Improving lives through community-based care [1]

Access to Healthcare [2]

Every year, over 10 million people around the world die of hypertension – a condition often referred to as the “silent killer” because of its lack of symptoms. When left unaddressed, it can lead to heart disease, stroke or kidney failure.

Hypertension control rates vary significantly between countries. For example, in Ghana, just 4%¹ of people with dangerously high blood pressure have their condition controlled, compared to 53%² in the US.

The rise of noncommunicable diseases (NCDs) like hypertension is especially challenging for low- and middle-income countries, where many healthcare systems are overstretched and often set up primarily to fight infectious diseases.
Evelyn is a cardiovascular nurse working in rural Ghana, where high-fat diets, smoking and sedentary lifestyles contribute to high blood pressure. “There is diabetes alongside strokes, [and] sudden deaths due to heart attacks and kidney failure. These are all too common in Ghana,” she says. (Dr. Alex Kumar/Novartis Foundation)

In 2015, the Novartis Foundation and partners launched an innovative approach to managing hypertension in a peri-urban region of Ghana. Working with the Ghana Health Service, the London School of Hygiene & Tropical Medicine, and FHI 360, the community-based hypertension management project (ComHIP) tested a new model to detect, diagnose and treat hypertension as early as possible by enabling local shops and businesses to offer blood pressure screening.
Dorothy is a licensed chemical seller. The ComHIP program trained her to test customers for high blood pressure, picking up new cases among people who may not be able to access standard medical services and therefore would have gone undiagnosed. (Dr. Alex Kumar/Novartis Foundation)

Digital technology connected people who screened positive for hypertension at the new screening points with healthcare workers. SMS messages helped patients adhere to medication, diet and exercise regimens – ultimately saving lives.

This demonstrates how simple digital health tools that use existing technology can make an enormous difference to people’s health.
Bernard, a physician's assistant at St. Martin's Hospital in Ghana, uses ComHIP’s digital platform to review the records of people referred to him with high blood pressure. “It’s a rush to find [people] in time to prevent a stroke,” he says. (Dr. Alex Kumar/Novartis Foundation)

The ComHIP results show how successfully community-based care can address chronic conditions like hypertension. For people enrolled in the program for over a year, average hypertension control rates rose from 36% to 71%, with an average reduction of 12 mm Hg in systolic blood pressure and 7 mm Hg in diastolic blood pressure.

ComHIP made it easier for patients to access care, removing the need to travel to hospitals or clinics. This saves time and money for patients, and reduces pressure on overstretched healthcare systems.
Veronica was diagnosed with high blood pressure through ComHIP, and her condition is now under control. While visiting St. Martin’s Hospital, she told us about one of her younger neighbors who became disabled after a stroke caused by high blood pressure. No one knew about her condition until it was too late.

(Dr. Alex Kumar/Novartis Foundation)

The ComHIP results demonstrate the huge potential of community-based care and suggest that this method of bringing care closer to where people live, work and shop could save millions of lives if replicated in other countries and for other NCDs.


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