

# THE DAKAR CALL REPORT

**September 25-26, 2023**

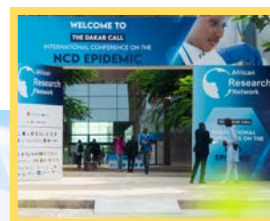
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Sénégal**

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## Our missions

### **Drive innovative NCD research from Africa**

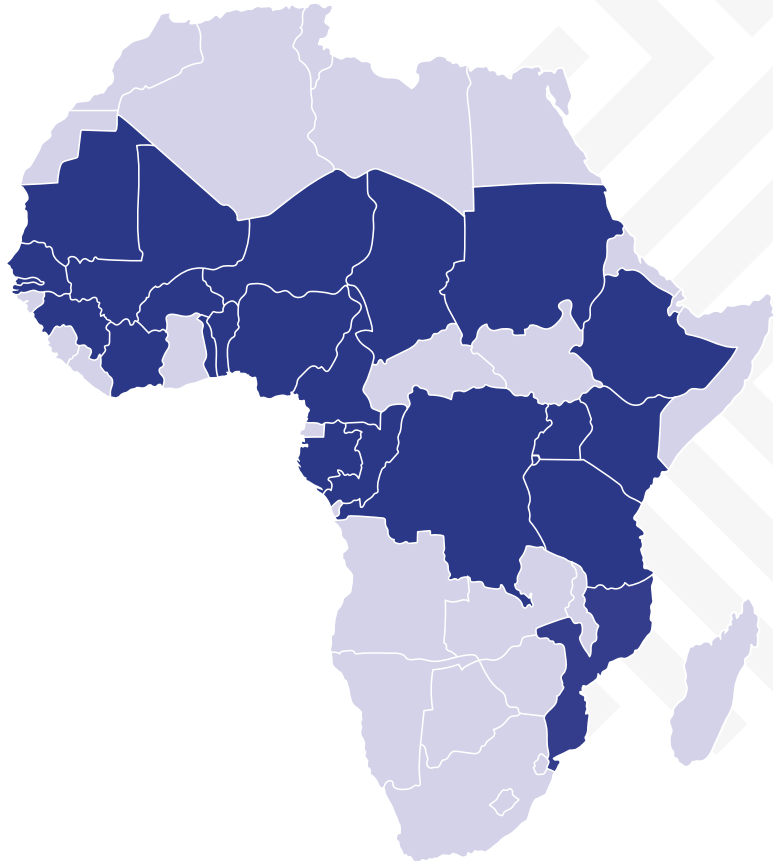
To achieve the greatest health benefits, we are committed to enabling African doctors to develop their own innovative NCD programs and benefit from the results themselves.

### **Advance global health through collaboration**

The African Research Network has been growing a unique, multidisciplinary team of researchers to deliver significant shifts in understanding the prevalence and etiology of NCDs in Africa and other low- and middle income countries.

### **Train the next generation of researchers**

We have been engaging post-doctoral researchers, Ph.D. students, and interns in our programs to train the next generation of international research leaders.



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## Rationale

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Funding for medical research in Africa is very low and it comes almost exclusively from developed countries; Research topics are chosen by funding countries rather than by African countries themselves; 90% of the funds allocated to medical research on the continent are still devoted to infectious diseases, even though non-communicable diseases are the leading cause of death in Africa.

It is time research funding in Africa must reflect the epidemiological transition taking place on the continent.

African doctors should be able to choose the diseases they wish to work on, create and carry out the studies and tests of their choice, analyze, publish and benefit from the results themselves.

# Introduction

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The Dakar Call was a crucial gathering that encapsulates the collective commitment to addressing the formidable challenges posed by Non-Communicable Diseases (NCDs) in Africa. This conference serves as a pivotal platform for sharing insights, fostering collaboration, and formulating actionable strategies to combat the rising burden of NCDs across the continent.

Our journey through the diverse sessions of this conference has been enlightening, revealing the multifaceted nature of the NCD landscape in Africa. Each session, meticulously crafted to delve into specific aspects of cardiovascular diseases, kidney diseases, cancers, genetic diseases, sickle cell disease, systemic diseases, diabetes, obesity, stroke, chronic respiratory diseases, sustainable financing, climate impact, public health, psychiatry, socio-anthropology, primary healthcare, mobilization, and research, has provided profound insights.

The Cardiovascular Diseases session laid bare the challenges posed by hypertension and CVDs in Africa, stressing the need for comprehensive prevention strategies. The Kidney Diseases session highlighted the critical need for multifaceted approaches to address rising Chronic Kidney Disease prevalence, while the Cancer session emphasized the urgency of targeted interventions and comprehensive cancer control plans.

Exploring Genetic, Sickle Cell, and Systemic Diseases, the conference underscored the genetic nature and burden of Sickle Cell Disease, emphasizing early diagnosis and multidisciplinary care. The session on Diabetes & Obesity outlined the escalating burden of these conditions, calling for lifecourse interventions and multisectoral responses for prevention.

The Stroke session brought attention to the rising prevalence of strokes in Africa and the impact of modifiable risk factors, stressing the need for prioritized funding, improved healthcare facilities, and specialized units for optimal stroke management. Chronic Respiratory Diseases discussions brought critical issues in African respiratory health to the forefront, emphasizing the need for better diagnostics, medication access, and coordinated strategies to address these conditions. Sustainable and Innovative Financing sessions highlighted the imperative of robust financial frameworks to counter NCDs effectively, advocating for collaborative efforts among governments, private sectors, and international entities.

The session on Climate and NCDs underscored the impact of climate change on NCDs, emphasizing the need for multi-disciplinary strategies to protect public health in a changing climate. Exploring the intersections of public health, psychiatry, and socio-anthropology, the conference recognized the significance of integrating mental health into NCD management and the broader scope of medical anthropology in understanding diseases and patient-health professional relationships.

The session on the reorientation of health systems emphasized the challenges and strategies concerning NCDs in primary healthcare, calling for resource mobilization, community participation, and renewed commitments. NCD Mobilization and Awareness discussions outlined critical aspects of NCD care, focusing on early detection, access to care, and strategies for mobilization, despite challenges faced in Senegal and Africa.

Research in NCDs around the world and in Africa revealed profound insights into diverse facets of NCD research, emphasizing the importance of ethical considerations, community engagement, and transformative initiatives.

As we conclude this Dakar Call, we carry with us a wealth of knowledge, recommendations, and a shared commitment to combating NCDs in Africa. The insights gained from each session will undoubtedly guide future actions, policies, and initiatives aimed at improving public health across the continent. Let us, as a united community, embark on the journey ahead with determination, collaboration, and a steadfast resolve to build a healthier and more resilient Africa.



# Summary of Session Reports

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## **SESSION 1: Cardiovascular diseases.**

The Cardiovascular Diseases session highlighted critical aspects of the African landscape concerning high blood pressure and CVD. Discussions emphasized the rising burden of CVDs, particularly hypertension, and the urgent need for comprehensive prevention strategies. Challenges encompassed patient accessibility issues, healthcare providers' limitations, and systemic inadequacies within the healthcare system. The proposed solutions focused on a multisectoral approach, advocating collective action to combat CVDs by addressing modifiable risk factors through coordinated efforts across various sectors. Over the next five years, measurable outcomes include implementing targeted education campaigns, establishing robust primary prevention strategies, ensuring consistent availability of essential medications and technical upgrades, comprehensive healthcare professional training, and advocating for policies supporting early detection and treatment of CVDs. These measures aim to improve awareness, reduce incidence, enhance treatment accessibility, upgrade infrastructure, and strengthen policy frameworks for effective CVD management in Africa.

## **SESSION 2: Kidney Diseases.**

The session on Kidney Diseases highlighted rising Chronic Kidney Disease (CKD) prevalence in Africa due to high blood pressure, lifestyle risks, and emerging health challenges. During the session on Kidney Diseases, discussions revealed concerning trends in Chronic Kidney Disease (CKD) prevalence in Africa. Highlighted by Professors from Tunisia and Senegal, the session addressed challenges like inadequate healthcare resources, escalating CKD rates, and the critical need for multifaceted strategies encompassing prevention, detection, and treatment. Emphasis was placed on dialysis accessibility, while proposed action plans focused on comprehensive healthcare strategies, research enhancement, and policy advocacy. Profound recommendations for information dissemination, primary prevention, essential medicines accessibility, upgraded technical platforms, healthcare training, policy advocacy, and funding opportunities over a 5-year span highlighted the urgency for holistic approaches in tackling kidney diseases across Africa. The session's insights will significantly influence future initiatives for better renal health management on the continent.

### **SESSION 3: Cancers.**

The session on Cancer highlighted the pressing issues in Africa's cancer landscape, emphasizing rising cases, late diagnosis, and resource shortages. During the Cancer session, experts shed light on the dire cancer landscape in Africa, highlighting rising cases and pressing challenges. The speakers outlined the urgent need for targeted interventions, robust cancer registers, and substantial investments to combat under-reporting and under-diagnosis. Advocating for comprehensive cancer control plans, they emphasized prevention, diagnosis, treatment, and research as pivotal pillars. Professors highlighted the significance of declaring cancer a public health priority, calling for national programs, gender-equitable advocacy, and palliative care expansion. Multisectoral actions involving resource mobilization, education, primary prevention strategies, and essential medicine accessibility were emphasized for effective cancer response. The session's outcomes aimed at awareness campaigns, primary prevention, medication accessibility, enhanced medical infrastructure, comprehensive training, policy advocacy, and diverse funding sources set a vital roadmap for addressing the burgeoning cancer burden in Africa over the next five years.

### **SESSION 4: Genetic diseases, sickle cell disease and systemic diseases.**

The session explored Genetic, Sickle Cell, and Systemic Diseases. Discussions highlighted Sickle Cell Disease's genetic nature and burden, emphasizing challenges in estimating prevalence and the need for early diagnosis and multidisciplinary care. Systemic diseases' prevalence, risk factors, and challenges in African contexts were outlined, focusing on early diagnosis and research promotion. Challenges in accessing treatments, including limited programs and drug access, were emphasized. The need for equitable access to therapies and integrated care from diagnosis to gene therapy was stressed. Over the next five years, strategies entail targeted education, prevention, medication accessibility, enhanced technical platforms, training, and policy advocacy. The session concluded by emphasizing collaborative efforts and partnerships between African and global scientists to establish an African Research Institute

### **SESSION 5: Diabetes & Obesity.**

The session on Diabetes & Obesity in Africa highlighted the escalating burden of these conditions. Presenters outlined the rising prevalence rates, stressing the urgent need for improved screening due to the high percentage of undiagnosed cases. Identified barriers included limited prevention measures and healthcare access, proposing advocacy and enhanced research. Emphasis was placed on lifecourse interventions targeting adolescence and early childhood, highlighting multisectoral responses for prevention.

The session called for educational campaigns, comprehensive prevention strategies, medication accessibility, upgraded infrastructure, enhanced training, and policy advocacy to combat diabetes and obesity over the next five years. The session's insights will enrich the conference report, guiding future actions for improving public health across the continent.

### **SESSION 6: Stroke.**

The session focused on stroke management in Africa, highlighting rising prevalence rates, severity in younger individuals, and the impact of modifiable risk factors, primarily hypertension. The session delved into the rising prevalence of strokes in Africa, affecting younger individuals with severe outcomes. The major modifiable risk factors, especially hypertension, were highlighted, emphasizing its significance in prevention. Challenges hindering optimal stroke management included lack of awareness, delayed patient presentation, limited access to imaging and treatment, and inadequate resources and personnel. Recommendations involved prioritizing funding, improving healthcare facilities, promoting multidisciplinary care, establishing specialized units, and enhancing research for tailored prevention strategies. Measurable outcomes over five years encompassed comprehensive educational campaigns, primary prevention addressing modifiable risk factors, ensuring access to essential medications and technical facilities, extensive training programs for healthcare professionals, and advocating for policy reforms supporting stroke prevention and management.

### **SESSION 7: Chronic Respiratory Diseases.**

The session on Chronic Respiratory Diseases discussed the landscape of respiratory health in Africa, emphasizing the prevalence, impact, and challenges associated with conditions like asthma, COPD, and lung cancer. Session brought to light critical issues in African respiratory health. Insights from various speakers highlighted the prevalence of these diseases, including factors like workplace hazards and tobacco smoke. The discussions revealed the severe impact on mortality rates, economic burdens, and the lack of updated epidemiological data, stressing the need for better diagnostics and medication access. The challenges, including socioeconomic factors, diagnostic limitations, and medication costs, were extensively discussed. Potential solutions proposed encompassed subsidizing medications, establishing pharmaceutical companies, and advocating for reduced medication costs. Additionally, the session emphasized a multidimensional approach, urging awareness campaigns, prevention strategies, accessible medications, improved infrastructure, comprehensive training, and policy reforms. These insights highlighted the urgency of coordinated strategies to address chronic respiratory diseases across Africa's healthcare landscape.

### **SESSION 8: Sustainable and Innovative Financing of NCDs in Africa.**

The session, focused on sustainable financing for NCDs in Africa, was steered by a distinguished panel. It emphasized the imperative of robust financial frameworks to counter NCDs effectively. Participants delineated a call to action for various stakeholders, outlining strategies and urging commitment to address NCDs comprehensively. Panelists also delved into innovative financing mechanisms, highlighting their potential and advocating for their integration into economic planning. It was also emphasized the multifaceted approach needed for effective NCD financing, citing challenges and the importance of balanced financial strategies. The session underscored the necessity of collaborative efforts among governments, private sectors, and international entities, outlining measurable outcomes crucial for progress. The proposed 5-year plan prioritizes education, prevention strategies, medicine accessibility, infrastructure upgrades, professional training, policy advocacy, and diverse funding sources for effective NCD management in Africa.

