



**WORLD HEART  
FEDERATION®**



# **Speaking with one voice '25 by 25' - Is that achievable for Africa**

**Karen Sliwa, President-Elect, WHF**

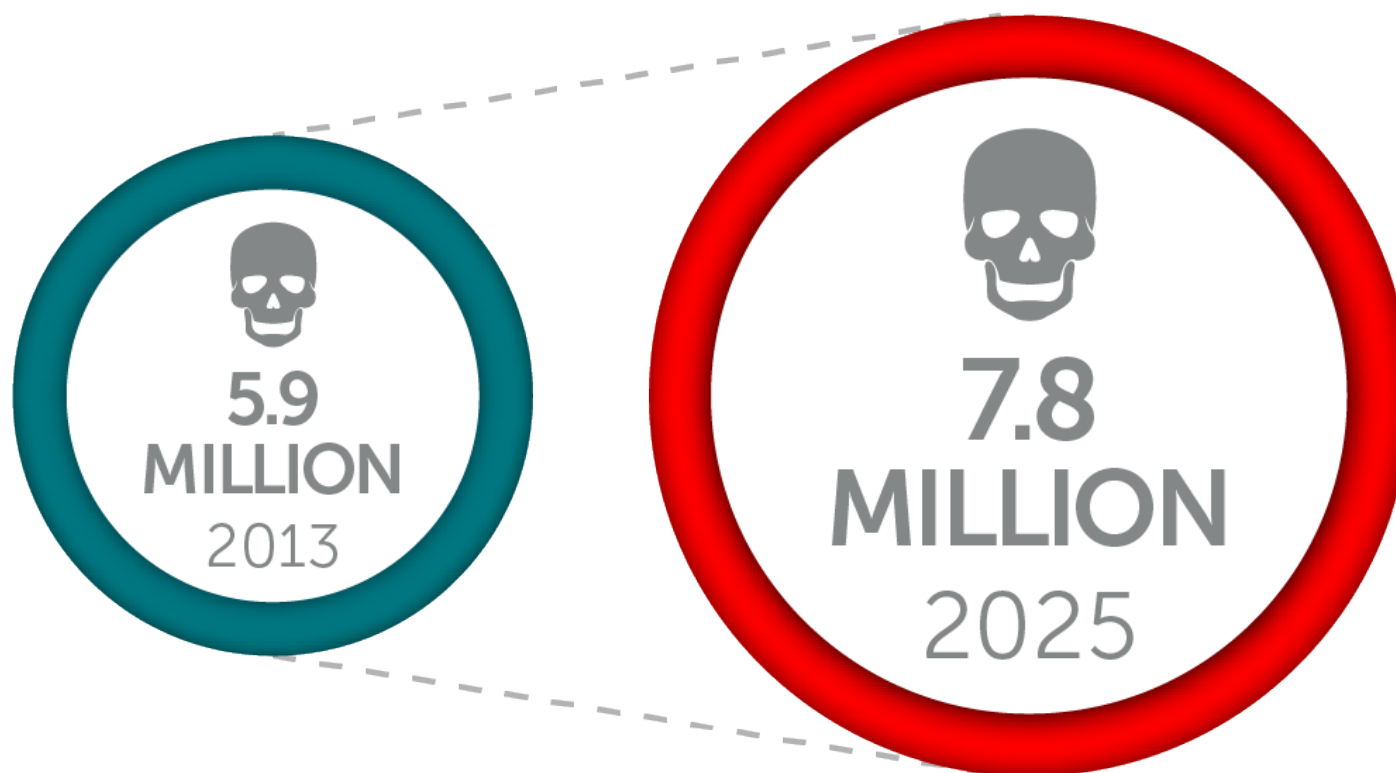
Khartoum, Sudan

# The Issue

- **35 million people** have an acute coronary or cerebrovascular per annum
- **17.3 million deaths** a year are due to cardiovascular disease (CVD).
- **Raised blood pressure** is thought to account for 45% of all heart disease deaths & 51% of stroke related deaths.
- **At least 80% of premature deaths** from heart disease and stroke could be avoided if the main modifiable risk factors of tobacco use, unhealthy diet and physical activity are controlled.

