

# **Tratamiento y control de la hipertensión arterial en Latinoamérica. Programa LASH 20X20**

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Latinoamericana de Hipertensión (LASH)**

**Bucaramanga-Colombia**



# NACIMIENTO PROGRAMA HTA 20 x 20

**Journal Hypertension 2015 Jan;33(1):189-90**

The 20 × 20 Latin American Society  
of Hypertension target

Patricio Lopez-Jaramillo<sup>a</sup> and Dora I. Molina<sup>b</sup>

In Latin America, of those with hypertension, 57.1% were aware of this condition and 52.8% were receiving pharmacological treatment, but only 18.8% had controlled BP (<140/90 mmHg). Moreover, only 35.5% of those on treatment had a BP less than 140/90 mmHg. On the basis of these findings, in May 2014, a group of experts of the Latin America Society of Hypertension (LASH) representing 12 countries met in Cartagena de Indias (Colombia) and agreed to implement the '20 × 20 LASH target', with the goal of achieving a 20% increase (relative to the Latin America data of the PURE study) in the awareness, treatment, and control of hypertension by 2020. To reach this goal, LASH has developed and is implementing the Latin American guidelines for Hypertension, Diabetes, and Metabolic Syndrome for use by primary care personnel [3], and is developing a virtual Masters Course in the Practical Diagnostic and Management of Hypertension and associated cardiovascular risk factors, specifically designed for general practitioners and nurses in the region. The course has a particularly strong emphasis on how to implement the strategies of information, communication, and education to the community.

We hope that these actions aid the Latin American countries' efforts in reaching the UN 25 × 25 goal.

# OBJETIVO PROGRAMA HTA 20 x 20

● **Objetivo:** > 20% del control de la HTA del PURE para 2020



● **Campaña integral en LATAM:**

- Información al paciente y al médico.
- Formación al médico de atención primaria.
- Seguimiento del paciente a largo plazo.
- Facilitar el acceso a los fármacos

● **Desarrollada por país pero con un mismo mensaje:**

- En colaboración con las Sociedades Científicas locales.
- Apoyada por Universidades e instituciones internacionales.



# OBJETIVO PROGRAMA HTA 20 x 20

**Objetivo:** > 20% del control de la HTA del PURE para 2020

## CAMPAÑA INTEGRAL DE INFORMACIÓN, FORMACIÓN Y CONTROL DE HTA

**1 Información Población:**

**300.000 pacientes**



**2 Información Médica:**

**50.000 Médicos**



**3 Formación Médica:**

**2.000 Médicos**



**4 Control y seguimiento HTA:**

**40.000 pacientes**



**5 Acceso fármacos:**

**40.000 pacientes**



# INFORMACIÓN MÉDICOS: Manual HTA

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MANUAL PRÁCTICO LASH  
DE DIAGNÓSTICO Y MANEJO  
DE LA HTA EN LATINOAMÉRICA



EDITORES

Patricio López-Jaramillo  
Dora Inés Molina de Salazar  
Antonio Coca  
Alberto Zanchetti



 **Dirección de acceso:**

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- RedLaser (Android e I-Phone)

# FORMACIÓN MÉDICOS: Curso HTA

Curso de extensión Universitaria: Diplomado en HTA y Riesgo CV

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## CURSO LATINOAMERICANO

Extensión Universitaria de Postgrado de Formación Médica Continuada no Presencial en

## HTA y ENFERMEDAD CV



### Director España

Dr. Antonio Coca Payeras  
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(Barcelona)

### Director Latino-América

Dr. Patricio López Jaramillo  
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Dr. Leonardo Cobos  
(Chile)  
Dr. Fernando Wyss Quintana  
(Guatemala)  
Dr. Alfredo Bryce  
(Perú)

## Características:

- 2.000 Médicos AP y MI.
- 2 Directores: España y LatAm.
- 6 Coordinadores de país.
- 18 Editores de contenidos.
- 18 Profesores Locales (3 por país)
- 18 meses lectivos (3 por módulo).
- Titulación LASH y UB.
- Acuerdo LASH – Sociedades locales de AP.
- Recertificación Sociedades Primaria.
- Sesión presencial congreso nacional AP.