### **SESSION 9: Climate and NCDs in Africa.**

The session highlighted the impact of climate change on non-communicable diseases (NCDs) in Africa. Insights emphasized the urgency of multi-disciplinary strategies to protect public health in a changing climate. Presentations revealed escalating health risks due to extreme weather events, linking rising temperatures to increased mortality rates, particularly for cardiovascular and respiratory diseases. A call to action emphasized the need for robust educational campaigns, primary prevention initiatives, accessible essential medicines, upgraded healthcare infrastructure, comprehensive training for healthcare professionals, and policy advocacy across governmental and private sectors. Measurable outcomes over the next five years encompass information dissemination on climate change's health impact, prevention strategies, ensuring medication accessibility, improved technical infrastructure, specialized training, policy influence, and diverse funding exploration. These objectives aim to guide decisive actions in addressing this critical issue at regional, national, and international levels.

### **SESSION 10: Public Health, Psychiatry, and Socio-anthropology of Health.**

The session explored the intersections of public health, psychiatry, and socio-anthropology regarding Non-Communicable Diseases (NCDs). Discussions highlighted the significance of integrating mental health into NCD management, acknowledging stress's impact and urging psychiatrists' greater involvement. Medical anthropology's expanded scope encompassed understanding body perceptions and diseases.

It emphasized re-evaluating patient–health professional relationships and adjusting health priorities. The presentation on economic and social transformations emphasized cultural adaptation amidst economic development, identifying the digital revolution’s role in fostering cultural creativity. Measurable outcomes over the next five years target increased public awareness about mental health’s link to NCDs, community-based prevention programs, improved access to essential medications, upgraded healthcare facilities, specialized training for healthcare professionals, policy advocacy for mental health inclusion, and securing additional funding sources for NCD initiatives. These objectives aim to enhance public awareness, prevention strategies, healthcare services, and policy integration to address NCDs comprehensively.

### **SESSION 11: Reorientation of health systems towards making primary health care as a resilient foundation for universal health coverage.**

The session emphasized the challenges and strategies concerning Non-Communicable Diseases (NCDs) in primary healthcare (PHC). Anticipated rapid NCD rises in low- and middle-income countries were highlighted, revealing the necessity for preventive measures. Challenges encompassed prevention strategies, accessible diagnostics, risk factor management, and financing for medicines and care. Principles of action recommended discarding conventional approaches, design thinking, real needs’ prioritization, and constant evaluation. Resource mobilization emerged as vital due to inadequate funding, demanding increased budget allocations and multisectoral involvement. The importance of primary healthcare integration for NCD management was reiterated, focusing on a minimum package of activities, community participation, and renewed commitments. Over the next five years, measurable outcomes target enhanced community awareness through Information Education Communication strategies, reduced NCD incidence via primary prevention, improved access to essential medicines and advanced equipment, amplified healthcare professional training, policy reforms, and increased funding for NCD initiatives.

### **SESSION 12: NCD Mobilization and Awareness.**

The session on NCD mobilization and awareness was guided by Me Massokhna Kane, who adeptly facilitated discussions. The speakers highlighted critical aspects of NCD care, focusing on early detection, access to care, and challenges faced in Senegal and Africa. Strategies for mobilization underscored the importance of prevention, employing communication channels like media campaigns and community engagements. They emphasized stakeholder involvement, particularly consumer associations advocating for preventive policies and regulations. Challenges included limited access to care, insufficient healthcare infrastructure, and gaps in mass screening programs. Measurable outcomes over five years encompass information campaigns reaching 80% of the population, a 30% increase in NCD awareness,

legislation reducing harmful product sales, a 20% decrease in NCD incidence, enhanced availability and affordability of essential medicines, expanded specialized healthcare facilities, training 500 specialized healthcare professionals, adoption of comprehensive NCD policies in 80% of participating countries, and increased funding by 40% for NCD initiatives.

### **SESSION 13: Research in NCDs around the World.**

In this session, global experts offered profound insights into diverse facets of NCD research. Presentations covered critical themes such as social determinants' impact on NCDs, accelerating research strategies for effective control, and transformative community-engaged initiatives. The emphasis on social determinants underscored the need to address broader societal factors influencing health outcomes. Strategies for fast-tracking research highlighted the importance of ethical considerations and aligning manuscripts with impactful journals. Engaging community collaboration and innovative research methodologies emerged as pivotal for effective NCD control. The session culminated with discussions on groundbreaking initiatives like the DC Cardiovascular Health and Obesity Collaborative and the CHAIR project, exemplifying transformative community-driven research and international collaboration. Over the next five years, measurable outcomes include heightened NCD awareness, reduced incidence rates, increased accessibility to essential medicines, expanded healthcare infrastructure, amplified healthcare workforce, policy advocacy, and augmented funding, reflecting a comprehensive approach towards combating NCDs on a global scale.

### **SESSION 14: NCD Research in Africa.**

The session on NCD research in Africa offered insights into the continent's research landscape and strategies for combating non-communicable diseases (NCDs). Discussions covered NCD research limitations, thematic focuses in Senegal, clinical trial site prerequisites, and the significant contributions of the African Research Network. Over the next five years, targeted Information Education Communication (IEC) strategies will disseminate critical research findings across various platforms. Primary prevention efforts will concentrate on modifiable risk factors through community education and awareness campaigns. Ensuring accessibility to essential medications and establishing advanced technical platforms will be prioritized. Comprehensive training programs for healthcare professionals and robust policy advocacy will set standards and improve treatment outcomes. Diversifying funding sources is crucial to sustain and expand NCD research initiatives across Africa, ensuring continued progress in combating NCDs on the continent.

# The Five-Year Action Plan

## 5-Year Action Plan: Combating Non-Communicable Diseases in Africa (2024-2028)

### Introduction

Non-communicable diseases (NCDs) are a significant public health concern in Africa, accounting for a growing number of deaths and disabilities. To address this challenge, a comprehensive and coordinated approach is needed. This 5-Year Action Plan outlines a framework for combating NCDs in Africa from 2024 to 2028.

### Measurable Outcomes:

- **Reduced NCD mortality and morbidity:** Achieve a 25% relative reduction in the risk of premature mortality from NCDs by 2025 and a one-third reduction by 2030 (aligned with Sustainable Development Goals).
- **Improved awareness and knowledge:** Increase public awareness of NCDs and their risk factors by 30%, resulting in improved health-seeking behavior and community engagement in preventive measures.
- **Enhanced access to essential medicines:** Achieve a 50% reduction in out-of-pocket expenses for NCD medications, ensuring affordability and accessibility for all.
- **Strengthened healthcare infrastructure:** Expand access to diagnosis and treatment for NCDs by guaranteeing that 90% of patients have access to specialized facilities within a 2-hour radius.
- **Increased healthcare professionals:** Train and deploy an additional 500 healthcare professionals specializing in NCD management, resulting in a 30% increase in timely diagnoses and improved patient outcomes.
- **Policy and legislative reforms:** Advocate for the adoption of comprehensive NCD policies in at least 80% of participating countries, promoting prevention, treatment, and research.
- **Increased funding:** Secure partnerships with philanthropic organizations, leading to a 40% increase in funding dedicated to NCD initiatives.



## **Strategic Pillars:**

### **1. Information Education Communication (IEC):**

- Implement targeted campaigns using various channels (e.g., digital platforms, community workshops, educational materials) to raise awareness about NCDs, risk factors, and preventive measures.
- Develop culturally sensitive and accessible materials for diverse populations.
- Partner with community leaders and organizations to amplify messaging and promote healthy behaviors.


### **2. Primary Prevention:**

- Address modifiable risk factors for NCDs, including tobacco use, unhealthy diet, physical inactivity, and harmful alcohol consumption.
- Implement legislative measures to control the sale and advertising of harmful products.
- Promote healthy lifestyle choices through community-based interventions, school programs, and public health campaigns.
- Strengthen screening programs for early detection and intervention for NCDs.

### **3. Essential Medicines:**

- Ensure consistent availability and affordability of essential medications for NCDs through strategic partnerships with pharmaceutical industries, regulatory authorities, and healthcare providers.
- Implement price regulation mechanisms and explore innovative financing options.
- Strengthen supply chains and distribution networks to guarantee equitable access to essential medicines.

### **4. Equipment and Technical Platform:**

- Upgrade healthcare facilities with advanced diagnostic tools and treatment equipment (e.g., imaging technologies, laboratory equipment).
  - Invest in telemedicine platforms to improve access to healthcare services in underserved areas.
  - Ensure proper training and maintenance of equipment to maximize efficiency and effectiveness.
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**5. Training:**

- Provide comprehensive training programs for healthcare professionals, community health workers, and other stakeholders on NCD prevention, diagnosis, management, and research.
- Develop specialized training modules for different levels of healthcare providers.
- Support continuous medical education and skill development initiatives to maintain high-quality care.

**6. Policy Advocacy and Legislative Institutional:**

- Advocate for policy reforms that promote NCD prevention and treatment within healthcare systems.
- Collaborate with governments, NGOs, and international bodies to develop and implement effective NCD policies.
- Advocate for increased funding allocation for NCD programs and research initiatives.
- Ensure the integration of mental health services into healthcare systems for a holistic approach to NCD management.

**7. Funding Opportunities:**

- Diversify funding sources for NCD initiatives through partnerships with philanthropic organizations, private sector entities, and international organizations.
- Explore innovative financing mechanisms, such as public-private partnerships and impact investing.
- Advocate for increased government funding for NCD prevention, treatment, and research.

**Conclusion:**

Implementing this comprehensive 5-Year Action Plan requires a collaborative effort from governments, healthcare professionals, civil society organizations, and the general public. By working together, we can significantly reduce the burden of NCDs in Africa and create a healthier future for all.

**Additional Considerations:**

- This plan should be adapted and contextualized based on the specific needs and priorities of each African country.
- Monitoring and evaluation mechanisms should be established to track progress and ensure the effectiveness of the interventions.
- Continuous research and development efforts are crucial to improve NCD prevention, diagnosis, and treatment strategies.
- Addressing the social determinants of health, such as poverty and lack of education, is essential for achieving the long-term goals of this 5-Year Action Plan.

# Annexure

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Detailed Session Reports:

1. **SESSION 1:** Cardiovascular diseases.
2. **SESSION 2:** Kidney Diseases.
3. **SESSION 3:** Cancers.
4. **SESSION 4:** Genetic diseases, sickle cell disease and systemic diseases.
5. **SESSION 5:** Diabetes & Obesity.
6. **SESSION 6:** Stroke.
7. **SESSION 7:** Chronic Respiratory Diseases.
8. **SESSION 8:** Sustainable and Innovative Financing of NCDs in Africa.
9. **SESSION 9:** Climate Change and NCDs in Africa.
10. **SESSION 10:** Public Health, Psychiatry, and Socio-anthropology of Health.
11. **SESSION 11:** Reorientation of health systems towards making primary health care as a resilient foundation for universal health coverage.
12. **SESSION 12:** NCD Mobilization and Awareness.
13. **SESSION 13:** Research In NCDs Around The World
14. **SESSION 14:** NCD Research in Africa.

## SESSION 1: CARDIOVASCULAR DISEASES

DATE: SEPTEMBER 25, 2023  
TIME: 11:30 A.M. – 12:00 P.M.  
VENUE: CICAD – DIAMNIADIO

**Super Moderator:**

Prof. Abdoul Kane, President of SOSECAR  
(Senegalese Society of Cardiology).

**Moderator:**

Prof. Adama Kane, Senegal.

**Reporter:**

Prof. Patrice Zabsonré, Burkina Faso

**Speakers:**

1. Prof. Samuel Kingue. Cameroon.
2. Prof. Roland Nguetta, Ivory Coast.
3. Prof. Abdoul Kane, Senegal.

**Introduction:**

The session on Cardiovascular diseases, held on September 25, 2023, from 11:30 a.m. to 12:00 p.m. at CICAD – Diamniadio, was an informative and crucial discussion led by Prof. Abdoul Kane, President of SOSECAR. Prof. Adama Kane moderated the session, ensuring a smooth flow of insights. Prof. Patrice Zabsonré, from Burkina Faso, diligently reported the proceedings, contributing to the documentation of valuable knowledge shared in this session.

**Speaker 1: Prof. Samuel Kingue.**

Topic: Current situation of high blood pressure and cardiovascular diseases in Africa.

Prof. Samuel Kingue shed light on the prevailing situation of high blood pressure and cardiovascular diseases (CVD) in Africa. He emphasized the shifting landscape of diseases from infectious to non-communicable, with CVD now ranking highest among non-communicable diseases. In 2013, CVD accounted for a significant portion of mortality in Sub-Saharan Africa, with projections indicating a potential doubling of this burden by 2030.

CVD in Africa has undergone an epidemiological transition, marked by a decrease in infectious and inflammatory heart diseases, and a surge in coronary heart disease and stroke linked to atherosclerosis and cardiovascular risk factors. High blood pressure, stroke, cardiomyopathies, and valvular heart diseases now dominate the landscape of CVD in adults, while rheumatic and congenital heart diseases are more common in children.

The prevalence of hypertension in Africa is notably higher compared to other regions, with a projected increase in the coming years. Unfortunately, high blood pressure is often underdiagnosed, undertreated, and poorly controlled. If this trend persists, CVD-related mortality is predicted to surpass that of infectious diseases by 2030.

To counter this, Prof. Kingue stressed the urgency of implementing comprehensive prevention strategies, spanning primordial, primary, secondary, and tertiary levels of prevention. These strategies aim to mitigate the onset and progression of cardiovascular risk factors through lifestyle interventions and ensure early detection and management of CVD to reduce mortality.

**Speaker 2: Prof. Roland N'Guetta.**

Topic: Problems to be solved for optimal management of hypertension and cardiovascular diseases (CVD) in Africa.

Prof. Roland N'Guetta highlighted the significant challenges in achieving optimal management of cardiovascular diseases (CVD) and hypertension in Africa. These challenges extend to patients, healthcare providers, and the healthcare system at large.

Patients face obstacles related to accessibility, education, and socio-cultural factors. The utilization of medical care remains low, and out-of-pocket expenses for healthcare are common. Additionally, the asymptomatic nature of cardiovascular risk factors complicates treatment adherence. Socio-cultural beliefs often lead patients towards traditional medicine and self-medication, while affordability remains a major concern.

Healthcare providers, on the other hand, grapple with shortages in human resources, inequitable distribution of specialists, therapeutic inertia, and issues concerning the quality of care. The number of general practitioners and specialists is notably low in Africa, leading to an uneven distribution of medical resources. Quality control of medicines also poses a significant challenge.