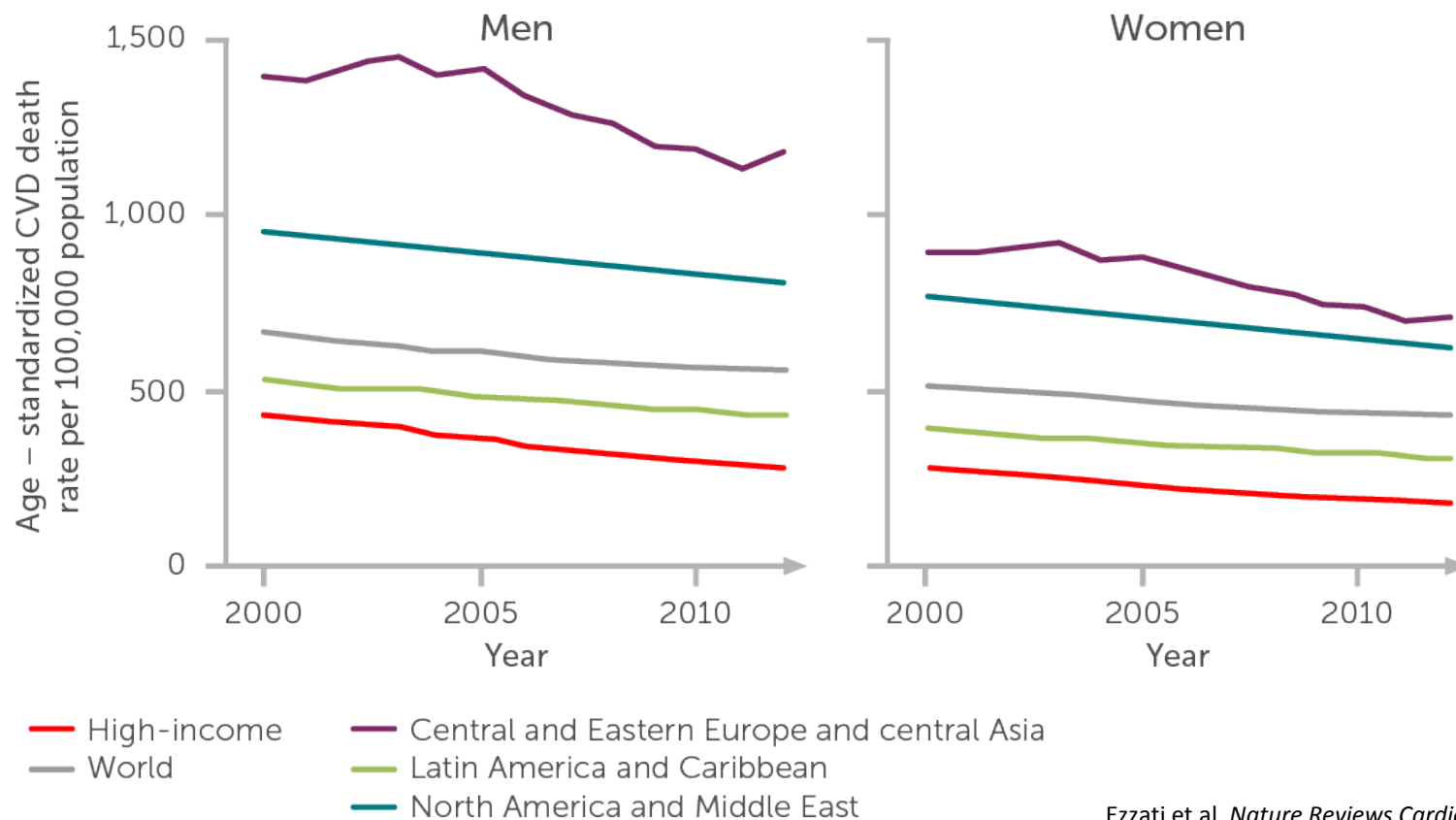


# Premature mortality ( <65 years)



Roth et al. *Circulation*, Oct 2015.

