Cardiovascular Protection, June 8 to 11. There will also be multiple opportunities in September 2018. CPC case presentations are planned for both the AHA Hypertension 2018 Scientific Sessions in Chicago, September 6 to 9, and Hypertension Beijing, the International Society of Hypertension biannual conference in Beijing, September 20 to 23.

Additional CPC cases are only one initiative that has led to increased clinical content in the pages of the Journal. Through the sustained encouragement of clinical trial and epidemiological manuscript submissions as well as commissioned reviews, *Hypertension* is successfully shifting toward increased clinical submissions and published content (Figure). We look forward to maintaining the momentum in 2018.

In summary, although the publishing landscape continues evolving, the goals for *Hypertension*, an AHA Journal, remain largely the same. The editorial team continues working to (1) publish the highest quality original basic, clinical, and population research relating to hypertension; (2) increase the readership and scientific importance of *Hypertension*; (3) provide fair and quick reviews for submitted manuscripts followed by rapid publication of all accepted articles; and (4) serve well the international community of hypertension researchers and practitioners while being an important vehicle for achieving the mission of the AHA.



**Figure.** Percent of manuscripts by year in each of 3 categories: basic science, clinical science, population science. **Top,** Manuscripts submitted to *Hypertension*. **Bottom,** Manuscripts accepted for publication in *Hypertension*.

The *Hypertension* editorial team recognizes the commitment and energy our many readers have spent reviewing manuscripts, submitting the best research to *Hypertension*, and providing feedback that has improved the Journal. Thank you for your time and effort in 2017. We hope for your continued support and look forward to receiving your best papers in basic, clinical, and population research.

## Disclosures

None.

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