The healthcare system in Africa faces inadequacies in infrastructure, especially for tertiary care, as well as a shortage of medical equipment and supplies. Training, research, governance, and leadership within the health system require substantial improvement.

Solutions for more effective management of CVD in Africa lie in bolstering political will, increasing resources, mass screening, improving training and human resources, local production of medical equipment and quality generic medicines, and advancing research and best practices. Universal health coverage and public education will further enhance access and adherence to preventive and curative measures for CVD and hypertension.

**Speaker 3: Prof. Abdoul Kane of Senegal.**

Topic: Key needs and opportunities for multisectoral action to address hypertension and CVD in Africa.

Prof. Abdoul Kane emphasized the necessity for a multisectoral approach in addressing hypertension and cardiovascular diseases (CVD) in Africa. While healthcare is primarily the domain of the health sector, combating CVD requires concerted efforts from all sectors. WHO recommended strengthening national capacity, leadership, governance, multisectoral action, and partnerships to accelerate the fight against noncommunicable diseases.

The fight against CVD necessitates addressing determinants of health and reducing modifiable cardiovascular risk factors like smoking, poor nutrition, sedentary lifestyle, obesity, and excessive alcohol consumption.

Multisectoral actions involve various actors, including governmental and non-governmental entities. Governmental actors span education, communication, agriculture, economy/finance, environment, and more. Non-governmental actors include technical and financial partners, private sector organizations, civil society organizations, health professional orders, and others.

Examples of multisectoral actions include tobacco control measures, creating public spaces for physical activity, and regulating food products. Coordination and an action plan tailored to each country's context, aligned with international guidelines, are crucial for successful implementation.

## **Measurable Outcomes Over 5 Years:**

### **Information Education Communication:**

- Implement targeted educational campaigns to raise awareness about cardiovascular diseases, focusing on risk factors, prevention, and management.

### **Primary Prevention:**

- Establish comprehensive prevention strategies to reduce the incidence and impact of cardiovascular diseases, emphasizing lifestyle modifications, early detection, and intervention.

### **Essential Medicines:**

- Ensure consistent availability and accessibility of essential medications for the management of cardiovascular diseases, optimizing supply chains and distribution networks.

### **Equipment And Technical Platform:**

- Upgrade and standardize the technical infrastructure required for effective diagnosis, monitoring, and treatment of cardiovascular diseases, including investments in advanced diagnostic equipment and medical technologies.

### **Training:**

- Invest in comprehensive training programs for healthcare professionals, with a focus on continuous medical education and skill development specific to cardiovascular diseases.

### **Policy Advocacy - Legislative Institutional:**

- Advocate for policies and legislative measures that support early detection, prevention, and treatment of cardiovascular diseases, addressing gaps in healthcare delivery and infrastructure.



## SESSION 2: KIDNEY DISEASES

DATE: SEPTEMBER 25, 2023  
TIME: 12:00 P.M. – 12:30 P.M.  
VENUE: CICAD – DIAMNIADIO

**Super Moderator:**

Prof. Abdou Niang, President of the African Association of Nephrology.

**Moderator:**

Prof. Ahmed Tall Lemrabott, Senegal.

**Reporter:**

Dr. Moustapha Faye Senegal.

**Speakers:**

1. Prof. Faïçal Jarraya, Tunisia.
2. Prof. Ahmed Tall Lemrabott.

**Introduction:**

Under the insightful guidance of Prof Abdou Niang, President of the African Association of Nephrology (AFRAN), this session dedicated to «Kidney Diseases,» delved into the critical issues surrounding renal diseases in Africa. Prof Ahmed Tall Lemrabott, who served as the moderator, played a pivotal role in facilitating discussions, ensuring relevance, and maintaining the flow of the session. Dr. Moustapha Faye, the appointed reporter, was tasked with synthesizing the key points and conclusions to enrich our understanding of renal challenges in Africa.

**Speaker 1:** Prof. Faiçal Jarraya.

Topic: Problems to be Solved for Optimal Management of Kidney Diseases in Africa.

Prof. Jarraya started with an overview of the current scenario of kidney diseases in Africa. He emphasized the increasing severity and lack of control of high systolic blood pressure in Africa, contributing to a staggering 10.8 million deaths globally. He also discussed other significant risk factors discussed included tobacco use, dietary risks, air pollution, and emerging challenges like diabetes and obesity. It was underscored that a substantial increase in CKD and related deaths is anticipated in Africa.

Prof. Jarraya then discussed in detail:

1. Overall Prevalence of CKD in Africa: The alarming reality of the increasing prevalence of Chronic Kidney Disease (CKD) across Africa was highlighted. The continent's overall prevalence of CKD stood at 6.8%, with the northern region reporting the lowest prevalence of 6.1%, coupled with the least workforce shortage. In stark contrast, the western part experienced the highest prevalence at 19.8%, highlighting a critical area for intervention.
2. Strategies for Renal Health in Africa: The session raised critical questions concerning renal prevention, screening, treatment, and addressing renal failure through dialysis and transplantation.
3. Dialysis for All: Prof. Faiçal Jarraya brought up that the concept of «Dialysis for All». He share that a cost estimate indicated that covering hemodialysis for all estimated cases in Kenya would necessitate 8 – 15% of the government's health expenditure.
4. Best Approach: Prof. Jarraya concluded by discussing that there is an urgent need for an integrated NCDs Strategy/Program for Africa which should have an integrated multisectoral action:
  1. Focusing on cardiovascular diseases, diabetes mellitus, and chronic renal diseases with an integrated approach.
  2. Prevention.
  3. Detection.
  4. Treatment.

**Speaker 2:** Prof. Ahmed Tall Lemrabott.

Topic: Key Needs and Opportunities for Multisectoral Action for the Renal Disease Response in Africa.

Prof. Ahmed Tall Lemrabott started with an update from 2022 on the epidemiology of chronic kidney disease and shared that chronic kidney disease occurs frequently has devastating consequences.

Prof. Lemrabott then laid out various components for a toolkit for developing a multisectoral action plan for noncommunicable diseases. He gave the breakdown as:

- Module 1 Conducting a comprehensive assessment.
- Module 2 Establishing stakeholder engagement and governance mechanisms.
- Module 3 Establishing a framework for action.
- Module 4 Developing an implementation plan.
- Module 5 Evaluating the implementation of a multisectoral action plan

He then shared the Illustrative logic model for development, implementation and evaluation of a multisectoral action plan.

Prof. Ahmed Tall Lemrabott then highlighted several pressing challenges:

- Insufficient nephrologists.
- Brain drain within the nephrology profession.
- The need to support African training schools in nephrology through South–South collaboration.
- Scholarships for aspiring nephrologists.
- Strategies to motivate nephrologists to remain in their home countries.
- Emphasis on Renal Pathology, specifically Renal Biopsy.

Prof. Lemrabott then discussed in details various aspects related to renal diseases:

Healthcare: The imperative for a comprehensive healthcare approach to tackle renal diseases was emphasized:

- National Non-Communicable Disease (NCD) prevention strategy, including the establishment of a National Kidney Disease Registry.
- Development of an algorithm for CKD screening in basic healthcare structures.
- Setting objectives for the management of NCDs.
- Clearly defined referral criteria for patients towards nephrologists and specialized structures.
- Establishment of reference centers in nephrology.
- Addressing the needs for renal replacement therapy.

**Research:** Quality research emerged as a crucial component in devising an effective preventive strategy for CKD:

- Conducting prevalence and incidence studies.
- Exploring risk factors for CKD.
- Investigating genetic particularities in CKD.

**Opportunities:** Several opportunities were identified to bolster the renal disease response in Africa:

- Prioritizing health education.
- Streamlining the training of nephrologists.
- Integrating cardiorenal prevention in health budget allocation.
- Early detection measures.
- Encouraging the pooling of resources.
- Structuring the drug supply for renal healthcare.

### Measurable Outcomes Over 5 Years:

To ensure effective progress in combating kidney diseases in Africa, it is imperative that we establish measurable outcomes over a five-year period. These outcomes should focus on:

**Information Education Communication:** Establishing accessible and informative platforms for disseminating knowledge about kidney health to both healthcare professionals and the general public. This includes targeted awareness campaigns, educational materials, and digital resources.

**Primary Prevention:** Implementing robust strategies aimed at preventing the onset of kidney diseases, including lifestyle interventions, early detection programs, and community-based health initiatives.

**Essential Medicines:** Ensuring availability and accessibility of essential medicines for kidney disease management, especially in resource-constrained settings. This involves strengthening pharmaceutical supply chains and advocating for equitable drug pricing.

**Equipment And Technical Platform:** Upgrading and standardizing the technical infrastructure required for effective renal care, including dialysis machines, laboratory equipment, and telemedicine platforms for remote consultations.

**Training:** Investing in comprehensive training programs for healthcare professionals, with a focus on nephrology specialists, nurses, and community health workers. This includes continuous medical education and skill development initiatives.

**Policy Advocacy - Legislative Institutional:** Advocating for policies and legislation that support kidney health, including funding allocation, workforce development, and regulatory frameworks for quality assurance in renal care.

**Funding Opportunities:** Identifying and leveraging funding opportunities from governmental, non-governmental, and international sources to support kidney disease prevention, diagnosis, and treatment initiatives.

The session, expertly moderated by Prof Ahmed Tall Lemrabott and documented by Dr. Moustapha Faye, provided invaluable insights into the multifaceted challenges surrounding renal health in Africa. The presentations and discussions underscored the urgent need for a comprehensive, multisectoral approach to address the increasing prevalence of kidney diseases. The session's recommendations and conclusions will play a pivotal role in shaping future actions aimed at enhancing renal health and healthcare delivery across the African continent.

## SESSION 3: **CANCERS**

DATE: SEPTEMBER 25, 2023  
TIME: 12:30 P.M. – 01:00 P.M.  
VENUE: CICAD – DIAMNIADIO

### **Super Moderator:**

Prof. Serigne Magueye Gueye, Director General of the Franco-Senegalese Campus, Senegal.

### **Moderator:**

Prof. Mamadou Diop, Senegal.

### **Reporter:**

Dr. Ka Kanta, Senegal.

### **Speakers:**

1. Prof. Ahmadou Dem, Senegal.
2. Prof. Serigne Magueye, Senegal.

### **Introduction:**

The session on cancers, held on September 25, 2023, delved into the current situation of cancer prevalence in Africa and the critical challenges that need to be addressed for effective management. Prof. Ahmadou Dem and Prof. Serigne Magueye provided valuable insights into the epidemiology, clinical characteristics, and the necessary steps for optimal cancer care in Africa.

**Speaker 1:** Prof. Ahmadou Dem.

Topic: Current situation of cancers in Africa.

Prof. Ahmadou Dem provided a detailed analysis of the global and African cancer landscape. With compelling statistics, he highlighted the alarming rise in cancer cases worldwide, emphasizing the gravity of the issue. Prof. Dem underscored the pressing need for targeted interventions, particularly in Africa, where challenges like urbanization, late diagnosis, and a shortage of specialized medical staff compound the problem.

He stressed the necessity of a robust cancer population register, lamenting the current inadequacies. According to Prof. Dem, insufficient financial support, coupled with a lack of training for registrars, has hindered progress. He emphasized that the cost per recorded cancer case ranges from 4 to 15 Euros, illustrating the need for substantial investments in this critical area.

Prof. Dem called for concerted efforts, advocating for national investments and partnerships, particularly in countries with limited resources. He outlined a comprehensive cancer plan encompassing database management, prevention, treatment, diagnosis, and research. Prof. Dem concluded with a poignant appeal for immediate action, highlighting the urgent need for dedicated resources and strategies to combat this escalating health crisis.

**Speaker 2:** Prof. Serigne Magueye.

Topic: - Current situation of cancers in Africa. Problems to be solved for optimal cancer management in Africa. Key needs and opportunities for multisectorial action for the cancer response in Africa

Prof. Serigne Magueye delved into the intricate challenges surrounding cancer management in Africa. He highlighted the stark realities of under-reporting and under-diagnosis, painting a vivid picture of the obstacles faced in accurately assessing cancer incidence.

He emphasized the need for targeted advocacy, stressing the significance of declaring cancer a public health priority in Africa. Prof. Magueye outlined a multi-pronged approach, advocating for the development and implementation of National Cancer Control Programmes by every Ministry of Health in Africa. He emphasized the importance of prioritizing control strategies for preventable or curable cancers, such as HPV and HepB vaccinations, as well as campaigns on tobacco control and obesity.

Prof. Magueye emphasized the critical need for gender equity in cancer advocacy. He highlighted the imperative to champion cancer care and control for both men and women, emphasizing that cancer knows no gender, racial, or age boundaries.

He stressed the urgency in providing palliative care services and increasing access to effective anti-cancer therapies. Prof. Magueye underscored the importance of supporting quality cancer care through the development of relevant diagnostic and therapeutic resources, including pathology, radiology, surgery, chemotherapy, and others.

Prof. Magueye presented key needs and opportunities for multisectoral action for an effective cancer response in Africa. He emphasized the necessity for integrated comprehensive cancer control plans, effective advocacy, resource mobilization, and partnerships with various stakeholders, including governments, the private sector, and international organizations.

### **Measurable Outcomes Over 5 Years:**

**Information Education Communication:** Establish a targeted information campaign to raise awareness about cancer prevention and early detection among the general population. This campaign will employ various mediums, including social media, community workshops, and informational pamphlets distributed through healthcare facilities.



**Primary Prevention:** Implement cost-effective strategies targeting major risk factors like tobacco use and infectious agents, focusing on school children, the elderly, and high-risk populations. This initiative will involve collaboration with educational institutions, community health centers, and local government bodies.

**Essential Medicines:** Ensure access to a consistent supply of essential cancer medications, particularly in low-resource settings, to improve treatment outcomes. This will involve strengthening pharmaceutical supply chains, negotiating with pharmaceutical companies for affordable pricing, and exploring opportunities for local production of essential cancer drugs.