# Trends in cardiovascular mortality



Ezzati et al. *Nature Reviews Cardiology* 2015

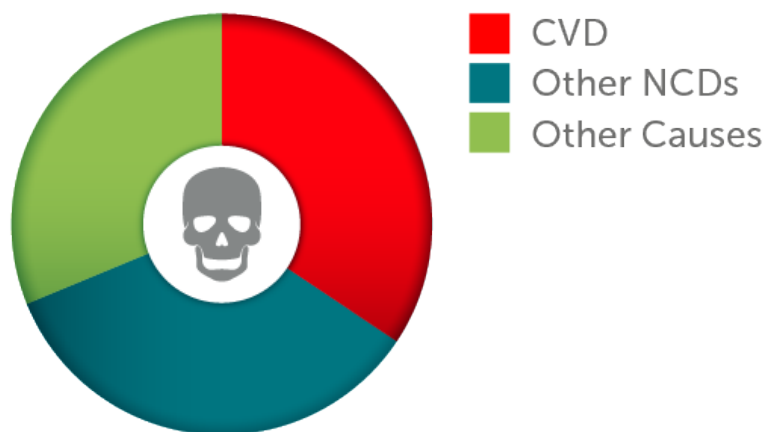
# The Global CVD Burden

**Low- and middle-income countries (LMICs)** are most affected  
– 80% of CVD deaths take place in LMICs

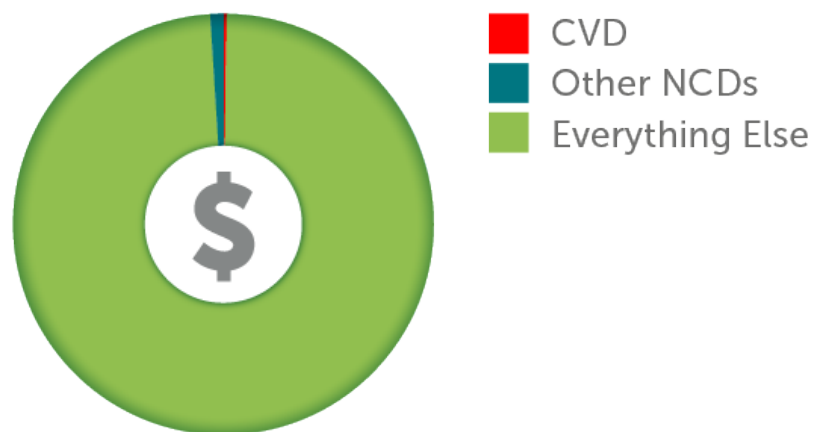


# The CVD Priority Gap & Official Development Assistance (ODA)

NCD MORTALITY VS OTHER



ODA FUNDING



Source: Global Burden of Disease Study 2010 (GBD 2010)

While CVD has become the leading cause of death worldwide, funding and policies especially in LMICs have not caught up.

# Achieving 25by25 together



- In **September 2011**, the United Nations launched a Political Declaration which led to a common goal of **25 percent reduction** in premature mortality from CVD and other non-communicable diseases by 2025.
- **This declaration represents a tremendous opportunity** and challenge for the medical profession, multinational corporations, advocacy groups, governments and other stakeholders



## Vision of WHF

The **vision** of the World Heart Federation is to work with its members and the larger CV health community to hasten the day when cardiovascular health is no longer a privilege but a right, and when cardiovascular disease (CVD) is transformed from a life threatening disease to one that can be prevented and managed in all populations.

WHF 2025 GOAL

PREMATURE  
MORTALITY FROM  
CARDIOVASCULAR  
DISEASE

25%  
REDUCTION





# Unique position of the WHF

1. WHF is the lead partner to WHO and other global agencies for cardiovascular disease.
2. WHF is the only global organization representing the entire cardiovascular health community in high, medium and low income countries.
3. WHF has a unique capacity to align its members for a coordinated response to the WHO NCD target of 25x25 through action, common messaging and metrics and coordinated strategies.
4. Convenes and shares best practice across global membership.

# Goals & Objectives



“A **25%** relative reduction in premature mortality from NCDs (including CVD, cancer, lung disease, diabetes) by **2025**.”

