International Society and Federation of Cardiology
Societé et Fédération Internationale de Cardiologie
Sociedad y Federación International de Cardiología

SCIENTIFIC SECTION ON EPIDEMIOLOGY AND PREVENTION

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SECTION

ON

EPIDEMIOLOGY AND PREVENTION

ESTABLISHED 1966

The Section on Epidemiology and Prevention of the International Society and Federation of Cardiology (ISFC) is a scientific organization within the ISFC established to promote the acquisition, evaluation, dissemination, and application of scientific knowledge on the epidemiology and prevention of cardiovascular diseases and to represent the interests of the ISFC in these areas. These interests include:

- (1) Development and standardization of methods and criteria.
- (2) Training of research personnel.
- (3) Promotion of international cooperation in research and pooling of data.
- (4) Dissemination of information through the Section's International CVD Newsletter and the ISFC'S journal Heartbeat.
- (5) Contribution to the organization of the programmes of world and regional congresses of cardiology.
- (6) Organization, sponsorship or co-sponsorship of conferences and symposia.
- (7) Promotion of public policy and practical measures for the prevention of cardiovascular diseases.

The ISFC Council on Epidemiology and Prevention serves as an executive body for the ISFC Section on Epidemiology and Prevention. The Section maintains close liaison with the World Health Organization and other appropriate international organizations, with the ISFC Councils and Sections representing other branches of cardiology, and with the various ISFC regional and national organizations.

# Notes on the History of the Section

At the Vth World Congress of Cardiology, held in New Delhi, India in 1966, eight Scientific Councils were established as official arms of the International Society of Cardiology to promote the scientific life of the Society. One of these was the Scientific Council on Epidemiology and Prevention. Two basic ideas formed the framework of this Council. The first was the recognition that a key strategy in control of epidemic cardiovascular diseases — particularly coronary heart disease — was primary prevention. A second fundamental idea was based on the observation that incidence of these diseases varied greatly among the world's populations, and study of the factors related to these differences — epidemiologic investigations — could help form the necessary scientific foundation for prevention. From the very beginning of its activity the Council on Epidemiology and Prevention was organized to form as its background organization a section open to physicians and other scientists interested in the epidemiology and prevention of cardiovascular diseases. The Rules

and Regulations of the Council were created by the end of the 1960s. Its basic structure included membership, officers and executive committee. The officers and executive committee are elected at the business meeting of the membership held every four years in connection with the world congress of cardiology. In 1978, at the time of the VIIIth World Congress of Cardiology held in Tokyo, Japan, the mother organization of the Scientific Councils, the International Society of Cardiology, merged with the International Cardiology Federation, the international organization of heart associations, including both physicians and laymen. This merger resulted in the creation of a new organization, the ISFC. The ISFC adopted its own by-laws which in some respects differed slightly from the by-laws of the previous mother organization. When a Council had a large membership, the membership could now officially form a Section of the ISFC, The Rules and Regulations of the Council on Epidemiology were changed accordingly and its membership has since then been called the Section on Epidemiology and Prevention of the ISFC and the executive committee of the Section has been called the Council.

Professor Ancel Keys, USA, was the first Chairman (1966-70), followed by Professors Jerry Morris, UK (1970-74), Jeremiah Stamler, USA (1974-78), Geoffrey Rose, UK (1978-1982), Kalevi Pyorala, Finland (1982-86) and Henry Blackburn, USA (1986-). The first secretary was Professor Jeremiah Stamler, US (1966-74), followed by Kalevi Pyorala, Finland, Dr. Peter Schnohr, Denmark, and Dr. Albert Hofman, The Netherlands (1986 - ). The current list of officers and Council members is appended. The Section in 1986 had 880 members.

#### Development and Standardization of Methods and Criteria

In 1963, three years before the creation of the Scientific Councils, the Research Committee of the International Society of Cardiology proposed that WHO prepare a manual on methods for epidemiological studies of cardiovascular diseases. The outcome was the monograph "Cardiovascular Survey Methods" written by two leading members of the Section, Professors Geoffrey Rose and Henry Blackburn, and published in 1968 (WHO: Monograph Series No. 56). This monograph formed the background for the Section's activity towards international standardization of methods used in research on cardiovascular epidemiology. The second, revised edition of this widely used monograph written by Professors Rose and Blackburn jointly with two other leading members of the Section, Dr. Richard Gillum and Professor Ronald Prineas, was pub-

lished in 1982. In addition to this monograph, the leading members of the Section have written many articles on methodological aspects of epidemiological research.