**Equipment And Technical Platform:** Strengthen medical infrastructure by providing adequate screening, diagnostic, and treatment equipment, particularly in regions facing shortages. This initiative will involve targeted investments in healthcare facilities, including the procurement of state-of-the-art medical equipment and the training of healthcare professionals on their use.

**Training:** Establish comprehensive training programs for healthcare providers, decision-makers, and care providers at all levels, emphasizing early detection and effective treatment. These training programs will be designed in collaboration with leading educational institutions and will include both in-person workshops and online modules to reach a wide audience.

**Policy Advocacy - Legislative Institutional:** Advocate for the declaration of cancer as a significant public health problem in Africa, and develop and implement National Cancer Control Programmes in collaboration with Ministries of Health. This advocacy effort will involve engaging with policymakers, conducting awareness campaigns, and mobilizing grassroots support to prioritize cancer control in national health agendas.

**Funding Opportunities:** Mobilize resources from governments, individuals, private sector, and international partners, ensuring equitable distribution across all levels of the health system, with a focus on reducing the cost of cancer drugs. This initiative will involve exploring innovative financing mechanisms, such as public-private partnerships and grant funding, to ensure sustainable and equitable funding for cancer control efforts.

The session provided crucial insights into the state of cancer management in Africa, emphasizing the urgent need for comprehensive strategies, increased investments, and collaborative efforts to mitigate the growing burden of cancer. The outlined measurable outcomes serve as a roadmap towards achieving significant progress in cancer care over the next five years.

## SESSION 4: GENETIC DISEASES, SICKLE CELL DISEASE AND SYSTEMIC DISEASES

DATE: SEPTEMBER 25, 2023  
TIME: 1:00 P.M. – 1:30 P.M.  
VENUE: CICAD – DIAMNIADIO

### **Super Moderator:**

Prof. Saliou Diop. Professor of Hematology, Cheikh Anta Diop University, Dakar.

### **Moderator:**

Prof. Bakary Cissé, Mali.

### **Reporter:**

Prof. Mor Diaw, Senegal.

### **Speakers:**

1. Prof. Saliou Diop, Senegal.
2. Prof. Saidou Diallo, Senegal.
3. Prof. Leon Tshilolo, Democratic Republic of Congo.

### **Introduction:**

Prof. Saliou Diop, an esteemed Full Professor of Hematology from Cheikh Anta Diop University, led this pivotal session delving into the realm of Genetic Diseases, Sickle Cell Disease, and Systemic Diseases. The session convened experts and thought leaders to present the latest advancements in diagnosis, management, and access to treatments for these critical health conditions. Under the guidance of Prof. Diop and moderation by Prof. Bakary Cissé, the session provided profound insights and actionable strategies to address the challenges posed by these diseases in the context of Sub-Saharan Africa. Prof. Mor Diaw, an accomplished expert from Senegal, meticulously reported and documented the proceedings, ensuring that the knowledge shared in this session leaves a lasting impact on the collective effort to combat genetic and systemic diseases.

**Speaker 1:** Prof. Saliou Diop.

Topic: Diagnosis and Management of Sickle Cell Disease: Updates in 2023.

Overview: Prof. Saliou Diop provided a detailed overview of Sickle Cell Disease (SCD), emphasizing its genetic nature and the production of Hemoglobin S (HbS). He highlighted the severe forms of SCD and their impact on individuals' health across their lifespan.

Global Burden of SCD: The prevalence of HbS trait in Africa was outlined, underscoring its significant impact on the region. Prof. Diop also pointed out the high number of births of infants with SCD and the alarming mortality rates in Africa.

Challenges and Perspectives: Prof. Diop highlighted the challenges in accurately estimating the global prevalence of SCD, as well as the scarcity of data for this high-prevalence disease. He stressed the need for standardized databases to facilitate systematic data collection and analysis.

Laboratory Diagnosis: Various methods for diagnosing SCD were discussed, including Full Blood Count, electrophoretic methods, and molecular biology. Point of care testing (POCTs) was emphasized as an effective tool for early diagnosis.

Current Principles of SCD Management: Prof. Diop emphasized the importance of early diagnosis, multidisciplinary care, social support, and measures to prevent infections. He discussed the use of Hydroxyurea and other treatments for managing the disease.

New Drugs for Treatment of SCD: The introduction of new drugs like L Glutamine, Crizanlizumab, and Voxelotor was presented, highlighting their potential to reduce the frequency of vaso-occlusive crises and improve the quality of life for SCD patients.

Curative Treatment of SCD: Hematopoietic stem cell transplantation was identified as the only curative therapy for SCD. Prof. Diop noted its high success rate in children under 16 and highlighted ongoing gene therapy clinical trials.

Management of SCD: challenges and perspectives: Prof. Diop outlined the challenges faced in treating SCD, including limited access to effective treatments, especially in Africa. He advocated for better public health and research programs and emphasized the need for optimal screening strategies.

Recommendations: Prof. Diop provided recommendations for authorities, healthcare professionals, and patients. These included creating specialized programs, enhancing teamwork, promoting early diagnosis, and addressing barriers to awareness and prevention.

**Speaker 2:** Prof. Saidou Diallo.

Topic: Systemic Diseases in Africa: Management Strategies.

**Overview:** Prof. Saidou Diallo introduced systemic diseases, distinguishing between autoimmune and autoinflammatory categories. He emphasized the high prevalence of these diseases in both Western and Sub-Saharan African populations.

**Epidemiological Data:** Prevalence and incidence rates of systemic diseases were discussed, with a focus on conditions like Rheumatoid arthritis and Gout. Prof. Diallo highlighted the gender and age-related trends in these diseases.

**Risk Factors:** Prof. Diallo outlined the risk factors associated with systemic diseases, including genetic and environmental factors. He emphasized the importance of early diagnosis and treatment.

**Diagnostic Data:** The diagnostic process for systemic diseases was detailed, including clinical, paraclinical, and epidemiological criteria. Prof. Diallo stressed the significance of early identification for effective management.

**Diagnostic and Therapeutic Urgency:** The urgency of diagnosing and treating systemic diseases was emphasized, with Prof. Diallo noting the impact of early intervention on disease outcomes.

**Issues and Challenges in Black Africa:** Prof. Diallo highlighted the challenges faced in managing systemic diseases in Africa, including limited funding, inadequate infrastructure, and a shortage of trained healthcare professionals. He also addressed cultural and social factors affecting treatment.

**Recommendations:** Prof. Diallo provided recommendations for authorities, healthcare professionals, and patients. These included creating specialized programs, emphasizing the importance of early diagnosis, and promoting research on systemic diseases.

**Speaker 3:** Prof. Leon Tshilolo.

Topic: Challenges in Accessing New Treatments for Sickle Cell Disease and Systemic Diseases in Africa.

**A Systemic and Inflammatory Disease:** Prof. Leon Tshilolo framed Sickle Cell Disease as a systemic and inflammatory disorder with genetic, rheological, and immunodeficient characteristics. He presented WHO's recommendations for implementing national Sickle Cell Anemia (SCA) programs in Sub-Saharan Africa, emphasizing the need for awareness, early identification, and access to preventative care.

**How Can We Stop Pain and Organ Complications:** Prof. Tshilolo emphasized the importance of early identification, access to preventative care, and medical professional training in reducing pain and complications associated with SCD.

**Limiting Factors in Sub-Saharan African Countries:** Prof. Tshilolo outlined several challenges in providing effective care for SCD, including limited comprehensive programs, insufficient training, and inadequate infrastructure.

**Current Management of SCD in Ss African Countries:** He discussed the current approaches to managing SCD, including newborn screening, prophylaxis, vaccination, and blood transfusion. Prof. Tshilolo noted the limitations in access to Hydroxyurea.

**Access To Hydroxyurea – A Priority:** Prof. Tshilolo emphasized the need for safe, affordable, and efficient access to Hydroxyurea, highlighting its potential in improving outcomes for SCD patients.

**New Non-Curative Therapies:** He introduced new therapies like Crizanlizumab, Glutamine, and Voxelotor, emphasizing their potential to reduce vaso-occlusive crises and improve overall health.

**Can We Develop Curative Therapies In Africa?:** Prof. Tshilolo discussed the potential for curative therapies, including hematopoietic stem cell transplantation and gene therapy. He emphasized the need for further research and infrastructure development.

**The Continuum of Care – Integration At All Levels:** Prof. Tshilolo stressed the importance of integrated care, from diagnosis to gene and cell therapy. He addressed the need for equity in access to essential drugs and curative therapies.

Prof. Tshilolo also underlined the importance of increasing the partnership between African scientists (South–South) and with the North (South–North) to ramp up effort in establishing the African Research Institute.

### **Measurable Outcomes Over 5 Years:**

#### **Information Education Communication:**

- Implemented targeted educational campaigns to raise awareness about genetic diseases, sickle cell disease, and systemic diseases.
- Utilized various channels such as workshops, seminars, online resources, and community outreach programs to disseminate vital information.



### **Primary Prevention:**

- Established comprehensive prevention strategies aimed at reducing the incidence and impact of genetic diseases, sickle cell disease, and systemic diseases.
- Promoted genetic counseling, encouraged healthy lifestyle choices, and advocated for early screening and intervention programs.

### **Essential Medicines:**

- Ensured consistent availability and accessibility of essential medications for the management of genetic diseases, sickle cell disease, and systemic diseases.
- Established robust supply chains, optimized distribution networks, and monitored medication availability in healthcare facilities.


### **Equipment And Technical Platform:**

- Upgraded and standardized the technical infrastructure required for effective diagnosis, monitoring, and treatment of genetic diseases, sickle cell disease, and systemic diseases.
- Invested in advanced diagnostic equipment, laboratory facilities, and medical technologies.

### **Training:**

- Invested in comprehensive training programs for healthcare professionals, focusing on continuous medical education and skill development specific to genetic diseases, sickle cell disease, and systemic diseases.
- Offered specialized workshops, seminars, and certification courses to enhance the expertise of medical personnel in diagnosing and managing these conditions effectively.

**Policy Advocacy - Legislative Institutional:** Advocated for policies and legislative measures that supported early detection, prevention, and treatment of genetic diseases, sickle cell disease, and systemic diseases.



## SESSION 5: DIABETES & OBESITY

DATE: SEPTEMBER 25, 2023

TIME: 3:00 P.M. – 3:30 P.M.

VENUE: CICAD – DIAMNIADIO, DAKAR, SENEGAL

### **Super Moderator:**

Prof. Jamal Belkhadir, Moroccan League for the Fight against Diabetes, Morocco.

### **Moderator:**

Prof. Issa Wone, Senegal.

### **Reporter:**

Dr. Roberta Lamptey, Ghana.

### **Speakers:**

1. Prof. André Pascal Kengne, South Africa.
2. Prof. Maïmouna Ndour Mbaye, Senegal.
3. Prof. Eugène Sobngwi, Cameroon.

### **Introduction:**

Under the enlightened guidance of Professor Jamal Belkhadir from the Moroccan League against Diabetes, Session 5 of the International Conference on the NCD Epidemic delved deeply into the crucial issues related to diabetes and obesity in Africa. This high-level panel brought together renowned experts who shared their expertise in order to illuminate our understanding of the past situation on the African continent.

Professor Issa Wone from Senegal, serving as the moderator of this session, played a pivotal role in facilitating discussions, posing relevant questions, and ensuring the smooth progress of debates. His experience and dedication made him a valuable guide for this pivotal discussion.

To ensure that the discussions and presentations in this session were well documented, the role of reporter was entrusted to Dr. Roberta Lamptey from Ghana. Dr. Lamptey was tasked with summarizing the key points and conclusions that emerged from this session, thus contributing to the creation of a detailed report that enriched our understanding of the challenges related to diabetes and obesity in Africa.

Finally, this session Diabetes and Obesity provided valuable insights into how to combat diabetes and obesity in Africa. The recommendations and conclusions from this session will be integrated into the conference's general report. Finalisation of this report will be , coordinated by Prof. Serigne Magueye GUEYE and Prof. Abdou Salam FALL. The final report will guide future actions aimed at improving public health on the African continent.

**Speaker 1:** Prof. André Pascal Kengne.

Topic: Current situation of diabetes and obesity in Africa.

Prof. André Pascal Kengne provided a comprehensive overview of the current state of diabetes and obesity in Africa. The presentation covered key aspects such as prevalence rates, trends, projections, associated costs, complications, and the driving factors behind the increasing burden of these conditions.

One striking statistic was the high percentage of undiagnosed diabetes in Africa, which stands at 53.6%, according to the IDF Atlas 2021. This highlights the urgent need for improved screening and diagnostic measures in the region.

The prevalence of diabetes and obesity in Africa has seen a significant upward trajectory over the years. Age-standardized prevalence rates have risen substantially, underscoring the gravity of the situation.

Furthermore, the correlation between mean BMI and diabetes prevalence by GDP demonstrate a complex interplay between economic development and health outcomes.

Prof. Kengne emphasized the need for concerted efforts to tackle challenges such as undiagnosed diabetes and the prevention/delay of progression of pre-diabetes.. These challenges necessitate a multi-faceted approach involving both early detection and prevention strategies.

**Speaker 2:** Prof. Maïmouna Ndour Mbaye.

Topic: Problems to be solved for optimal management of diabetes and obesity in Africa.

Prof. Maïmouna Ndour Mbaye highlighted critical issues that need to be addressed for the effective management of diabetes and obesity in Africa. These include insufficient prevention measures, low rates of screening, and delayed diagnoses.

Access to healthcare emerged as a significant problem, with geographical inaccessibility, a shortage of qualified healthcare personnel, and a healthcare system predominantly focused on acute diseases. Additionally, the high cost of treatment poses a considerable barrier to individuals seeking care.

The financial burden of diabetes in the African region remains disproportionately low in comparison to global expenditure, indicating a need for increased investment in NCDs.

Prof. Mbaye shed light on the socio-cultural factors influencing the acceptance of chronic diseases, stressing the impact of agro-industrial practices and the lack of comprehensive data.

To address these challenges, she proposed a multidisciplinary approach, advocating for advocacy, awareness campaigns, and strong support from authorities. High-quality research, integrated with policy-making, was also underscored as essential.