- *WHO Global Action Plan on NCDs 2013-2020*)



“By **2025**, to drive the WHO target for NCD mortality reduction by reducing premature deaths from CVD by at least **25%**”

- *World Heart Federation’s ‘Vision’*



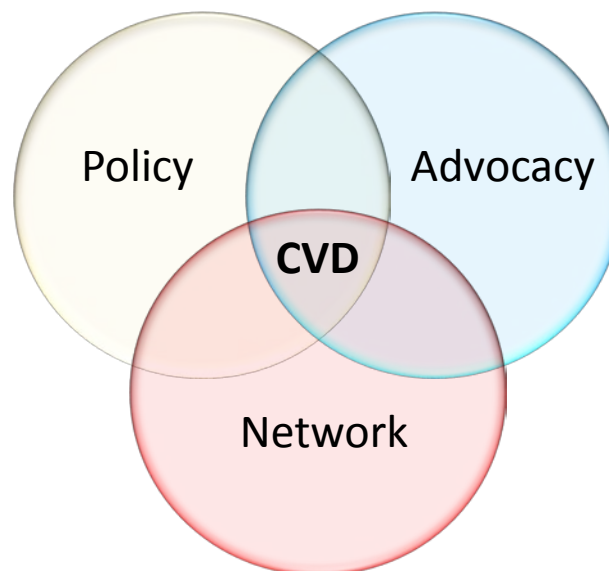
“By **2030**, reduce by **one third** premature mortality from NCDs through prevention and treatment and promote mental health and well-being”

- *Target 3.4 of the SDGs*

# What We Do

**Policy + Advocacy x Network = CVD elevated on global agenda**

- **Policy:** recommendations, legislation and other mechanisms used to catalyse change
- **Advocacy:** raising awareness and political will among key decision-makers
- **Network:** WHO, UN, politicians, civil society, WHF members and more!
- Why?
  - ✓ Greater awareness
  - ✓ Stronger policies
  - ✓ Unlocked resources
  - ✓ Multisectoral cooperation
  - ✓ Sustainability and accountability
  - ✓ Better health outcomes



# Global Policy

- 1) Engaging with official WHO processes and workplans:  
*e.g. **Rheumatic Heart Disease Resolution***
- 2) Inputting into other UN Body and Civil Society consultations:
- 3) Analysis of the global development policy environment



# Reed more: Resources & Materials





# Do we need a better case for Africa?



2nd most populous continent  
1 billion or...

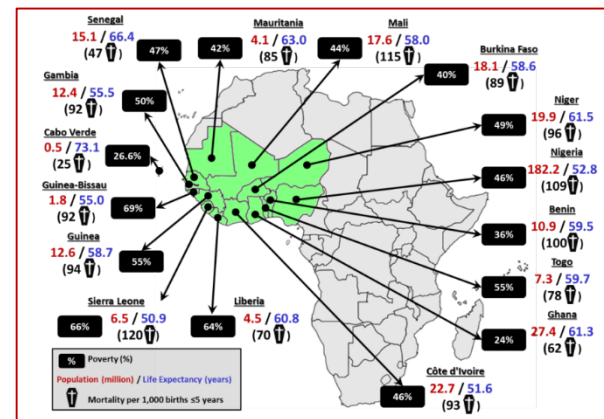
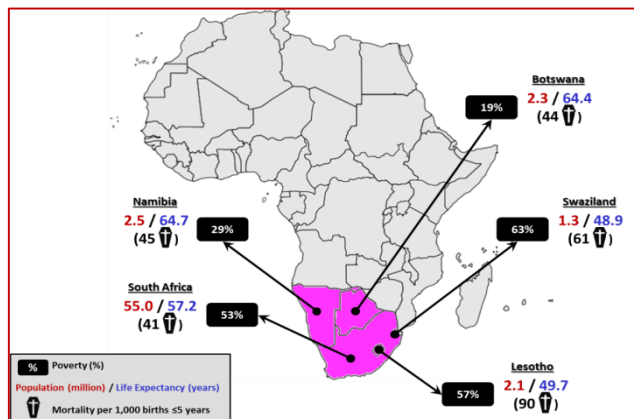
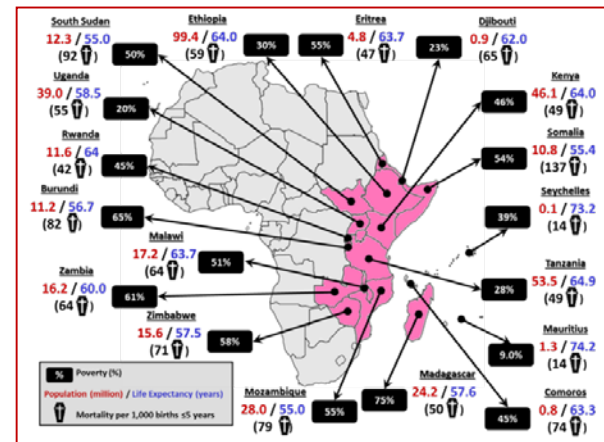
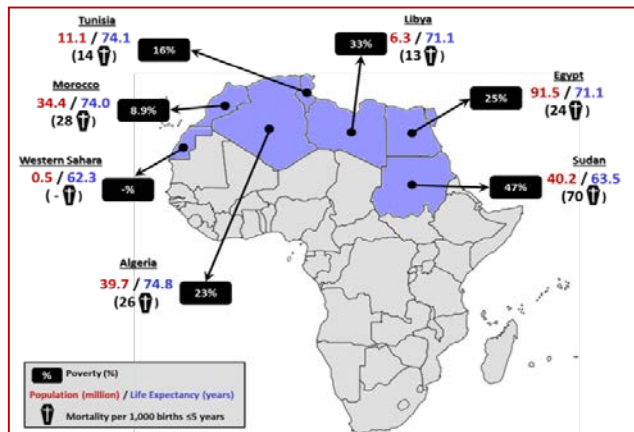
16%



