Dr Terence McCormack - Vice President



Nominee Title & Institution:General Practitioner and Honorary Reader, Hull York Medical School

Nominated by: Professor Una Martin

Nominee Election Year: 2008

Seconded by 1: Professor Adrian Brady

Seconded by 2: Professor Sir Mark Caulfield

Nominee Supporting Statement 1:

I am delighted to nominate Terry McCormack for the role of Vice President of the British and Irish Hypertension Society. Terry is a longstanding member of the Society and has contributed to the leadership of the executive team as immediate past Secretary. In this role he oversaw several key developments including the introduction of a young investigator group. Terry's experience as a general practitioner combined with his extensive work on guideline development puts him in a strong position to define the future direction of the Society. This is particularly relevant in a time of increasing challenge to the effective delivery of healthcare. Terry works in an inclusive, engaging and collaborative fashion and it would be a great honour to have his support during my term as President. I hope that members of the Society will support his application.

Nominee Supporting Statement 2:

I offer my strongest possible support to Terry McCormack in his candidacy for Vice President of BHIS. The majority of what we as BHIS seek to achieve is about top class blood pressure control. Most of this happens in Primary Care and as a former President of BHIS I am clear that the substantial experience and contribution that Terry has already brought to BHIS is immense. It is the right moment for this Society to elect Terry because he is the right person to lead BHIS. Not least because it recognises the importance we as BHIS place upon the role of primary care in the successful attenuation of the cardiovascular disease epidemic through excellent blood pressure control. Terry has made major serial contributions to National and International Guidelines in cardiovascular disease and has been a major facilitator of national and international primary care research and a champion of top class care of patients at risk of cardiovascular disease. In my experience Terry will

represent the multidisciplinary talent that is you, with both the gentle inclusivity but incisive leadership that is needed to ensure that BHIS and its members and those we seek to influence regard us as offering leadership on a world stage. I wholeheartedly second Tes McCormack for Vice Presidency. He is the right gentle giant to lead this diverse Society to our next transformation of blood pressure control. It is the leadership of people like Terry combined with the BHIS who will achieve precisely the things no other people in hypertension can imagine!

Nominee Supporting Statement 3:

I am delighted and honoured to second Dr McCormack's nomination for Vice President of our Society. For over thirty years Terry has been and continues to be a leader in British and Irish cardiovascular medicine. Dr McCormack has published extensively, with over 70 articles and major studies: from genetics of cardiovascular disease, to clinical trials in hypertension, cholesterol, atrial fibrillation and coronary heart disease. Terry has been Principal Investigator or steering group member of many major trials including most notably HYVET. For his ongoing outstanding work, Terry was awarded the prestigious NIHR Clinical Research Network Award in 2016.

Dr McCormack has had key roles with NICE and other UK organisations, including authorship of the previous and present NICE Hypertension Guideline, as well as the NICE VTE, NICE atrial fibrillation, and perioperative care guidelines. Terry conceived, developed and led the UK and Ireland guidance on perioperative management of blood pressure, a vital document in everyday hospital practice which has already saved thousands of unnecessary cancelled operations.

Within our Society Terry was a key member of the Executive Committee 2010-2012, then took on the central role of Secretary of the BIHS 2012-2016, and has made extensive and sustained contributions to the development and continuity of the BIHS. His knowledge and experience of the Society is unsurpassed and Dr McCormack's work and development of our Society has been crucial to the Society's progress and advancement.

As Vice-President and then President I am certain that Terry will continue to strengthen and then lead the Society in its future direction, and we can be confident that our Society will be in the safest and best hands as the BIHS advances into the 20s and beyond.

