

# Setting a Priority Research Agenda for Hypertension in India

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# Research: Defining the boundaries!

- The world of human affairs could be interpreted as having not just a single reality but **multiple realities** (e.g., the emic and etic views of the same set of events).
- Evidence will be actionable only when it is in alignment with the context preferences and priorities → **COMPLEXITIES**
- Whether truly “objective” inquiries about human social affairs are possible in the first place

# We do research when we have a problem!

- A research problem is an issue or concern that needs to be addressed (e.g., the issue of racial discrimination).
- The problem comes from
  - a void in the literature, and
  - conflict in research results in the literature,
  - topics that have been neglected in the literature;
  - a need to lift up the voice of marginalized participants; and
  - “real-life” problems found in the workplace, the home, the community, and so forth.

# But, Do (Could) we (ever) know the ‘truth’?

- A **postmodernist view** → all human endeavors are implicitly driven by the desire to exercise control over other people.
- Scientists may, for example, use their need to be objective to favor the study of certain topics, people, or specimens, and to ignore other topics because they might not (in the scientists’ view) be ready to be studied “objectively.”
- Our goal is to collect sufficiently rich data so that your study will fully appreciate and better understand the context for the events you are studying.

# Wicked Problems

Never have right or wrong solutions

Not understood until after  
formulating a solution

No given  
alternatives



No stopping  
rule



Each one novel  
and unique



Each one is a  
symptom of  
another



Touching it  
Changes it



# Human-centered approaches

- Interestingly, public health research fraternity is gradually realising that these problems need ***'human-centred'*** approach, especially for the ones requiring wider stakeholder engagements.
- Though human-centred designing is relatively new public health expertise, several public health projects utilizing human centered design (HCD), or design thinking, have recently emerged, but not adequate synthesis of the literature around exists.

# Bridging gaps for research-policy-program dialogue

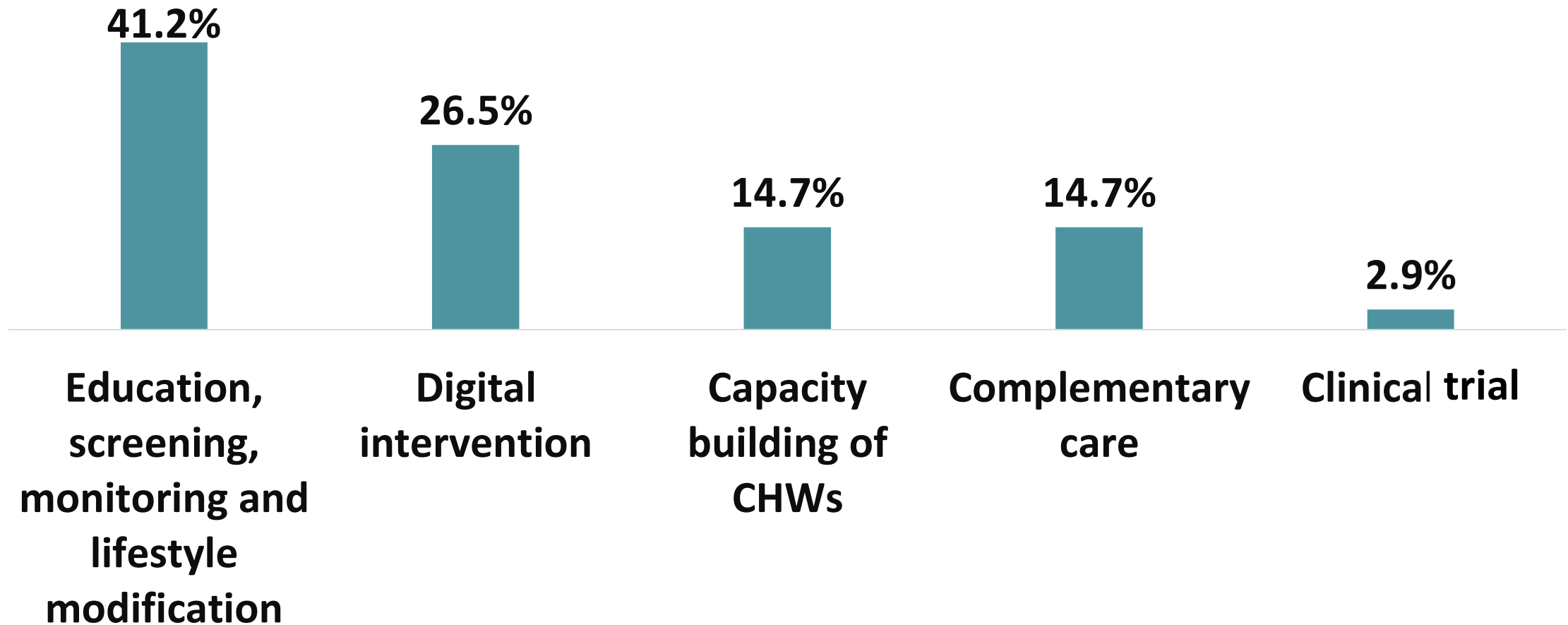
- Setting a priority research agenda?
  - Defining the context
  - Defining the stakeholders and their priorities
  - Identifying a method for objective prioritization
  - Identifying criteria for evaluating priorities
  - Validation
  - Strategic dissemination

> [Indian J Med Res.](#) 2017 May;145(5):611-622. doi: 10.4103/ijmr.IJMR\_139\_17.