**Speaker 3:** Prof. Eugène Sobngwi.

Topic: Key needs and opportunities for multisectoral action for the diabetes and obesity response in Africa.

Prof. Eugène Sobngwi emphasized the importance of a lifecourse approach to effectively combat diabetes and obesity. He identified specific phases of life, including adolescence and the first 1000 days, as critical periods for intervention.

Early action in adolescence was highlighted as a foundation for future health. Addressing common risk factors for NCDs emerged as a primary target.

The first 1000 days of life, from prenatal to early childhood, represent a crucial window of opportunity for intervention. Maternal nutrition, exposure management, and maternal diabetes were identified as key areas of focus.

Prof. Sobngwi called for a multisectoral response involving legal and regulatory frameworks, physical infrastructure for promoting physical activity, economic strategies for accessible and affordable nutrition, and educational initiatives.

He emphasized the relevance of the Sustainable Development Goals (SDGs), particularly Goal 11 focused on urbanization, as a key lever for action against obesity and diabetes.

### **Measurable Outcomes Over 5 Years:**

Information Education Communication: Implement targeted educational campaigns through workshops, seminars, online resources, and community outreach programs.

Primary Prevention:

- Establish comprehensive prevention strategies to reduce the incidence and impact of diabetes and obesity.
- Promote genetic counseling, healthy lifestyle choices, and early screening and intervention programs.

### **Essential Medicines:**

- Ensure consistent availability and accessibility of essential medications for diabetes and obesity management.
- Optimize distribution networks and monitored medication availability in healthcare facilities.

### **Equipment And Technical Platform:**

- Upgrade and standardize technical infrastructure for effective diagnosis, monitoring, and treatment of diabetes and obesity.
- Invest in advanced diagnostic equipment, laboratory facilities, and medical technologies.

### **Training:**

- Invest in comprehensive training programs for healthcare professionals, focusing on continuous medical education and skill development.
- Offer specialized workshops, seminars, and certification courses to enhance the expertise of medical personnel.

**Policy Advocacy - Legislative Institutional:** Advocate for policies and legislative measures supporting early detection, prevention, and treatment of diabetes and obesity.



## SESSION 6: STROKE

DATE: SEPTEMBER 25, 2023  
TIME: 03:30 P.M. – 04:00 P.M.  
VENUE: CICAD – DIAMNIADIO

### **Super Moderator:**

Prof. Ange-Eric Kouamé-Assouan, ROOM President of the Ivorian Society of Neurology, Ivory Coast.

### **Moderator:**

Prof. Callixte Kuate, Cameroon.

### **Reporter:**

Dr. Awa Ba-Diop, Senegal.

### **Speakers:**

1. Prof. Ange-Eric Kouame-Assouan, Ivory Coast.
2. Prof. Hajar Khattab, Morocco.
3. Prof. Callixte Kuate Tegueu, Cameroon.

### **Introduction:**

Session 6 of the International Conference on Non-Communicable Diseases (NCDs) Epidemic was dedicated to Stroke (Cerebrovascular Accidents – CVAs). Chaired by Prof. Ange-Eric KOUAME-ASSOUAN from Ivory Coast and reported by Dr. Awa BA-DIOP from Senegal, the session addressed current challenges and the necessary steps for improved stroke management in Africa.

**Speaker 1:** Prof. Ange-Eric Kouame-Assouan.

Topic: Current Situation of Strokes in Africa.

Prof. Ange-Eric KOUAME-ASSOUAN from Ivory Coast presented the current situation of strokes in Africa. He emphasized, based on current scientific literature, the increasing prevalence of this disease, affecting younger individuals, and its greater severity in terms of both mortality and functional impairment (disability). The impact of the ten major modifiable risk factors, primarily hypertension, was demonstrated, making it a major therapeutic target for prevention. Finally, the inadequacy of facilities and competent human resources for management was highlighted.

**Speaker 2:** Prof. Hajar Khattab.

Topic: Challenges for Optimal Stroke Management in Africa.

Prof. Hajar Khattab from Morocco addressed the issues to be resolved for optimal stroke management in Africa. Obstacles hindering effective management, such as lack of awareness of the pathology, resorting to traditional medicines, delayed presentation of patients to emergency services, delayed access to brain imaging, difficulties in accessing treatment, and insufficient personnel and specialized care facilities, were presented. Drawing on the example of the University Hospital of Casablanca, she demonstrated pathways for the implementation of effective stroke management in the acute phase, including occlusive vessel revascularization techniques.

**Speaker 3:** Prof. Callixte Kuate Tegueu.

Topic: Key Needs and Opportunities for Multisectoral Actions in Africa Against Strokes.

Prof. Tegueu presented the main needs and key opportunities for multisectoral actions in Africa to respond to strokes. He advocated for governments and all stakeholders involved to prioritize the fight against CVDs and strokes, aiming for funding from all actors (governments, international organizations, healthcare professionals, civil society). Overall improvement in stroke management at all levels of the healthcare pyramid also involves appropriate equipment of healthcare facilities, especially neuroradiological equipment, multidisciplinary care involving all stakeholders (neurologists, neurosurgeons, cardiologists, rehabilitators, etc.), and the establishment of specialized units (neurovascular units). Finally, funding and promoting research are essential to propose policies tailored to local data, for greater efficiency in stroke prevention programs.

## Measurable Outcomes Over 5 Years:

**Information Education Communication:** In the realm of Information Education Communication (IEC), a comprehensive approach must be adopted. This involves creating accessible and culturally sensitive educational materials, organizing awareness campaigns targeting both the general population and healthcare providers, and utilizing digital platforms to disseminate crucial information about stroke prevention and management.

**Primary Prevention:** Primary prevention efforts should focus on addressing the modifiable risk factors that contribute to the onset of strokes. This encompasses initiatives to control hypertension, promote healthy lifestyles including balanced nutrition and regular physical activity, and implementing community-wide educational programs to raise awareness about the importance of early intervention.

**Essential Medicines:** Ensuring access to essential medicines is pivotal in stroke management. This includes the availability of thrombolytic agents for acute ischemic strokes, antihypertensive drugs for effective blood pressure control, and medications to manage comorbidities. Additionally, efforts should be directed towards enhancing the affordability and availability of these medications.

**Equipment And Technical Platform:** Establishing and maintaining a well-equipped technical platform is imperative for efficient stroke care. This involves having state-of-the-art imaging facilities for accurate diagnosis, specialized equipment for interventions like thrombectomy, and telemedicine capabilities to facilitate timely consultations, especially in underserved areas.

**Training:** Comprehensive training programs are essential for healthcare professionals involved in stroke care. This includes continuous medical education on the latest treatment modalities, specialized training for stroke unit staff, and community-based training to empower individuals in recognizing stroke symptoms and taking appropriate action.

**Policy Advocacy - Legislative Institutional:** Advocacy efforts should be directed towards policy reforms that support stroke prevention and management. This involves advocating for the allocation of resources for stroke care, implementing regulations to ensure quality standards in stroke units, and fostering collaborations between governmental and non-governmental entities to create a conducive environment for stroke initiatives.

## SESSION 7: CHRONIC RESPIRATORY DISEASES

DATE: SEPTEMBER 25, 2023  
TIME: 04:00 P.M. - 04:30 P.M.  
VENUE: CICAD - DIAMNIADIO

### **Super Moderator:**

Prof. Nafissatou Touré, Head of Pulmonology Department, CHNU de Fann, Dakar, Senegal.

### **Moderator:**

Prof. Abdourahmane Niang, Senegal.

### **Reporter:**

Prof. Ansoumana Diatta, Senegal.

### **Speakers:**

1. Prof. Khady Thiam, Senegal.
2. Prof. Alexandre Kouassi Boko, Ivory Coast.
3. Prof. Yacine Dia Kane, Senegal.

### **Introduction:**

Under the insightful guidance of Prof. Nafissatou Touré, Head of Pulmonology Department at CHNU de Fann, Dakar, Senegal, Session 7, dedicated to «Chronic Respiratory Diseases,» delved into the critical issues surrounding respiratory health in Africa. Prof. Abdourahmane Niang, who served as the moderator, played a pivotal role in facilitating discussions, ensuring relevance, and maintaining the flow of the session. Prof. Ansoumana Diatta, the appointed reporter, was tasked with synthesizing the key points and conclusions, thus contributing to the creation of a detailed report that enriched our understanding of respiratory challenges in Africa.

**Speaker 1:** Prof. Khady Thiam.

Topic: Current Situation of Chronic Respiratory Diseases in Africa.

Chronic respiratory diseases refer to persistent, progressive conditions affecting the respiratory tract and other pulmonary structures for over six months. This category encompasses a range of conditions including but not limited to asthma, chronic obstructive pulmonary disease (COPD), diffuse interstitial lung diseases, pulmonary arterial hypertension, sleep apnea, bronchiectasis, and cystic fibrosis.

**Epidemiology:** Prof. Khady Thiam provided a comprehensive overview of the epidemiological landscape surrounding chronic respiratory diseases in Africa. Factors such as workplace dust, tobacco smoke, incense smoke, kitchen smoke, and chemical exposures were discussed. The presentation emphasized the prevalence of chronic respiratory conditions and highlighted the urgent need for up-to-date epidemiological data in many African countries.

**Magnitude Of The Problem:** The prevalence of chronic respiratory conditions was outlined, showcasing data from specific countries in Africa. For instance, Ethiopia, Kenya, and Sudan reported significant percentages for conditions like asthma, chronic bronchitis, COPD, bronchiectasis, and post-tuberculosis pulmonary sequelae. Globally, chronic respiratory diseases accounted for a substantial portion of morbidity and mortality, particularly in low and middle-income countries.

**Mortality:** Chronic Respiratory Diseases constituted a significant portion of global mortality, with a staggering 90% of deaths occurring in low and middle-income countries. Prof. Khady Thiam highlighted the economic burden of these conditions on national healthcare budgets, families, and individual patients, emphasizing the need for targeted policies and interventions.

**Impact:** The impact of chronic respiratory diseases on productivity, daily activities, and absenteeism was discussed, shedding light on the substantial direct and indirect costs associated with these conditions. The underestimated financial burden and the need for effective healthcare policies were underscored.

**Diagnosis:** Prof. Khady Thiam emphasized the underdiagnosis of chronic respiratory conditions, citing factors such as limited availability and insufficient knowledge regarding diagnostic tests. The sporadic availability of diagnostic equipment and the need for specialized training were identified as significant barriers.

**Availability of Essential Medicines:** The availability of essential medicines for chronic respiratory diseases was examined. Inhalers containing corticosteroids and long-acting beta-agonists, as well as oral prednisolone tablets, were found to have varying levels of accessibility. The high cost of medications and cultural beliefs affecting therapeutic adherence were highlighted.

**Speaker 2:** Prof. Alexandre Kouassi Boko.

**Topic:** Problems to be Solved for Optimal Management of Chronic Respiratory Diseases in Africa.

Prof. Alexandre Kouassi Boko delved into the challenges surrounding the optimal management of chronic respiratory diseases in Africa. He outlined the socioeconomic and medical factors affecting the care of individuals with conditions such as asthma, COPD, lung cancer, pulmonary fibrosis, post-tuberculosis pulmonary sequelae, and obstructive sleep apnea. The presentation emphasized the need for a multifaceted approach to address these complex issues.

**Diagnosis and Management Challenges:** The difficulties in diagnosing and managing chronic respiratory diseases were discussed, with a focus on factors such as limited access to specialized diagnostic tools and the high cost of medications. The presentation underscored the need for improved access to diagnostic resources and the development of targeted treatment protocols.

**Socioeconomic Factors:** Prof. Alexandre Kouassi Boko highlighted the significant impact of socioeconomic factors on the management of chronic respiratory diseases. Issues such as the perception of chronic illnesses in African populations, medication costs, poverty, and the limited availability of health insurance were identified as key challenges.

**Healthcare Environment:** The presentation addressed challenges within the healthcare environment, including limited technical resources, availability of essential medications, and the need for ongoing training and education for healthcare professionals. Prof. Alexandre Kouassi Boko emphasized the importance of strengthening the healthcare infrastructure to enhance the diagnosis and management of chronic respiratory diseases.

**Proposed Solutions:** The speaker outlined potential solutions to enhance the optimal management of chronic respiratory diseases:

- Subsidizing the cost of medications for chronic respiratory diseases, drawing from successful models such as diabetes management in Côte d'Ivoire.
- Encouraging the establishment of pharmaceutical companies for the production of generic medications.
- Advocating for reduced medication costs in pharmacies to improve accessibility.
- Establishing universal health insurance to provide comprehensive coverage for chronic respiratory conditions.

**Speaker 3:** Prof. Yacine Dia Kane.

Topic: Key Needs and Opportunities for Multisectoral Action for the Response to Chronic Respiratory Diseases in Africa.

Prof. Yacine Dia Kane provided a comprehensive overview of chronic respiratory diseases (CRDs) as a significant public health concern due to their frequency, severity, and economic impact. She emphasized the importance of a multisectoral approach focusing on risk factors, a strategy endorsed by the United Nations since the early 2000s and reaffirmed with the launch of the Sustainable Development Goals (SDGs) for 2030.

**Morbidity and Mortality of CRDs:** CRDs contribute significantly to global morbidity and mortality, with millions of annual deaths. Prof. Yacine Dia Kane highlighted specific conditions such as COPD, asthma, and lung cancer, underscoring their impact on public health.

### Measurable Outcomes Over 5 Years

In order to make substantial progress in addressing chronic respiratory diseases in Africa, it is imperative to establish measurable outcomes over a five-year period. These outcomes should focus on:

**Information Education Communication:** Implementing targeted educational campaigns to raise awareness about chronic respiratory diseases, risk factors, and preventive measures. This includes community workshops, educational materials, and digital resources.

**Primary Prevention:** Developing and implementing comprehensive prevention strategies to reduce the incidence of chronic respiratory diseases. This involves promoting healthy lifestyle choices, early detection programs, and environmental interventions.

**Essential Medicines:** Ensuring consistent availability and accessibility of essential medications for chronic respiratory disease management. This includes optimizing pharmaceutical supply chains and advocating for equitable pricing.