Nominee's Personal Statement:

I would like to be considered for the post of Vice President of the Society. I am the immediate past Secretary of the Society and, whilst in that post, we introduced the Fellowship and we changed our name to be more inclusive of our Irish colleagues. My background is in general practice in Whitby, North Yorkshire and I am also an Honorary Reader in Primary Care Medicine at Hull York Medical School. Apart from research in hypertension, lipids and anticoagulation, I am also interested in guideline development. I was an investigator and steering committee member for HYVET. Current guideline work includes three NICE committees: Hypertension, Venous Thromboembolism Treatment and Perioperative Care. Previous guideline work included the 2011 NICE Hypertension guideline and the AAGBI/BHS Preoperative Hypertension guideline. I am one of the three editors of the British Journal of Cardiology and a Fellow of the European Society of Cardiology. The Society is thriving because it is prepared to change with the times. We need to continue to encourage younger members and to be inclusive of the different disciplines within our Society, medicine, nursing, pharmacy and science. As a generalist interested in cardiovascular preventative medicine, I feel we should also be inclusive of those involved in non-hypertension fields, such as lipidology and haematology. I feel I have a good track record of serving as an officer of societies such as ours and, before that, the original Primary Care Cardiovascular Society. I would be proud to continue my involvement with the Executive Committee.

Dr Abdul - Majeed Salmasi - Ordinary Member



Nominee Title & Institution:

Consultant cardiologist, London North West University Healthcare NHS Trust

Nominated by: Professor Peter Sever

Nominee Election Year: 2003

Seconded by 1: Dr Mike Schachter

Seconded by 2: Professor Neil Poulter

Nominee Supporting Statement 1:

Majeed Salmasi is a clinical cardiologist with an interest in hypertension. He established an important Hypertension Clinic at the Central Middlesex Hospital in 2002 and he has extensive experience in cardiovascular disease prevention. He also has a substantial record in teaching cardiovascular medicine at both undergraduate and post graduate levels. He would bring considerable experience as an established clinical cardiologist to the BHIS Executive Committee and I am pleased to support his nomination.

Nominee Supporting Statement 2:

I am very pleased to support Majeed's candidacy for membership of the executive committee of the British and Irish Hypertension Society. Majeed, whom I have known for 20 years, has a wide range of interests and expertise in cardiology, and hypertension is prominent among these. He is interested in the consequences and clinical associations of hypertension, for instance atrial fibrillation, and has done extensive research in these areas. He is an enthusiastic clinical teacher and has been involved in several projects every year in the School's cardiovascular BSc programme. I am sure he would be a keen original and active member of the Committee and would make a distinct and valuable contribution.

Nominee Supporting Statement 3:

I am delighted to support the nomination of Dr Salasi to the position of Ordinary Member on the BIHS Executive Committee. He is a very experienced clinical cardiologist based in London North-West Hospitals, with Senior Clinical Lecturer's post at NHLI (Imperial College London). He has a keen interest in hypertension, having set up a hypertension clinic in North-West London Hospitals. He has

excellent all-round cardiology expertise with varied research experience and as such represents the majority of consultants who manage hypertension throughout UK.

Nominee's Personal Statement:

I am a Consultant Cardiologist with a great interest in hypertension and hypertensive heart disease and left ventricular function and left ventricular hypertrophy. Recognising a local gap in community cardiac assessment and management, I established the on-going hypertension clinic in Brent and Harrow in 2001 which transformed primary care referral for onward care.

I have a range of academic interests and achievements. I discussed hypertension and hypertensive heart disease and related pathophysiology and management in all the four books which I edited (Doppler Ultrasound, Cardiac output and regional flow, Occult atherosclerotic diseases and Angiology). I have published several original articles on hypertension and hypertensive heart disease based on my original research in several journals including American Journal of Hypertension, American Heart journal and International Journal of Cardiology. I encourage and support research in hypertension and hypertensive heart disease. I am a regular abstract reviewer of the BIHS annual meeting the Hypertension-related abstracts of the annual scientific sessions of the American Heart Association.

I have extensive teaching roles in addition to my clinical work. As well being a Clinical Senior Lecturer at the Imperial College, I regularly teach final year medical students and I am the Chief Medical examiner for final year PACES in our Trust. Annually, I supervise a BSc student for the intercalated degree. My teaching efforts are regularly commended, and I won the teaching Excellence prize (2010) and the distinguished Teacher of the year (2016) at the Imperial College. Furthermore, I am a Chair of examiners of MRCP at the Royal College of Physicians London and an International MRCP examiner.