**Research priorities in Maternal, Newborn, & Child Health & Nutrition for India: An Indian Council of Medical Research-INCLIN Initiative**

# A scoping review for identifying evidence from India on interventions for hypertension

Pawar et al. IJPH 2023 (under review)





## Cochrane Hypertension priority-setting process

We have completed an exercise to identify those of our reviews which should be prioritised for publication and updating as core titles within our portfolio.

### Benefits & rationale

The priority-setting exercises were designed to confirm that we focus our efforts on reviews which have been cited by Cochrane Hypertension stakeholders (patients, carers, clinicians, and researchers) as being of the highest importance and that we are compliant with Cochrane requirements for priority-setting.

Cochrane Hypertension editorial and author teams are experiencing increasing workloads, sometimes resulting in publication delays. Creating a portfolio of core titles will enable us to publish the highest priority titles in a more timely manner, ensuring that we are maintaining high quality and making the best use of our publically funded resources for the benefit of people making decisions about their healthcare.

# Priorities in HTN research (Canada, 2017)

1. Which lifestyle habits or changes can modify blood pressure in people with hypertension?
2. What's the best antihypertensive treatment to prevent cardiovascular disease and death?
3. What are the harms and benefits of treating mild hypertension?
4. What are the most common harms associated with long term use of antihypertensive drugs?
5. What are the optimal threshold values and targets for starting and stopping antihypertensive drugs for people of different ages?
6. What types of natural/alternative treatments or supplements are safe and effective for reducing blood pressure and the need for medication?
7. Does treating stress, anxiety, or depression influence blood pressure and what's the optimal therapy?
8. What are the best drug combinations for lowering blood pressure?
9. What is the first drug that should be used to treat simple hypertension?
10. Which hypertension management strategies are most effective for patients who also have other conditions?
11. What are the best treatments for improving quality of life and daily functioning in older patients with hypertension?



1. A001 Pharmacotherapy for hypertension in adults 60 years or older
2. A056 Pharmacotherapy for mild hypertension
3. A145 Blood pressure targets for hypertension in older adults
4. A178 First-line drug classes for hypertension in adults: A network meta-analysis
5. A035 Relaxation therapies for the management of primary hypertension in adults
6. A081 Pharmacotherapy for hypertension in adults aged 18 to 59
7. A128 First-line combination therapy versus first-line monotherapy for primary hypertension
8. A149 Combination therapy for hypertension
9. A157 Withdrawal of antihypertensive drugs in older people
10. A095 Long-term effects of weight-reducing diets for hypertension
11. A098 Walking for hypertension
12. A057 Effect of early treatment with anti-hypertensive drugs on short and long-term mortality in patients with an acute cardiovascular event
13. A090 Blood pressure targets for people with hypertension in diabetes mellitus
14. A014 Effects of low sodium diet versus high sodium diet on blood pressure, renin, aldosterone, catecholamines, cholesterol and triglyceride
15. A136 Vitamin D supplementation for treatment of essential hypertension
16. A062 Garlic for the prevention of cardiovascular morbidity and mortality in hypertensive patients
17. A088 First-line drugs inhibiting the renin angiotensin system versus other first-line antihypertensive drug classes for hypertension
18. A011 First-line diuretics versus other classes of antihypertensive drugs for hypertension
19. A034 Statins for preventing major vascular events in people with hypertension
20. A129 Blood pressure targets for the treatment of people with hypertension and cardiovascular disease
21. A029 Blood pressure targets in adults with hypertension
22. A038 Combined calcium, magnesium, and potassium supplementation for the management of primary hypertension in adults
23. A091 Blood pressure targets for people with hypertension in chronic renal disease

# The Cochrane Priority Review Portfolio

1. Need for health system strengthening for hypertension control in India: Trends in wealth-related inequalities from the National Family Health Surveys.....
2. The need for continuum of care in control of hypertension in primary healthcare setting.....
3. Stakeholder analysis for Hypertension Management in the context of the Indian Public Health System.....
4. Review of primary care treatment protocols for hypertension in various states of India.....
5. Universalization of Healthcare for Non-Communicable Diseases Control in India – Promise of Health and Well-being, Insurance for Universal Health...
6. National Programme for prevention and control of Cancer, Diabetes, Cardio-vascular diseases and Stroke (NPCDCS): A scoping review in the context of hypertension prevention and control in India.....
7. Lifestyle Interventions in Hypertension.....
8. A scoping review for identifying evidence from India on interventions for hypertension.....
9. Discourses on diabetes mellitus in the Indian Parliament: A qualitative analysis of questions posed in Lok Sabha and Rajya Sabha between 1999 and 2019.....

# Upcoming IJPH Special Issue

Thank you!