**Equipment and Technical Platform:** Upgrading and standardizing the technical infrastructure required for effective respiratory care, including diagnostic equipment, treatment devices, and telemedicine platforms.

**Training:** Investing in robust training programs for healthcare professionals, with a focus on respiratory specialists, nurses, and community health workers. This includes continuous medical education and skill development initiatives.

**Policy Advocacy - Legislative Institutional:** Advocating for policies and legislative measures that support respiratory health, including funding allocation, workforce development, and regulatory frameworks for quality assurance in respiratory care.

**Funding Opportunities:** Identifying and leveraging funding opportunities from governmental, non-governmental, and international sources to support chronic respiratory disease prevention, diagnosis, and treatment initiatives.

The session, moderated by Prof. Abdourahmane Niang and documented by Prof. Ansoumana Diatta, provided invaluable insights into the challenges surrounding chronic respiratory diseases in Africa. The presentations and discussions underscored the urgent need for a comprehensive, multisectoral approach to address the increasing prevalence of these conditions. The session's recommendations and conclusions will play a pivotal role in shaping future actions aimed at enhancing respiratory health and healthcare delivery across the African continent.



## SESSION 8: SUSTAINABLE AND INNOVATIVE FINANCING OF NCDs IN AFRICA

DATE: SEPTEMBER 26, 2023  
TIME: 9:00 A.M. – 9:30 A.M.  
VENUE: CICAD – DIAMNIADIO

### **Super Moderator:**

Prof. Salif Sow Cheikh Anta Diop University Dakar, Senegal,  
National Academy of Science and Technology of Senegal,  
Senegal.

### **Moderator:**

Prof. Jan Palmowski Secretary-General at The Guild of  
European Research-Intensive Universities.

### **Reporter:**

Dr. Bamba Gaye African Research Network for Non-  
communicable Diseases (ARNcd).

### **Speakers:**

1. Prof. Jan Palmowski, Secretary-General at The Guild of  
European Research-Intensive Universities, Belgium.
2. Mr. Daouda Coulibaly, Health Economist, Burkina Faso.
3. Dr. Malick Anne, Head of NCD Division Ministry of Health  
Senegal.

### **Introduction:**

Prof. Salif Sow, with his led the Session and focused on the  
crucial topic of «Sustainable and Innovative Financing of  
NCDs in Africa.» The session aimed to explore effective  
strategies for financing non-communicable disease  
(NCD) prevention and treatment efforts across the African  
continent. Prof. Jan Palmowski, as the moderator, skillfully  
guided the discussions, ensuring a balanced exchange  
of ideas, and Dr. Bamba Gaye, the designated reporter,  
meticulously documented the proceedings, capturing  
valuable insights for this comprehensive report.

**Speaker 1:** Prof. Jan Palmowski.

Topic: Summary of the 2022 NCD Alliance report: Current situation of NCD financing in Africa.

Prof. Palmowski began with an overview of the NCD Alliance report, providing a comprehensive analysis of the current status of NCD financing in Africa. The report highlighted the ambitious goal of SDG 3.4, aiming to reduce premature mortality from NCDs by one-third by 2030, and emphasized the need for strategic investments. The most efficient package of interventions was estimated to require an average annual investment of \$18 billion from 2023–2030, resulting in a net economic benefit of \$2.7 trillion which translates to an impressive Cost: Benefit Ratio of 19:1.

Prof. Jan Palmowski then articulated a compelling call to action for various stakeholders by stressing:

**1. Governments:**

- Allocate 5% of GDP for healthcare.
- Implement national action plans.
- Consider taxes on tobacco, processed foods, and other harmful products.

**2. Multilateral Agencies:**

- Prioritize NCDs in funding allocations.
- Strengthen data collection on NCDs.
- Coordinate strategies for maximum impact.

**3. Foundations and Philanthropy:**

- Increase funding for NCDs.
- Act as catalysts for change.
- Provide non-material assistance.

**4. Private Sector:**

- Foster public-private partnerships.
- Create funds for development and social impact.
- Divest from unhealthy industries.

**5. Civil Society:**

- Advocate for involvement from policies, international organizations, foundations, and the private sector in combating NCDs.

**Speaker 2:** Mr. Daouda Coulibaly.

Topic: Innovative mechanisms for sustainable financing of NCDs.

**Innovative Financing Mechanisms:** Mr. Daouda Coulibaly elucidated the concept of innovative financing mechanisms and their potential impact on NCD prevention and treatment efforts. He outlined the diverse definitions of innovative financing, emphasizing its role in complementing existing capital flows. Additionally, he underscored three distinct channels for value creation: resource mobilization, financial intermediation, and resource provision.

**Innovative Mechanisms for Health Financing:** Through his presentation, Mr. Coulibaly identified several innovative health financing mechanisms, including impact investments, innovative health insurance, and results-based financing. Mr. Daouda Coulibaly highlighted their potential to generate both financial returns and positive social and environmental impacts.

**Innovative Financing Mechanisms for NCDs:** Specifically focusing on NCDs, Mr. Coulibaly explored potential financing mechanisms, such as taxation on harmful products, impact investments, innovative health insurance, and catalytic financing mechanisms. These mechanisms were identified as critical tools to bridge the financing gap for NCD prevention and treatment.

**Success Factors:** Mr. Daouda Coulibaly emphasized that integrating innovative financing mechanisms into immediate and long-term economic planning is essential for success. This integration should be evidence-based, involve constructive dialogue with stakeholders, prioritize transparency, and demonstrate a long-term commitment to NCD prevention and control.

**Speaker 3:** Dr. Malick Anne.

Topic: Role of governments and the private sector in sustainable NCD financing.

**Role of Governments and the Private Sector:** Dr. Malick Anne provided a comprehensive overview of the pressing issue of Non-Communicable Diseases (NCDs) and their risk factors. He highlighted that 86% of premature deaths occur in low to middle-income countries, making NCDs a major public health concern. In Senegal, the prevalence of risk factors for NCDs was alarmingly high in 2015, necessitating urgent attention.

**Challenges in NCD Financing:** Dr. Malick Anne outlined the current structures of expenditure in NCDs and the subsidies provided by the Senegalese government. He emphasized the need for balanced financing that addresses both curative and promotional aspects, as well as the importance of strengthening Public-Private Partnerships (PPP) and Corporate Social Responsibility (CSR).

In conclusion, Dr. Malick Anne advocated for a multi-faceted approach to NCD financing. This should encompass prevention, multisectoral collaboration, availability of data for research, and the delivery of high-quality care.

**Measurable Outcomes Over 5 Years:** To ensure substantial progress in addressing NCDs in Africa over the next five years, the following measurable outcomes were proposed:

- **Information Education Communication:** Implement targeted educational campaigns to raise awareness about NCDs, risk factors, and preventive measures.
- **Primary Prevention:** Develop and implement comprehensive prevention strategies to reduce the incidence of NCDs.
- **Essential Medicines:** Ensure consistent availability and accessibility of essential medications for NCD management.
- **Equipment And Technical Platform:** Upgrade and standardize the technical infrastructure required for effective NCD care.
- **Training:** Invest in robust training programs for healthcare professionals, focusing on continuous medical education and skill development.
- **Policy Advocacy - Legislative Institutional:** Advocate for policies and legislative measures that support NCD prevention and treatment.
- **Funding Opportunities:** Identify and leverage funding opportunities from governmental, non-governmental, and international sources to support NCD initiatives.

This session, guided by Prof. Salif Sow, moderated by Prof. Jan Palmowski, and documented by Dr. Bamba Gaye, provided crucial insights into sustainable financing for NCDs in Africa. The recommendations and conclusions will serve as a roadmap for future actions to enhance NCD prevention and management on the continent.

## SESSION 9: CLIMATE AND NCDs IN AFRICA

DATE: SEPTEMBER 26, 2023  
TIME: 09:30 A.M. – 10:00 A.M.  
VENUE: CICAD – DIAMNIADIO

### **Super Moderator:**

Prof. Abdoulaye Dème, Specialist in Meteorology, Senegal.

### **Moderator:**

Dr. Aïda Diongue, IPCC Vice Chair, Senegal.

### **Reporter:**

Dr. Ibrahima Diouf, Senegal.

### **Speakers:**

1. Dr. Aïda Diongue, IPCC Vice Chair, Senegal.
2. Prof. Guéladio Cissé, Switzerland.
3. Prof. Abdoulaye Dème, Senegal.

### **Introduction:**

In this Session 9, we delved into a critical intersection of global concern: Climate and Non-Communicable Diseases (NCDs) in Africa. Chaired by Prof. Abdoulaye Dème, a distinguished specialist in meteorology from Senegal, this session brought together experts and thought leaders to shed light on the profound implications of climate change on public health. The panel, featuring speakers including IPCC Vice Chair, Dr. Aïda Diongue, and renowned climate and health scholar, Prof. Guéladio Cissé, offered deep insights and actionable strategies to address this pressing issue.

Their presentations underscored the urgent need for multi-disciplinary approaches and concerted efforts to safeguard public health in the face of a changing climate. The outcomes outlined in this report will guide actionable steps over the next five years to address this critical issue.

**Speaker 1: Dr. Aïda Diongue.**

Topic: Climate Change and its Relevance to Health.

Dr. Aïda Diongue commenced the session with an insightful presentation emphasizing the significance of climate change on global health. She provided an overview of the Intergovernmental Panel on Climate Change (IPCC) and its pivotal role in evaluating scientific, technical, and socio-economic information related to human-induced climate change. Dr. Diongue stressed that the reports of the IPCC are designed to be policy-relevant rather than prescriptive.

Furthermore, she highlighted the collaboration between policy and science in delivering rigorous and balanced scientific information on climate change. The engagement of stakeholders from 195 member states and experts from around the world in the preparation of IPCC reports was emphasized.

Dr. Diongue underscored the undeniable human influence on climate change, leading to an increase in extreme weather events such as heatwaves, heavy rainfall, and droughts. She pointed out that climate change is already affecting regions across the globe, demanding urgent attention and adaptation strategies.

The presentation concluded with a call to action, emphasizing the critical need to substantially and sustainably reduce greenhouse gas emissions to mitigate the impacts of climate change and enhance air quality.

**Speaker 2: Prof. Guéladio Cissé.**

Topic: Climate Change and Health: Impacts, Risks, and Adaptation Solutions.

Prof. Guéladio Cissé provided a comprehensive overview of the IPCC Assessment Report 6 (AR6), emphasizing the transition from global assessments to regional perspectives. He highlighted the historical recognition of the IPCC's efforts in advancing knowledge about anthropogenic climate change.

The presentation covered observed impacts and projected risks associated with climate change on health. Prof. Cissé stressed the exacerbation of health challenges, including cardiovascular and respiratory distress, as a consequence of non-optimal temperatures and extreme weather events.

Furthermore, he shed light on the intersection of non-communicable diseases (NCDs) with climate change, underlining the increase in allergic rhinitis, allergic asthma, and the lengthening of pollen seasons. Prof. Cissé pointed out the vulnerability of older individuals to extreme heat events, particularly in relation to cardiovascular diseases. The presentation concluded by emphasizing the importance of adaptation solutions to build climate resilience within health systems and the need for inter-sectoral collaboration.

**Speaker 3: Prof. Abdoulaye Dème.**

Topic: Climate Change and Respiratory Diseases in the Saint-Louis Region.

Prof. Abdoulaye Dème's presentation delved into a focused study on the impact of climate change on respiratory diseases within the Saint-Louis region. He drew attention to the rapid and intense effects of extreme heat events on mortality, highlighting the immediate surge in mortality rates during prolonged periods of extreme heat.

Prof. Dème employed a Health and Demographic Surveillance System (HDSS) to longitudinally observe individuals within the resident population. Through detailed data analysis, he established a significant correlation between rising temperatures and increased mortality rates, particularly in relation to cardiovascular, respiratory, and nervous system-related diseases.

The presentation emphasized the vulnerability of specific demographic groups, with older individuals and women being particularly susceptible to high temperatures. Prof. Dème also discussed the distribution of comfort indices, highlighting areas of extreme discomfort and caution, especially during specific seasons.

In conclusion, the presentation called for a broader application of the findings, suggesting that the results for Senegal are indicative of trends within the Sahel region. It underscored the necessity of integrating climate and climate change education into the training of healthcare professionals.

**Measurable Outcomes Over 5 Years:**

**Information Education Communication:** Over the next five years, a robust Information Education Communication (IEC) strategy will be developed to disseminate knowledge on climate change and its impact on health across all levels of society. This will include targeted campaigns, workshops, and educational materials.



**Primary Prevention:** Efforts will be directed towards implementing primary prevention strategies that focus on minimizing exposure to climate-related health risks. This will involve community-based interventions, early warning systems, and infrastructure improvements.

**Essential Medicines:** Ensuring the availability and accessibility of essential medicines for climate-related health conditions will be a key priority. Stockpiling, distribution systems, and local production capacity will be optimized.

**Equipment And Technical Platform:** Investments will be made in state-of-the-art equipment and technical platforms for climate-related health interventions. This includes establishing telemedicine networks, climate-resilient healthcare facilities, and advanced diagnostic tools.

**Training:** Capacity-building and training programs will be conducted for healthcare professionals, equipping them with the skills and knowledge to address climate-related health challenges effectively. Specialized training modules will be developed.

**Policy Advocacy – Legislative Institutional:** Advocacy efforts will focus on influencing policies and legislation at the regional, national, and international levels. This will involve collaboration with governments, NGOs, and international bodies to prioritize climate and health.

**Funding Opportunities:** Exploration of diverse funding opportunities will be a crucial aspect of sustaining climate-related health initiatives. This includes partnerships with philanthropic organizations, private sector engagement, and leveraging government support.

The session provided valuable insights into the intersection of climate change and non-communicable diseases, emphasizing the urgent need for multi-disciplinary approaches and concerted efforts to safeguard public health in the face of a changing climate. The outlined outcomes are designed to guide actionable steps over the next five years to address this critical issue.