If elected to the Council of the BIHS, I aspire to promote and support research in hypertension especially with relation to different ethnic groups, this being an interest of mine. I will also seek to provide grounds for a better understanding of hypertension and hypertensive heart disease in women, an area of growing interest. My aim would furthermore be to become involved in setting guidelines in the management of hypertension.

Dr Stephen Walsh - Ordinary Member



Nominee Title & Institution:

Associate Professor Experimental Medicine and Honourary Consultant Nephrologist, University College London

Nominated by: Professor Bryan Williams

Nominee Election Year: 2019

Seconded by 1: Dr Mark Glover

Seconded by 2: Dr Vikas Kapil

Nominee Supporting Statement 1:

I have known Stephen for over eight years as a senior lecturer and associate professor in Experimental Medicine and Nephrology at UCL. His background is in renal tubular physiology and sodium transport by renal epithelial tissues. This basic knowledge of renal transport processes is fundamental to understanding the pathogenesis of hypertension. He has high impact first author publications in animal and human studies on blood pressure disorders, including a first author publication in Nature Medicine. This has been augmented by his time working in the UCL/UCLH Clinical Research Facility, where he was instrumental in setting up and facilitating many academic and commercial clinical trials.

Furthermore, he is an able nephrologist, who runs a specialist clinic for patients with rare renal tubular disorders, including a large cohort of patients with Gordon syndrome. He is also a founding member of UCL Hypertension, and set up the Complex Hypertension Clinic at the Royal Free Hospital. A very interesting and innovative part of this clinic is a community Virtual Hypertension Clinic.

I think that Stephen is an excellent clinician and scientist with specialist scientific and clinical expertise that will benefit the BIHS immensely.

Nominee Supporting Statement 2:

I met Ben (Stephen) a few years ago, when he contacted me about our common interest in the sodium chloride cotransporter (NCC, SLC12A3) and its role in human hypertension in Gordon's syndrome, and low blood pressure in Gitelman's syndrome. Since then we have collaborated in

sharing clinical techniques in the investigation and management of hypertensive patients, as well as in studies to physiologically characterise patients with Gordon's and Gitelman's syndromes. He now runs a specialist hypertension clinic at UCL and runs clinical trials from there.

He has recently become the lead in the RADAR rare disease group for tubulopathies and is a national and international expert on these diseases of the renal tubule, which importantly include monogenic disorders of blood pressure control.

I think that his renal and physiological background will be a boon to the BIHS, I recommend him unreservedly.

Nominee Supporting Statement 3:

Stephen Walsh is a clinician scientist at UCL who is a renal physician and also a renal physiology researcher. He is an expert on renal tubular disorders, from which comes his interest in hypertension, which is often associated with these diseases, as well as more common renal disease. As a scientist, he has experience of both laboratory, human and clinical trial work and as published well in the fields of hypertension, physiology and nephrology.

As a clinician, he is responsible for both a specialist difficult hypertension secondary care clinic as well as running a virtual community hypertension clinic in North London, and he and his team have been nominated for a RCP London Excellence in Patient Care Award in 2019.

I think that he would be a very valuable addition to the executive committee of the BIHS.

Nominee's Personal Statement:

I am a clinical academic nephrologist working at UCL and the Royal Free Hospital, where I was appointed in 2012.

My scientific interest is in renal tubular physiology, specifically the transport of solutes across epithelial membranes. More specifically, I am interested in the regulation and function of distal sodium/chloride transport; this is of direct relevance to hypertension, both genetic (Gordon syndrome) and acquired (e.g. tacrolimus induced, see Hoorn and Walsh Nature Medicine 2011). My scientific work continues to focus on blood pressure regulation, using cellular, animal and human models of hypertension. I have a particular interest in phenotyping patients with specific monogenic or acquired blood pressure disorders, using imaging and 'omics' techniques with the aim of elucidating endophenotypes in the general hypertensive population.

I also have extensive experience n clinical trial research, as a member of the UCL/UCH Clinical Research Facility scientific committee and as a PI, running both academic and commercial trials. My clinical interest is in renal tubular disease; I run a quaternary specialist clinic for patients with renal tubular disease. This includes large cohorts of patients with monogenic disorders of blood pressure homeostasis; notably the largest UK cohort of patients with Gordon syndrome (hypertension), and Gitelman syndrome (hypotension).

