

Improving the diagnosis and treatment of CVD, diabetes and related conditions through primary healthcare in Bangladesh

PROJECT BRIEF

This study will develop a service delivery model for diagnosing and treating CVD and diabetes. It focuses on establishing a systematic screening, treatment and referral process in primary health care facilities in Bangladesh.

Background

Cardiovascular disease (CVD) and diabetes are prevalent in Bangladesh. Among CVDs, hypertension and ischemic heart disease are the leading causes of morbidity and mortality in the country. However, the majority of patients with these diseases go undetected, with only a small percentage of CVD-diabetes patients being cared for according to the internationally recommended guidelines. These patients are mostly in specialist clinics such as BIRDEM health centres, Heart Foundation hospitals, and in other privately managed specialist centres/clinics, which accounts for the high care costs of CVDs and non-communicable diseases (NCDs). For the socio-economically disadvantaged, the out-of-pocket expenses for CVDs and NCDs can be catastrophic.

Study aim

To develop and evaluate a service delivery model for delivering quality care to CVD and diabetes patients at primary health care (PHC) facilities.

Objectives

1. Establish a systematic screening and care process to enhance early diagnosis of CVD and diabetes in selected PHC facilities;
2. Improve treatment and follow-up of CVD and diabetes through enabled primary care arrangements;
3. Develop and adapt case management guidelines, tools and training modules;
4. Build capacity of doctors, nurses and paramedics at the selected PHC facilities for early diagnosis and effective treatment of CVD and diabetes; and
5. Test and evaluate guidelines and tools for further scale up.



A lab technician in Bangladesh

Researchers:

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In-country partners:

- Directorate General of Health Services, Ministry of Health and Family Welfare
- BIRDEM

Project setting:

- Comilla

Research themes addressed:

- Primary care
- Quality of care
- Urban health care

The study

This study will be carried out in 8 urban health centres with referral links to and from BIRDEM health centres. Patient cohorts, once registered at the participating facilities, will be assessed for their plasma glucose and blood pressure levels. Other outcome measures include assessing life-style modification, and drug side effects and/or disease complications. Referrals to district hospitals and BIRDEM health centres will be collected and assessed.

Guidelines and tools:

All guidelines and tools will be appropriate for low-resource settings and will include:

- A Case Management Desk Guide for improving quality of care of CVD and diabetes management (includes hypertension, hyper-cholesterol and lifestyle modifications)
- Training modules for doctors, nurses, and paramedic staff (including a facilitators' guide)
- Referral forms
- Behaviour change/communication materials for patient/community education
- Recording and reporting forms and tools, such as card and registers
- Guidelines for monitoring and follow-up of CVD and diabetes patients

Sharing and scaling up the research findings

Components of the service delivery model will be presented and discussed in at a series of policy discussions and dissemination workshops involving high level policy makers, researchers, programme managers, and national and international agencies.

ARK Foundation will work with BIRDEM and the Directorate General of Health Services to scale up the service delivery model at PHC facilities where appropriate.

For more information about this project, email Salma Akter at salmaakter@gmail.com

About COMDIS-HSD

[COMDIS-HSD](#) is a Research Programme Consortium funded until 2016 by UKaid.

Working with partner NGOs in [7 countries](#), we provide evidence to policy makers in low-middle income countries to help them improve their health service delivery processes.

We aim to improve demand for, access to, and quality of prevention and care for common diseases, especially in underserved populations.

By sharing our evidence-based research findings, we ensure changes to health service delivery policy and practice in low-middle income countries and beyond.

Find out more about our work by visiting our [website](#), [YouTube channel](#) and [Flickr site](#).

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