## SESSION 10: PUBLIC HEALTH, PSYCHIATRY, AND SOCIO-ANTHROPOLOGY OF HEALTH

DATE: SEPTEMBER 26, 2023  
TIME: 10:00 A.M. – 10:30 A.M.  
VENUE: CICAD – DIAMNIADIO

**Super Moderator:**

Prof. Abdoulaye Samb, Chair of Physiology, UCAD, Senegal.

**Moderator:**

Prof. Amadou Tidiane Guiro, Senegal.

**Reporter:**

Prof. Marième Sougou, Senegal.

**Speakers:**

1. Prof. Aïda Sylla, Senegal.
2. Prof. Laurent Vidal, France.
3. Prof. Abdou Salam Fall, Senegal.

**Introduction:**

Prof. Abdoulaye Samb, as the Super Moderator, demonstrated exceptional skill in guiding and orchestrating the discussions throughout the session. He emphasized the need for a holistic approach, urging the integration of mental health considerations into the broader framework of NCD management. Additionally, his insightful inquiries encouraged the speakers to delve deeper into their respective topics, fostering a rich and comprehensive dialogue. Prof. Samb's facilitation ensured that the session unfolded with precision and depth, leaving the audience with a profound understanding of the intricate interplay between public health, psychiatry, and socio-anthropology of health.

**Speaker 1: Prof. Aïda Sylla.**

Topic: Psychiatry and socio-professional environment of non-communicable diseases.

Prof. Aïda Sylla addressed the critical relationship between mental health and Non-Communicable Diseases (NCDs). She emphasized the often-overlooked impact of mental health on NCDs, highlighting stress as a significant factor. The phases of stress response and its effects on metabolic health were discussed. Prof. Sylla called for increased involvement of psychiatrists in the long-term support of patients with NCDs. Additionally, she stressed the need to address lifestyle factors such as diet and substance consumption in mental health treatment.

**Key Points:**

- Understanding Non-Communicable Diseases (NCDs).
- Influence of socio-professional environment on NCDs.
- Importance of mental health inclusion in NCD management.

**Speaker 2: Prof. Laurent Vidal.**

Topic: Anthropological lessons for NCDs.

Prof. Laurent Vidal highlighted the expanded scope of medical anthropology, encompassing not only traditional medicine but also perceptions of one's body and diseases. He emphasized that NCDs, including cancer, obesity, diabetes, and chronic respiratory infections, are subjects of direct interest to anthropology. Prof. Vidal suggested three key areas of focus: the role of patient associations, re-evaluating the patient-health professional relationship, and revisiting national and international health priorities.

**Key Points:**

- Medical anthropology's extended scope.
- Anthropological relevance to NCDs.
- Areas of focus for anthropology in NCDs.

**Speaker 3: Prof. Abdou Salam Fall.**

Topic: Impacts of economic and social transformations on non-communicable diseases.

Prof. Abdou Salam Fall presented an interactionist theory, emphasizing the adaptation of cultural actors in the context of economic development. He discussed the emergence of a middle class and its positive impact on cultural creativity and economic growth. The digital revolution was identified as an accelerator, democratizing creativity and leading to a surge in economic activities in cultural sectors. Prof. Fall concluded by addressing the challenges and potential strategies for formalizing and developing cultural industries.

**Key Points:**

- Interactionist theory and cultural adaptation.
- Economic and social transformations' impact on NCDs.
- Digital revolution as an accelerator for cultural industries.

**Measurable Outcomes Over 5 Years:**

**Information Education Communication:** Increase public awareness of the link between mental health and NCDs by 30% through targeted campaigns and educational programs.

**Primary Prevention:** Implement community-based prevention programs targeting key NCD risk factors, aiming for a 20% reduction in their prevalence.

**Essential Medicines:** Ensure access to essential medications for NCD management, achieving a 15% increase in availability and affordability.

**Equipment And Technical Platform:** Upgrade healthcare facilities with necessary equipment for NCD diagnosis and management, resulting in a 25% improvement in service delivery.

**Training:** Provide specialized training for healthcare professionals in NCD care, leading to a 30% increase in their competency.

**Policy Advocacy - Legislative Institutional:** Advocate for policies promoting mental health inclusion in NCD management, resulting in the integration of mental health services into healthcare systems.

**Funding Opportunities:** Identify and secure additional funding sources for NCD programs, leading to a 40% increase in financial resources allocated to NCD initiatives.



**SESSION 11: REORIENTATION OF HEALTH SYSTEMS TOWARDS  
MAKING PRIMARY HEALTH CARE AS A RESILIENT  
FOUNDATION FOR UNIVERSAL HEALTH COVERAGE**

DATE: SEPTEMBER 26, 2023  
TIME: 11:00 A.M. – 11:30 A.M.  
VENUE: CICAD – DIAMNIADIO

**Super Moderator:**

Prof. Issa Wone, Assane Seck University of Ziguinchor, Senegal.

**Moderator:**

Dr. Malick Anne, Senegal.

**Reporter:**

Dr. Daouda Seck, Senegal.

**Speakers:**

1. Prof. Issa Wone, Professor of Public Health, President of the National Alliance against Noncommunicable Diseases, Assane Seck University of Ziguinchor, Senegal.
2. Mrs. Thiané Gueye Diaw, health economist, coordinator of the Health Economics Unit / MSAS, Senegal
3. Dr. Bakary Sambou, public health expert, former WHO official, Senegal

**Introduction:**

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**Speaker 1: Prof. Issa Wone.**

Topic: Challenges of NCDs in PHC.

**Research Lessons:**

- Anticipated rapid rise in NCD cases in low- and middle-income countries.
- Projected increase in the burden of NCDs on overall morbidity, particularly in these regions.
- Countries with the highest NCD incidence demonstrated the slowest growth in healthcare expenditure.
- The countries experiencing the swiftest NCD incidence had the lowest health system capacity indices for NCDs.

**Lessons from the Field:**

- Integration of care emerges as a powerful lever for PHC to ensure equity.
- Long-term planning sometimes undermines effectiveness.
- Collaborations and partnerships are crucial for achieving globalized objectives.
- Continuous evaluation is key – «what gets measured, gets done.»
- Standardization of care has historically prioritized communicable diseases.

**Challenges:**

- Emphasis on prevention across all stages – primordial, primary, secondary, and tertiary.
- Urgent need for accessible and affordable diagnostic systems for early intervention.
- Management of risk factors.
- Long-term management considerations.
- Ensuring access to medicines and care with an emphasis on pharmaceutical independence/interdependence.
- Patient education for self-care.
- Addressing social determinants of health.
- Integration of often overlooked areas, such as mental health.
- Embracing intersectoral collaboration with fields like health, agriculture, education, trade, and environment.
- Sustainable and domestic financing.
- Robust monitoring and evaluation.

**Principles of Action:**

- Discourage «Business As Usual» solutions.
- Embrace design thinking, including iteration, collaboration, adaptive technology, and palliative care.
- Focus on addressing real needs, exemplified by the «Garba phenomenon» in Côte d'Ivoire.
- Prioritize monitoring and evaluation through benchmarking and continuous improvement.

**Speaker 2: Mrs. Thiané Gueye Diaw.**

Topic: Mobilize more resources for financing NCDs.

**Context and Justification:** Non-communicable diseases (NCDs) accounted for 45% of deaths in Senegal in 2021. Urgent action was needed due to inadequate funding, with over a third of healthcare expenses allocated to NCDs, but less than 1% for prevention. The burden on households was substantial, making resource mobilization crucial.

NCDs represented 74% of global deaths, posing a major threat to achieving Sustainable Development Goals. The financial impact was significant, with estimated costs of 47 trillion dollars between 2010 and 2030 worldwide.

**Recommendations:**

- Advocate for increased budget allocation for prevention within the Ministry of Health.
- Define guidelines for ministries addressing NCD determinants.
- Develop and implement a national NCD prevention strategy.
- Establish a multisectoral roadmap involving various stakeholders.
- Expand universal health coverage to include NCDs.

**Speaker 3: Dr. Bakary Sambou.**

Topic: Lessons from the field.

**Importance:**

NCDs demand sustained care. Primary healthcare integration is pivotal, requiring:

- A minimum package of activities.
- Risk factor identification and referral.
- Psycho-social support and palliative care.
- Legal protection for community-level care providers.
- Renewed focus due to declining communicable disease impact.

**Support Needed:** Community health systems, despite significant strengthening, lag in NCD management. Opportunities lie in community participation, decentralization policies, and strategic plans.

**Challenges:**

- Insufficient local-level data.
- Limited financial resources.
- Lack of specific integration tools.
- Timidity in commitment.
- Inadequate consideration of social determinants.

**Conclusion:** Community initiatives have proven successful in deploying specific activities, yielding positive outcomes in disease management, malnutrition, and healthcare access.

### **Measurable Outcomes Over 5 Years:**

**Information Education Communication:** Over the next five years, a comprehensive Information Education Communication (IEC) strategy will be implemented. This will involve targeted campaigns to raise awareness about the prevention and management of Noncommunicable Diseases (NCDs) within communities. The strategy will employ various channels, including digital platforms, community workshops, and educational materials. Measurable outcomes will include increased knowledge levels regarding NCDs, improved health-seeking behavior, and enhanced community engagement in preventive measures.

**Primary Prevention:** The focus on primary prevention will lead to a significant reduction in the incidence of NCDs over the next five years. This will be achieved through robust screening programs, early intervention strategies, and health promotion activities. Specific metrics will include the percentage reduction in risk factors, such as tobacco use, unhealthy diet, and physical inactivity, as well as the increase in early detection rates for NCDs. Additionally, the impact of lifestyle modifications on overall community health will be closely monitored.

**Essential Medicines:** A key objective over the next five years is to ensure the availability and accessibility of essential medicines for the management of NCDs. This will involve strategic partnerships with pharmaceutical industries, regulatory authorities, and healthcare providers. Measurable outcomes will include the percentage increase in the availability of essential NCD medications, as well as improvements in affordability and equitable distribution. Additionally, adherence rates and patient satisfaction with prescribed treatments will be tracked.

**Equipment And Technical Platform:** Investments in state-of-the-art equipment and technical platforms will enhance the capacity to diagnose and manage NCDs effectively. This will lead to improved patient outcomes and a reduction in disease progression. Measurable outcomes will encompass the percentage increase in the availability and utilization of advanced diagnostic tools, such as imaging technologies and laboratory equipment. Additionally, the efficiency and accuracy of diagnostic processes will be assessed through relevant performance indicators.



**Training:** Comprehensive training programs for healthcare professionals, community health workers, and other stakeholders will be implemented to build capacity in NCD management. Measurable outcomes will include the percentage increase in the number of trained healthcare providers proficient in NCD diagnosis, treatment, and prevention strategies. Additionally, improvements in patient satisfaction with the quality of care provided by trained professionals will be assessed.

**Policy Advocacy - Legislative Institutional:** Advocacy efforts will focus on influencing policy changes and institutional reforms to better address NCDs within the healthcare system. Measurable outcomes will include the successful implementation of policy reforms aimed at strengthening NCD prevention and management. This will be assessed through indicators such as the adoption of NCD-specific guidelines, allocation of budgetary resources, and the establishment of specialized units within healthcare institutions.

**Funding Opportunities:** Efforts will be directed towards securing sustainable funding sources for NCD prevention and management programs. Measurable outcomes will include the percentage increase in financial resources allocated to NCD initiatives. This will be tracked through indicators such as budgetary allocations, grants secured from external sources, and the establishment of innovative financing.



## SESSION 12: NCD MOBILIZATION AND AWARENESS

DATE: SEPTEMBER 26, 2023  
TIME: 11:30 A.M. – 12:00 P.M.  
VENUE: CICAD – DIAMNIADIO

### **Super Moderator:**

Me Massokhna Kane, representative of the Consumers Association of Senegal.

### **Moderator:**

Me Massokhna Kane, Senegal.

### **Reporter:**

Dr. Magalie Kaya, Senegal.

### **Speakers:**

1. Me Massokhna Kane, representative of the Consumers Association of Senegal, Senegal.
2. Mr. Abdoul Wahab Diakite, Association of Consumers of Mali, Mali.
3. Mr. Massaer Seck, Secretary General of the Senegalese Association of Hemodialysis Patients and Renal Disease Patients (A.S.H.I.R)

### **Introduction:**

Professionally and adeptly, Super Moderator Me Massokhna Kane facilitated the session, ensuring a seamless flow of information and engaging discussions. Her extensive knowledge and articulate moderation skills were instrumental in guiding the speakers and maintaining the session's momentum. Me Massokhna Kane's exceptional conduct greatly enriched the session, leaving a lasting impression on all attendees.

**Speaker 1: Me Massokhna Kane.**

Topic: The current situation of early detection and access to care for patients with non-communicable diseases in Senegal and Africa.

Me Massokhna Kane, representative of the Consumers Association of Senegal, delivered a comprehensive overview of the current state of early detection and access to care for NCD patients in Senegal and Africa. She emphasized the urgent need for a shift towards prevention strategies and alternative care methods through a widespread mobilization campaign. The presentation highlighted key strategies for mobilization, focusing on planning, implementation, and continuous evaluation. The session emphasized the vital role of communication, employing various channels such as media campaigns, community assemblies, and interpersonal interactions. The involvement of multiple stakeholders, including states, local authorities, and various associations, was identified as crucial for the success of mobilization efforts. Additionally, Me Massokhna Kane emphasized the invaluable contribution of consumer associations in advocating for policies that promote prevention, including measures against dangerous products and foods, as well as the regulation of GMOs.

**Speaker 2: Mr. Abdoul Wahab Diakite.**

Topic: The problems to be solved to improve screening and facilitate access to care for patients with non-communicable diseases.

Mr. Abdoul Wahab Diakite, representing the Association of Consumers of Mali, shed light on the challenges impeding early screening and access to care for NCD patients. He outlined the legal foundations of consumer defense associations, emphasizing the pivotal role they play in safeguarding consumer rights. Mr. Diakite urged for the establishment of functional and state-subsidized patient associations and advocated for an integrated approach to tackle NCDs. He underscored the importance of strengthening healthcare infrastructure, increasing the availability of specialized centers, and enhancing the capacity of healthcare workers. Mr. Diakite also highlighted the urgent need for mass screening programs, development of innovative screening technologies, and community-based interventions to bridge gaps in NCD management.