Furthermore, I started (with my colleague Jenny Cross) a specialist Complex Hypertension Clinic, where we screen patients for secondary hypertension and test for treatment compliance. We have recruited a large tranche of incident young hypertensive patients to the 100, 000 Genome project, as well as recruiting to other clinical trials (e.g. MATCH, CALM2). The clinic also integrates an innovative Virtual Hypertension Clinic where Camden GPs can request a virtual review of hypertensive patients. The entire GP record is viewed online and either a treatment plan can be advised, the patient referred to our community hypertension nurse specialist clinic (for lifestyle/dietary advice, motivational interviewing, compliance testing) or triaged to the Complex Hypertension Clinic. I am keen to be a team player in the BIHS. Should I be accepted as an ordinary member of the BIHS board, I would be keen to forge stronger links between the UK Renal Association and the BIHS, as well as the Physiological Society. I'm keen to collaborate in trial and registry activity within and associated with the BIHS. I suspect that having nephrological representation on the board may also bring some fresh perspective as well.

Dr Luca Faconti - Young Investigator Working Party Representative



Nominee Title & Institution:

Clinical Pharmacology Consultant and Clinical Research Fellow, King's College London

Nominated by: Professor Phil Chowienczyk

Nominee Election Year: 2017

Seconded by 1: Professor Kennedy Cruickshank

Seconded by 2: Dr Andrew J. Webb

Nominee Supporting Statement 1:

Dear Franco and BIHS Executive Committee,

I am writing to support Dr. Luca Faconti as a candidate for the Young Investigator Network Representative in the Executive Committee of the Society.

As you are probably aware, Luca has demonstrated huge commitment to the development of hypertension, both in terms of clinical service and research. He is a very active and productive young investigator, having achieved a young investigator prize at the Society and is actively involved with the Society being already a member of the Young Investigator Working Party and Guidelines and Information Service Working Party.

I highly recommend Luca for this position and I am confident he will serve as an excellent addition to the Executive Committee.

Please let me know if you require any further information.

Yours sincerely,

Phil Chowienczy

Nominee Supporting Statement 2:

Dear Franco and BIHS Executive Committee,

I am writing to support Luca firmly as a candidate for the Young Investigator Network Representative in the Executive Committee of the Society.

As you are probably aware, Luca has worked in hypertension both at the University of Pisa and here at King's College. He worked with me initially and produced 2 useful papers promptly. You know of his recent drafting & tuning of the BIHS response to the HCTZ issue. He is now a busy, effective PhD student.

Luca is obviously already actively involved with the Society and won a young Investigator prize in 2017. I highly recommend him as young 'network' member for the Executive Committee, not least with his international connections, and I am sure he will be an excellent addition to the group.

I'd be delighted to supply anything further you may need for his candidacy.

Yours sincerely

JK Cruickshank

Nominee Supporting Statement 3:

Dear Franco and BIHS Executive Committee,

I am writing to support Luca as a candidate for the Young Investigator Network Representative in the Executive Committee of the Society.

Luca is in his final year of his PhD at King's College London and is working in the Hypertension Unit at Guy's and St Thomas's Hospital NHS Foundation Trust. As you are probably aware, Luca is already actively involved with the Society and won a young Investigator prize in 2017.

Luca is very active in the field of hypertension research and interested in guidelines/policy and most recently conceived and wrote "Hydrochlorothiazide and the risk of skin cancer. A scientific statement of the British and Irish Hypertension Society." published in the Journal of Human Hypertension (April 2019).

I highly recommend him as young 'network' member for the Executive Committee and I am sure he will be an excellent addition to the group.

I'd be delighted to supply anything further you may need for his candidacy.

Yours sincerely

Dr Andrew Webb.

Nominee's Personal Statement:

Dear BIHS Executive Committee,

I would be delighted of being considered as a nominee for the position of Young Investigator Working Party Representative.

My career as clinician and researcher has hugely benefit from being a member of the BIHS. Therefore, I'm highly motivated to support the Society and I would be delighted to work as Young

Investigator Working Party Representative for the next two years.

Kind Regards

Luca Faconti