# Guidelines Debate

## Hypertension Guidelines: Is It Time to Reappraise Blood Pressure Thresholds and Targets?

### Position Statement of the Latin American Society of Hypertension

Patricio López-Jaramillo, Antonio Coca, Ramiro Sánchez, Alberto Zanchetti;  
on behalf of the Latin American Society of Hypertension

*(Hypertension. 2016;68:00-00.*

**DOI: 10.1161/HYPERTENSIONAHA.116.07738.)**

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*Hypertension* is available at <http://hyper.ahajournals.org>

**DOI: 10.1161/HYPERTENSIONAHA.116.07738**



## Original Article

# Social disparities explain differences in hypertension prevalence, detection and control in Colombia

Paul A. Camacho<sup>a,b</sup>, Diego Gomez-Arbelaez<sup>a,c</sup>, Dora I. Molina<sup>d</sup>, Gregorio Sanchez<sup>e</sup>, Edgar Arcos<sup>f</sup>, Claudia Narvaez<sup>g</sup>, Henry García<sup>h</sup>, Maritza Pérez<sup>i</sup>, Erick A. Hernandez<sup>j</sup>, Myriam Duran<sup>c</sup>, Carlos Cure Aristides Sotomayor<sup>l</sup>, Alvaro Rico<sup>m</sup>, Tannia M. David<sup>n</sup>, Daniel D. Cohen<sup>a</sup>, Sumathy Rangarajan<sup>o</sup>, Salim Yusuf<sup>o</sup>, and Patricio Lopez-Jaramillo<sup>a,c</sup>

Journal of Hypertension 2016, 34:2344–2352

## Original Article

# Prevalence, awareness, treatment and control of hypertension in rural and urban communities in Latin American countries

Pablo Lamelas<sup>a</sup>, Rafael Diaz<sup>b</sup>, Andres Orlandini<sup>b</sup>, Alvaro Avezum<sup>c</sup>, Gustavo Oliveira<sup>c</sup>, Antonio Mattos<sup>c</sup>, Fernando Lanas<sup>d</sup>, Pamela Seron<sup>d</sup>, Maria J. Oliveros<sup>d</sup>, Patricio Lopez-Jaramillo<sup>e</sup>, Johanna Otero<sup>e</sup>, Paul Camacho<sup>e</sup>, Jaime Miranda<sup>f</sup>, Antonio Bernabe-Ortiz<sup>f</sup>, German Malaga<sup>f</sup>, Vilma Irazola<sup>g</sup>, Laura Gutierrez<sup>g</sup>, Adolfo Rubinstein<sup>g</sup>, Noelia Castellana<sup>b</sup>, Sumathy Rangarajan<sup>a</sup>, and Salim Yusuf<sup>a</sup>

## Consensus Document

# Best antihypertensive strategies to improve blood pressure control in Latin America: position of the Latin American Society of Hypertension

Antonio Coca<sup>a</sup>, Patricio López-Jaramillo<sup>b,c</sup>, Costas Thomopoulos<sup>d</sup>, and Alberto Zanchetti<sup>e</sup>,  
on behalf of the Latin American Society of Hypertension (LASH)

**Journal of Hypertension 2018;36(2):208-220.**



**ESC**

European Society  
of Cardiology

# May Measurement Month 2017: an analysis of blood pressure screening results in Colombia–Americas

Patricio López-Jaramillo<sup>1,2\*</sup>, Johanna Otero<sup>1,2</sup>,  
Sandra Milena Rueda-Quijano<sup>1</sup>, Paul Anthony Camacho<sup>1,3</sup>,  
Juan José Rey<sup>3</sup>, Gregorio Sánchez<sup>4</sup>, Claudia Narváez<sup>5</sup>, José Luis Accini<sup>6,7</sup>,  
Edgar Arcos<sup>8</sup>, Henry García<sup>9</sup>, Maritza Pérez<sup>10</sup>, Gustavo Aroca<sup>11</sup>,  
Thomas Beaney<sup>12</sup>, Elsa Kobeissi<sup>12</sup>, and Neil R. Poulter<sup>12</sup>



# Archivos de Cardiología de México

[www.elsevier.com.mx](http://www.elsevier.com.mx)



## REVIEW ARTICLE

# Fixed dose combination therapy to improve hypertension treatment and control in Latin America

Silvia González-Gómez<sup>a</sup>, Mayra Alejandra Meléndez-Gomez<sup>a</sup>,  
Patricio López-Jaramillo<sup>a,b,c,\*</sup>