## Training of Research Personnel

The main undertaking of the Section to promote training has been the annual 10-Day International Teaching Seminar on Cardiovascular Epidemiology and Prevention. first 10-Day Seminar was held in Makarska, Yugoslavia, in 1968. Thereafter the sites of the 10-Day Seminar have been: Pioppi, Italy, 1969; Blessington, Ireland, 1970; Skovde, Sweden, 1971; Singapore, Republic of Singapore, 1972; Orsay, France, 1973; Esztergom, Hungary, 1974; Oaxtepec, Mexico, 1975; Skjoldenaesholm, Denmark, 1976; Accra, Ghana, 1977; Innsbruck, Austria, 1978; Stirling, Scotland, 1979; Elektrenai, Lithuanian SSR, 1980; Heinsheim, Federal Republic of Germany, 1981; Tuohilampi, Finland, 1982; Susono, Japan, 1983; Bilthoven, The Netherlands, 1984; Blackrock, Ireland, 1985; and Santa Maria del Mar, Cuba, 1986. The number of Fellows accepted for each Seminar has been approximately 35 and the Faculty has consisted of 7-8 members. More than 600 physicians or biomedical scientists from over 70 countries throughout the world have participated in these seminars. The example of the 10-Day International Teaching Seminar has stimulated the initiation of regional and national teaching seminars and courses, while the international seminar continues to attract large mumbers of qualified applicants. The 10-Day International Seminars arranged in Finland in 1982 and in Ireland in 1985 were Advanced 10-Day International Teaching Seminars. Most of the Fellows participating in these Advanced Seminars had earlier attended the basic 10-Day Seminar and all had been actively involved in research on epidemiology or prevention over several years. According to current plans the basic Seminars will continue, with an Advanced Seminar every third or fourth year.

Over the years the core faculty has included Professors Geoffrey Rose (UK), Richard Remington (USA), Jeremiah Stamler (USA), Rose Stamler (USA), Michael Marmot (UK), and Morton Hawkins (USA). Since 1970, Professor Rose Stamler has been the Coordinator of the international seminars.

### Contributions to Development of Public Health Policy

The Section has in the 1980s become increasingly involved in development of health policy for prevention of major cardiovascular diseases. Prevention of coronary heart disease on a population-wide basis has been the subject of three important meetings arranged by the World Health Organization (WHO) - the WHO Expert Committee on Coronary Heart Disease meeting, held in 1981, Geneva, Switzerland; the European Conference on Primary Prevention of Coronary Heart Disease, 1984, Anacapri, Italy; and the meeting of the WHO Expert Committee on Community Prevention and Control of Cardiological Diseases, held in 1984 in Geneva, Switzerland. The last mentioned WHO Expert Committee dealt, in addition to coronary heart disease. with hypertension and rheumatic heart disease. Leading members of the Section participated in these meetings arranged by the WHO and had a major role in the formulation of their published reports and recommendations which have given a useful background for the development of national plans and practical programmes for coronary heart disease prevention. Such work is by now in progress in many countries and members of the Section in these countries are active participants.

The joint recommendations on "Secondary Prevention in Myocardial Infarction Survivors" prepared by the ISFC Councils on Arteriosclerosis, Epidemiology and Prevention, and Rehabilitation at a joint meeting in 1980 in Kronberg, Federal Republic of Germany, were published in <a href="Heartbeat">Heartbeat</a> and thereafter many national cardiological societies published these recommendations in their own languages. The recommendations were updated at a new meeting of the three ISFC Councils mentioned above and the newly established ISFC Council on Clinical Cardiology in 1983 in Titisee, Federal Republic of Germany, and published in 1984 in <a href="Heartbeat">Heartbeat</a> as "Joint Recommendations on Secondary Prevention for Persons with Clinical Coronary Heart Disease". They have received wide acceptance and been translated into several languages.

In 1982, in connection with the IX World Congress of Cardiology, held in Moscow, USSR, an ISFC Committee on Prevention of Rheumatic Fever and Rheumatic Heart Disease was appointed with Professor Edward L. Kaplan (USA) as Chairman. The goal of this Committee is, in collaboration with WHO, to encourage and assist governments of developing countries in establishment and improvement of national rheumatic fever/rheumatic heart disease control programmes. The WHO has selected 15 countries in different WHO regions for a special effort to develop model programmes for rheumatic

fever/rheumatic heart disease prevention on a population-wide basis. The Section assists in this long-term effort by providing expertise and practical help in its specific components.

In 1985, our Council co-sponsored the 1st International Conference on Preventive Cardiology, held in Moscow and attended by more than 1,000 persons.

