



INDIAN SOCIETY OF HYPERTENSION



CURRENT MEDICAL CONCEPTS



## Editorial

### Greetings from PRS Hospital, Trivandrum, Kerala, India

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Occupying only a small percentage of Indian landmass, Kerala has an exemplary record of quality health care, comparable to the “western” standards! Life expectancy is the highest and infant mortality is lowest in the country. While this “special” standing separates Kerala from other states and is laudable, we at the PRS Hospital continue to explore newer and technology-based solutions to further reduce the burden from cardiovascular disease (CVD). Thanks to the visionary mission of the founders of PRS Hospital, we are able to implement and show improvements in the care of individuals at risk for CVD. The founder of our hospital (Mr. P. Ratnaswamy) envisioned a small pilot project in 1986 to provide quality care through “Mother and Child Hospital” at affordable costs to the patients. The logo “care like only a mother can give” reflected his vision then, and today, PRS Hospital has grown into one of the best health-care providers not only in Kerala but also in the country. It is now a highly respected multispecialty hospital covering all aspects of disease detection and treatment. For example, the cardiovascular services at PRS can be considered as an anchor, evidenced by National Accreditation Board for Hospitals & Healthcare Providers (NABH) and ISO accreditations. Not only clinical medicine but we also have a dedicated dimension for academic advancement – medical education, research, professional and public publications, etc.

This dedicated issue of the Hypertension Journal is one example of the contribution of our staff and the hospital to disseminate scientific developments for the ultimate benefits of the society and to protect and preserve public health in South Asia.

Dr. Prakash Nair addresses the importance of the left ventricular hypertrophy (LVH) in the evaluation of patients with hypertension. His narrative reminds us how a simple procedure like echocardiography can be instantly useful in detecting LVH in the clinical setting; his article reminds

the reader about the value of early detection of target organ damage in clinical practice. Dr. Vijayan’s article on white coat hypertension (WCH) helps the reader to understand in depth about the manifestations of WCH and its prognosis. Dr. Santosh *et al.* brought to the readership an old technique angiotensin-converting enzyme inhibitor radionuclide renography in the modern diagnosis of renovascular hypertension. It should be readily evident to the readers that when used “properly,” renography still has a diagnostic role. Dr. Krishnakumar in his review elucidates the mechanisms and management of resistant hypertension; he provides simple steps on tackling resistant hypertension in the community. Dr. Geetha’s article describes to us that secondary hypertension, while not so common should not be missed by busy practitioners; she describes the features of secondary hypertension which may help the reader in considering diagnostic work-up in certain patients with hypertension. The reviews written by the senior consultants from the world-famous Baylor University Medical Center, Dallas, USA, provide the latest scientific information on the statin use and on the important critical adverse relationship between chronic kidney disease and CVD. And finally, I have reviewed the subsets of hypertension in India which are missed and not documented. I hope that the description will be helpful to the readers.

I expect the readers to enjoy and experience, as much as I did, the public health significance of the varied articles in this issue of the Hypertension Journal.

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