## Consensus Document

# Latin American Consensus on the management of hypertension in the patient with diabetes and the metabolic syndrome

Patricio López-Jaramillo<sup>a</sup>, Eduardo Barbosa<sup>b</sup>, Dora I. Molina<sup>c</sup>, Ramiro Sanchez<sup>d</sup>, Margarita Diaz<sup>e</sup>, Paul A. Camacho<sup>f</sup>, Fernando Lanas<sup>g</sup>, Miguel Pasquel<sup>h</sup>, José L. Accini<sup>i</sup>, Carlos I. Ponte-Negretti<sup>j</sup>, Luis Alcocer<sup>k</sup>, Leonardo Cobos<sup>l</sup>, Fernando Wyss<sup>m</sup>, Weimar Sebba-Barroso<sup>n</sup>, Antonio Coca<sup>o</sup>, and Alberto Zanchetti<sup>p,\*</sup>, on behalf of the Latin American Society of Hypertension Consensus Expert Group

**J Hypertens. 2019 Mar 14. doi: 10.1097/HJH.0000000000002072. [Epub ahead of print]**

**Therefore, in order to improve the control of hypertension and DM2, it is essential that Latin American health systems guarantee availability and access to a core group of basic medicines, and that standardized treatment algorithms should be introduced, as previously proposed by LASH [244,245] and the WHO/PAHO [263–267]. This strategy is currently being piloted within the HEARTS program in Barbados, Cuba, Colombia and Chile [268]**



Contents lists available at [ScienceDirect](#)

## American Heart Journal



### Trial Designs

# Rationale and design of a cluster randomized trial of a multifaceted intervention in people with hypertension: The Heart Outcomes Prevention and Evaluation 4 (HOPE-4) Study



Jon-David Reid Schwalm, MD, MSc, FRCP(C)<sup>a,b,\*</sup>, Tara McCready, PhD<sup>a</sup>, Pablo Lamelas, MD<sup>a,b</sup>, Hadi Musa, MHK<sup>a</sup>, Patricio Lopez-Jaramillo, MD, PhD, FACP<sup>d,e</sup>, Khalid Yusoff, MBBs, Hon. D Med Sc., FRCP Edin., FRCP Glasg., FRCP Lond., FACC, Hon. FPCP, FIAS, FAMM, FASc<sup>f,g</sup>, Martin McKee, CBE, MD, DSc, MSc, FRCP, FRCPE, FRCPI, FFPH, FMedSci<sup>h</sup>, Paul Anthony Camacho, MD, MSc<sup>d,i</sup>, Jose Lopez-Lopez, PhD, MD, DDS<sup>d,i</sup>, Fadhlina Majid<sup>j</sup>, Lehana Thabane, PhD<sup>c</sup>, Shofiqul Islam, PhD<sup>a</sup>, Salim Yusuf, MD, DPHIL, MRCP<sup>a,b</sup>



# Elements of HEARTS



## **H** HEALTHY LIFESTYLE

Counselling on tobacco cessation, diet, physical activity, alcohol use and self-care

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## **E** EVIDENCE-BASED TREATMENT PROTOCOLS

Simple, standardized algorithms for clinical care

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## **A** ACCESS TO ESSENTIAL MEDICINES AND TECHNOLOGY

Access to core set of affordable medicines and basic technology

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## **R** RISK-BASED MANAGEMENT

Total cardiovascular risk assessment, treatment and referral

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## **T** TEAM CARE AND TASK-SHARING

Decentralized, community-based and patient-centred care

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## **S** SYSTEMS FOR MONITORING

Patient data collection and programme evaluation

# RESULTS

**PERCENTAJE CONTROL COMMUNITIES IN  
STARD CARE?**

**SYSTOLIC BLOOD PRESSURE MEAN?**

**PERCENTAJE CONTROL COMMUNITIES IN  
INTERVENTION?**

**FRAMINGHAM RISK SCORE?**

**WILL BE PRESENTED IN THE ESC**

**CONGRESS PARIS, SEPTEMBER 2019**

NDAZIONE INTERNAZIONALE ME



2020  
PROYECTO  
CONTROL  
HTA



Asociación Colombiana de  
Nefrología e Hipertensión Arterial





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## GRACIAS