## Promotion of International Co-operation in Research and Pooling of Data

Collaborative international research activities have developed spontaneously within the membership of the Section. The WHO European Collaborative Trial in the Multifactorial Prevention of Coronary Heart Disease carried out by centres in Belgium. Italy, Poland, Spain and the United Kingdom was initiated through connections created at the 3rd 10-Day International Teaching Seminar, in Blessington, Ireland, in 1970. Several papers on the results of this major preventive trial have been published in 1983-1986.

The "International Collaborative Group", established in 1976, is another example of collaboration between Section members in different countries. The International Collaborative Group published a series of papers in 1979, based on 15 population studies in 11 countries (Australia, Denmark, England, Finland, France, Ireland, Italy, Japan, Scotland, Switzerland, and the United States) on asymptomatic hyperglycaemia and coronary heart disease. They also published in 1982 results of an analysis on the relationship between serum cholesterol level and risk of death from cancer based on pooled data from 11 prospective population studies in 8 countries.

In connection with the First Advanced 10-Day Seminar held in 1982 in Finland, first draft protocols were prepared for INTERSALT - an International Co-operative Study on the Relation of Electrolyte Excretion to Blood Pressure in Populations. The definite study plan was then developed under the leadership of Professors Geoffrey Rose (UK) and Jeremiah Stamler (USA) and their co-workers. The primary hypothesis tested in INTERSALT is that average blood pressure and prevalence of hypertension are linearly related across populations to average levels of sodium intake, potassium intake (inversely), and the sodium/potassium intake ratio. More than 50 population samples from 34 countries were examined in 1985-1986, representing a wide range of sodium intakes. INTERSALT has received the official endorsement of ISFC and is co-sponsored by the International Society of Hypertension. There are three

central and coordinating facilities for INTERSALT. The London School of Hygiene and Tropical Medicine and Northwestern University Medical School, Chicago, have shared responsibility for developing the common protocol and manual of operations, for training local collaborating centres, for helping these local centres to prepare for the study, and for planning analyses of results. The London centre coordinated day-to-day supervision of field work and is responsible for computer analyses of the data. The central laboratory for INTERSALT was established at St. Raphael's University Hospital (Leuven, Belgium), under the leadership of Professor Hugo Kesteloot. Completion of laboratory analyses and computer analyses of the data is expected during 1987.

### Dissemination of Information

The CVD Epidemiology Newsletter, published twice a year by the Council on Epidemiology of the American Heart Association and made available for the Section membership through generous support by the American Heart Association, has since 1970 been the central channel for communication and dissemination of knowledge among the membership of the Section. Of particular importance has been possibility to publish the extensive International News Section which forms the main content of the Summer issue of the Newsletter. Professor Frederick H. Epstein has been the Editor of the International News Section since the beginning of its publication. He has been assisted by a staff of correspondents from different countries and regions.

The journal of the ISFC, <u>Heartbeat</u>, is also important in the dissemination of information within the Section on Epidemiology and Prevention and from the Section to the national ISFC member societies, associations and foundations.

#### Organization of the Section

Membership of the Section is reserved to physicians or other scientists interested in epidemiology and prevention of cardiovascular diseases. Those who wish to become members of the Section shall fill in a special application form. The application has to be sponsored by a member of the Section. The annual fee for membership dues (starting in 1987) is U.S. \$15.00. Members receive the <a href="CVD Epidemiology Newsletter">CVD Epidemiology Newsletter</a> twice a year and information about all activities of the Section. A business meeting of the Section membership is arranged every four years in connection with the world congress of cardiology.

Officers of the Section are the Chairman, Vice-Chairman, and Secretary. Each officer serves for an initial period of 2 years which may be extended for one further period of 2 years. Election of officers takes place at the business meeting of the Section or alternatively by mail ballot. Honorary officers of the Section are the Treasurer and the Newsletter Editor. The honorary officers and members of the Seminar Committee and of any standing committee are eligible for reappointment by the Council.

The Council of the Section consists of the officers and up to 15 additional members elected by the membership for an initial period of 2 years which may then be extended for one further period of 2 years. At least two-thirds of the members of the Council shall retire every four years. The President and President-elect of the ISFC are ex-officio members of the Council.

The Section Chairman is the Chairman of the Council. He/she serves as the representative of the Section on the Scientific Board of the ISFC.

The Council conducts the affairs of the Section in the intervals between quadrennial business meetings of the Section membership and carries out the objectives of the Section within the policies of the ISFC. The Council meets each year. The honorary officers of the Section, the Chief of the WHO Headquarters Cardiovascular Diseases Unit, and the most recent Past Chairman and Past Secretary of the Section are invited to attend Council meetings.