# Heterogeneity in key socio-demographic parameters in Africa

## Few countries have universal health care

Keates AK, Mocumbi AO, Ntsekhe M, Sliwa K, Stewart S. Cardiovascular Disease in Africa: *Nature Review Cardiology*; 2017





# Features of Patients with Acute Decompensated Heart Failure in Registries in the ADHERE (United States), EHFS II (Europe) and THESUS-HF (sub-Saharan Africa) Registries

*Sliwa K & Stewart S. Heart Failure in the Developing World; D. Mann  
- HF companion to Braunwald's Cardiology Textbook, 2015*

	ADHERE REGISTRY (n = 105,388)	ADHERE—AP (n = 10,171)	EHFS II REGISTRY (n = 3580)	THESUS-HF REGISTRY (n = 1006)*
Male, %	48	57	61	49
<b>Mean age, years</b>	72	66	70	<b>52</b>
Hypertension	73	64	63	45
<b>Coronary artery disease, %</b>	<b>57</b>	<b>50</b>	<b>54</b>	<b>7</b>
<b>Diabetes, %</b>	<b>44</b>	<b>45</b>	<b>33</b>	<b>11</b>
Atrial fibrillation, %	31	24	39	18
Anemia, %	NA	NA	15	8
<b>Rheumatic HD</b>	NA	NA	NA	<b>16%</b>

# Do we need a better case for Africa?

1. Primary prevention ( physical activity, obesity)

2. WHF CVD Roadmap topics

Raised blood pressure

Tobacco control

Cholesterol

*RHD (through RHD Action)*

Secondary prevention

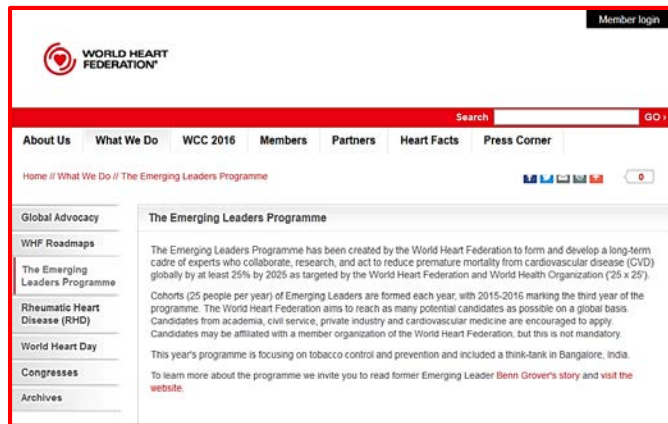
Heart failure (*in preparation*)

3. Access to affordable good quality CV care

4. Migrant Health

5. Women's and Adolescents' Health





Salim Yusuf. MD (Bangalore), DPhil (Oxford), MRCP  
World Heart Federation past president 2014-2016



[www.world-heart-federation.org](http://www.world-heart-federation.org)

# Objectives for the Summit

- 1) How can policies be better implemented in Africa
- 2) How to improve access to CV medicine and integrative care
- 3) Khartoum Action Plan to improve CV health & care in Africa