**Speaker 3: Mr. Massaer Seck.**

Topic: Main needs and multisectoral actions.

Mr. Massaer Seck, Secretary General of the Senegalese Association of Hemodialysis Patients and Renal Disease Patients, provided a compelling account of the challenges faced in accessing care for NCDs. He stressed the critical need for greater awareness, functional patient associations, and effective government policies. Mr. Seck called for improvements in healthcare infrastructure, a focus on human resource development, and the expansion of international partnerships.

His presentation emphasized the importance of an integrated approach to screening, incorporating community interventions, continuous medical follow-up, and the utilization of electronic medical records. Mr. Seck highlighted the significance of research and innovation, underscoring the need for collaboration and knowledge-sharing among nations.

### **Measurable Outcomes Over 5 Years:**

**Information Education Communication:** Implement targeted information campaigns reaching 80% of the population, leading to a 30% increase in NCD awareness.

**Primary Prevention:** Enact legislation reducing the sale and advertising of harmful products, resulting in a 20% decrease in NCD incidence.

**Essential Medicines:** Ensure availability and affordability of essential NCD medicines, achieving a 50% reduction in out-of-pocket expenses for patients.

**Equipment And Technical Platform:** Expand specialized healthcare facilities, guaranteeing access to diagnosis and treatment for 90% of NCD patients within a 2-hour radius.

**Training:** Train and deploy an additional 500 healthcare professionals specialized in NCD management, achieving a 30% increase in timely diagnoses.

**Policy Advocacy - Legislative Institutional:** Advocate for the adoption of comprehensive NCD policies in at least 80% of participating countries, leading to improved patient outcomes.

**Funding Opportunities:** Secure partnerships with philanthropic organizations, resulting in a 40% increase in funding dedicated to NCD prevention and management initiatives.



## SESSION 13: RESEARCH IN NCDs AROUND THE WORLD

Date: SEPTEMBER 26, 2023

Time: 12:00 p.m. – 12:30 p.m.

Venue: CICAD – DIAMNIADIO, DAKAR, SENEGAL.

### **Super Moderator:**

Dr. Bamba Gaye, African Research Network for Non-communicable Diseases (ARNcd).

### **Moderator:**

Dr. Lilian Sattler, University of Georgia.

### **Reporter:**

Prof. David Kitara Lagoro, Gulu University, Uganda

### **Speakers:**

1. Prof. Tiffany L Gary-Webb, University of Pittsburgh.
2. Prof. Elizabeth Loder (Harvard/BMJ), UK.
3. Prof. Tiffany Powell-Wiley, (NIH/NHLBI), USA.

### **Introduction:**

Dr. Bamba Gaye, as the Super Moderator, demonstrated exceptional insight and adeptness in guiding the session. His extensive knowledge and expertise in NCD research were evident in his skillful facilitation of discussions. Dr. Gaye's insightful contributions significantly enriched the session, ensuring attendees gained valuable perspectives on research strategies for NCD control.

**Speaker 1: Prof. Tiffany L Gary-Webb.**

Topic: Strategies for NCD prevention and management in the US.

Prof. Tiffany L. Gary-Webb provided a comprehensive overview of the Social and Structural Determinants of Non-Communicable Diseases (NCDs). She delved into the multifaceted landscape of NCD determinants, focusing on critical factors influencing health outcomes. This finding encompassed neighborhoods and environments, housing conditions, educational access, healthcare coverage, and the pervasive impact of discrimination. The World Health Organization's definition of social determinants of health was highlighted, emphasizing how broader societal forces play a pivotal role in shaping daily living conditions and, consequently, health outcomes.

Prof. Gary-Webb's presentation further elaborated on the conceptual framework that underpins the interplay between neighborhoods, housing stability, and health. She emphasized that housing stability is a critical indicator of economic well-being and is central to addressing various social determinants of health.

In this context, she elucidated how housing instability can hinder preventive services and interventions. Moreover, Prof. Gary-Webb underscored the importance of interventions in areas like built environments, toxic environmental exposures, and food accessibility in mitigating risks associated with NCDs. Her presentation concluded with a compelling call to action for research and intervention in various pathways toward cardiovascular disease development and progression.

**Speaker 2: Prof. Elizabeth Loder.**

Topic: From Lab to Action: Fast-tracking research strategies for controlling non-communicable diseases globally.

Prof. Elizabeth Loder presented invaluable insights on the urgency of fast-tracking research strategies for controlling non-communicable diseases on a global scale. She initiated the session by stressing the cruciality of formulating research questions that are not only original but also profoundly important and, crucially, answerable. Her presentation outlined the fundamental steps involved in preparing a manuscript for publication.

This action encompassed aspects such as acquiring ethics approval, adhering to reporting guidelines, and considering the relevance of reporting standards like CONSORT, PRISMA, MOOSE, STARDs, STROBE, GRADE, and CHEERS.

Prof. Loder further delved into the meticulous journal selection process, highlighting pivotal considerations such as the target audience, accessibility, and publication timelines. She advocated for a pragmatic approach, urging researchers to align their manuscripts with journals that offer the best fit. This action aligns with factors like rejection rates, indexing, time to acceptance and publication, impact factor, and acceptance of industry sponsorship or medical writing assistance. Prof. Loder concluded her presentation by emphasizing the significance of truth, transparency, and engaging writing that captivates readers.

**Speaker 3: Prof. Tiffany Powell-Wiley.**

Topic: Breakthroughs: Advancing research for effective non-communicable disease control worldwide.

Prof. Tiffany Powell-Wiley embarked on a compelling narrative, addressing the imperative of advancing research for effective non-communicable disease control on a global scale. She commenced by underscoring the sobering reality of the escalating mortality attributed to NCDs. Drawing on data, she illustrated how Disability-Adjusted Life Years (DALYs) attributable to non-communicable diseases now mirror those for communicable, maternal, neonatal, and nutritional diseases combined. Prof. Powell-Wiley further highlighted a striking correlation between more significant neighborhood deprivation of resources and heightened cardiovascular mortality, underscoring the profound impact of social determinants of health on cardiovascular outcomes.

The presentation delved into a transformative community-engaged research initiative, exemplified by the Washington DC Cardiovascular Health and Obesity Collaborative (DC CHOC). Prof. Powell-Wiley elucidated how this collaborative endeavor was fortified by a dynamic community advisory board comprising a multidisciplinary group of church and community leaders. This board played an instrumental role in advising on the design and implementation of clinical protocols, amplifying the resonance and relevance of research within the community.

Prof. Powell-Wiley also outlined groundbreaking research endeavors delving into the intricate relationships between physical activity, immune cell function, and differentially expressed genes in immune cells. The session spotlighted how epigenetic modifications of immune cells constitute a critical area of exploration. Additionally,



the presentation unveiled the pivotal role of the NHLBI HOPE CENTER as a community research hub embedded in an affordable housing development in Washington, DC, signaling a paradigm shift in conducting clinical research.

The presentation culminated with an overview of the CARDIOVASCULAR H3AFRICA INNOVATION RESOURCE (CHAIR), the largest harmonized resource of genomic, environmental, and phenotypic data related to cardiovascular diseases, culled from participants across the African Continent. Prof. Powell-Wiley's comprehensive session underscored the transformative potential of community-engaged research and international collaboration in the pursuit of effective non-communicable disease control on a global scale.

### **Measurable Outcomes Over 5 Years:**

**Information Education Communication:** Develop targeted information campaigns reaching 80% of the population, resulting in a 30% increase in NCD awareness.

**Primary Prevention:** Implement legislative measures leading to a 20% reduction in NCD incidence by controlling risk factors.

**Essential Medicines:** Ensure accessibility and affordability of essential NCD medications, achieving a 50% reduction in out-of-pocket expenses for patients.

**Equipment And Technical Platform:** Expand specialized healthcare facilities, guaranteeing access to diagnosis and treatment for 90% of NCD patients within a 2-hour radius.

**Training:** Train and deploy an additional 500 healthcare professionals specialized in NCD management, achieving a 30% increase in timely diagnoses.

**Policy Advocacy - Legislative Institutional:** Advocate for adopting comprehensive NCD policies in at least 80% of participating countries, improving patient outcomes.

**Funding Opportunities:** Secure partnerships with philanthropic organizations, resulting in a 40% increase in funding dedicated to NCD prevention and management initiatives.



## SESSION 14: NCD RESEARCH IN AFRICA

DATE: SEPTEMBER 26, 2023  
TIME: 12:30 P.M. – 01:30 P.M.  
VENUE: CICAD – DIAMNIADIO

### **Super Moderator:**

Dr. Samba Cor Sarr, Head of Research Division at the Ministry of Health and Social Action.

### **Moderator:**

Prof. Maimouna Ndour Mbaye, Head of Internal Medicine Department and Director of the Marc Sankale National Diabetes Center, Abass Ndao Hospital.

### **Reporter:**

Dr. Elisabeth Liyong Diallo, Director of Likak Research, Senegal.

### **Speakers:**

1. Dr. Samba Cor Sarr, Head of Research Division at the Ministry of Health and Social Action.
2. Dr. Abdoulaye Diallo, Medical Epidemiologist, Head of the Research and Innovation Office of the Ministry of Health.
3. Dr. Elisabeth Liyong Diallo, Director of Likak Research, Senegal.
4. Dr. Bamba Gaye, African Research Network on Non-communicable Diseases (ARNcd).

### **Introduction:**

Session 14 of the International Conference on the NCD Epidemic focused on the state of research in Africa by Dr Samba Cor Sarr from Senegal and reported by Dr Elisabeth Alice Liyong Diallo from the same country . The session moderated by Professor Maimouna Mbaye from the Marc Sankalé Anti Diabetic Center in Dakar provided an update on NCD research in Africa, in Senegal, the requirements of clinical trial sites and the contribution of the African research network in the development of the fight against NCDs.

**Speaker 1: Dr. Samba Cor Sarr.**

Topic: State of play (Priorities, limits and global solutions) for high-level operational research on Non-communicable diseases (NCDs) in Africa.

Dr. Samba Cor Sarr from Senegal presented the current situation of research and NCDs in Africa. He described Africa's place in research and highlighted the factors limiting the development of the sector. Based on strategic and scientific literature, it highlighted the strengths, weaknesses, challenges and perspectives for NCD research oriented to the needs of the continent.

**Speaker 2: Dr. Abdoulaye Diallo, Medical Epidemiologist.**

Topic: Research on NCDs in Senegal from 2018 to 2022.

Dr Abdoulaye Diallo addressed the place of NCDs in research in Senegal. Through the database of research protocols from 2018 to 2022, it showed the themes addressed by the research, the predominance of cancer and the amount of financial resources mobilized. Considering all the areas of research invested by researchers, MNTs remain poorly funded by the national private sector and the State.

**Speaker 3: Dr. Elisabeth Liyong Diallo.**

Topic: Research requirements in clinical trials – the case of clinical research sites.

Dr. Elisabeth Alice Liyong Diallo presented the main criteria for the validity of sites that must host clinical trials. Her presentation highlighted the importance of collaboration between different stakeholders, including pharmaceutical regulatory bodies, research ethics committees, health authorities and the public. Examples of good practices were shared, highlighting the successes achieved in certain African countries.

**Speaker 4: Dr. Bamba Gaye.**

Topic: 20 years of research within the African Research Network (ARNcd).

Dr Bamba Gaye from the African Research Network shared the scientific production of the said network which has contributed to improving the fight against NCDs in Africa. He highlighted the efforts made by the said network to boost research on NCDs by developing high-level advocacy through a "Quick Win" approach. This made it possible to obtain significant support from the State of Senegal and international cooperation. With the granting of 5,000 square meters of land in Diamniadio by the State of Senegal and the funding agreements from technical and financial partners, we can be optimistic about boosting research on NCDs in Africa.

**Measurable Outcomes Over 5 Years**

Information Education Communication: : Over the next five years, a targeted approach to Information Education Communication (IEC) will be implemented. This strategy aims to disseminate critical information regarding Non-Communicable Diseases

(NCDs) research in Africa. This includes creating accessible materials, organizing awareness campaigns, and utilizing digital platforms to ensure that the latest findings and developments are widely available to healthcare professionals and the general public.

**Primary Prevention:** Efforts in the coming years will be concentrated on primary prevention strategies, with a focus on addressing the modifiable risk factors associated with NCDs. Initiatives will center around controlling hypertension, promoting healthy lifestyles through nutrition and physical activity, and implementing community-wide educational programs. These endeavors aim to empower individuals to take proactive steps in preventing NCDs.

**Essential Medicines:** Ensuring the availability and accessibility of essential medicines will remain a cornerstone of NCDs research. This includes thrombolytic agents for acute ischemic strokes, antihypertensive drugs for effective blood pressure control, and other vital medications to manage comorbidities. Efforts will be directed towards making these essential medicines both affordable and widely accessible.

**Equipment And Technical Platform:** Over the next five years, a concerted effort will be made to establish and maintain state-of-the-art technical platforms. This includes the provision of cutting-edge imaging facilities for accurate diagnosis, specialized equipment for interventions such as thrombectomy, and the integration of telemedicine capabilities. These measures will ensure timely and accurate interventions, especially in underserved areas.

**Training:** Comprehensive training programs for healthcare professionals will be a focal point in the coming years. This includes continuous medical education on the latest treatment modalities, specialized training for staff in stroke units, and community-based training to raise awareness about recognizing early signs of strokes and the appropriate actions to take.

**Policy Advocacy - Legislative Institutional:** Advocacy efforts will be directed towards policy reforms that support NCDs research and prevention. This involves advocating for the allocation of resources for research and development, implementing regulations to maintain quality standards in stroke units, and fostering collaborations between governmental and non-governmental entities. These initiatives will create a supportive environment for NCDs research.

**Funding Opportunities:** In the upcoming years, a concerted effort will be made to identify and leverage various funding opportunities for NCDs research. This will involve exploring partnerships with governmental agencies, international organizations, philanthropic foundations, and private sector entities. By diversifying funding sources, we aim to ensure sustained support for critical research initiatives in the fight against NCDs.









# Contacts

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