

Elsevier and Doctors Without Borders partner to help tackle Africa's health challenges

Elsevier, a world-leading provider of scientific, technical and medical information products and services, and Doctors Without Borders/Médecins Sans Frontières (MSF), have agreed to cooperate in fighting the root causes of some of Africa's most vexing health challenges, including diarrhoea and infectious diseases, which leave millions of people dying or severely diminished every year.

As part of the agreement, the Elsevier Foundation has awarded a \$300 000 partnership grant to Epicentre's Niger Research Centre which was founded in 2009 to produce high-quality and high-impact studies aimed at transforming medical practice.

The African-led research centre focuses on adapted, concrete responses to diarrhoeal diseases, malnutrition and malaria. The three-year partnership will support the development of Epicentre's medical and scientific staff training and mentoring and aims to boost the Centre's overall visibility through a 'Scientific Day' Conference to be held in Niger.

The joint Collaboration Agreement represents a cooperative effort between four organisations: Doctors without Borders, Epicentre (Doctors without Borders' research and training arm), the Elsevier Foundation (Elsevier's corporate charity focused on global health and research capacity building) and Elsevier, which will provide courtesy access to products and services such as ScienceDirect, Scopus, Clinical Key, Embase and Mendeley.

Youngsuk 'YS' Chi, President of the Elsevier Foundation, said: 'This work resonates well with the Elsevier Foundation's focus on supporting the United Nations' Sustainable Development Goals through the development of science, technology and medicine in Africa and across the world.'

Jérôme Oberreit, Secretary General of MSF, said: 'Elsevier's support of our work goes beyond financial support. It will allow our medical teams to have access to scientific, technical and medical information that is essential to improve the quality of humanitarian healthcare MSF provides to the most vulnerable populations in the world.'



Africa Health Federation takes off in Nairobi: A new Africa-wide voice promoting private-sector participation in the expansion of Africa's health footprint has been inaugurated. The Africa Health Federation (AHF) includes representatives of five regions of Africa (Northern, East, West, Central and Southern) and was officially launched at the Africa Health Business Symposium in Nairobi in early October.

The Association intends to work with governments and corporates to develop the healthcare business, and to strengthen health systems as well as developing quality and uniform standards of delivery across the continent.

Pictured left to right: Dr. Ramesh Bholla (Southern Africa), Dr. Ardo Boubou Ba (Western Africa), Dr. Amit N. Thakker (Chairman, AHF and Africa Health Business), H.E. Dr. Mustapha Siddiqi Kaloko (Commissioner of Social Services, African Union), Dr. Ian Clarke (Eastern Africa), Dr. Jean Daniel Ovaga (Central Africa), Dr. Hatem El Gabaly (Northern Africa).

Taxing sugary drinks could curb global epidemic of obesity and diabetes

The World Health Organization (WHO) have launched a new report that says taxing sugary drinks can yield major health benefits, such as reducing obesity, type 2 diabetes and tooth decay.

'If governments tax products like sugary drinks, they can reduce suffering and save lives' says Dr. Douglas Bettcher, Director of WHO's Department for the Prevention of Non-Communicable Diseases (NCDs). 'They can also cut healthcare costs and increase revenues to invest in health services.'

WHO says reduced consumption would mean lower intake of 'free sugars' and calories overall, and improved nutrition.

'Consumption of free sugars, including products like sugary drinks, is a major factor in the global increase of people suffering from obesity and diabetes,' emphasised Dr. Bettcher.

Between 1980 and 2014, global prevalence of obesity more than doubled with greater than half a billion adults – 11% of men and 15% of

women – being classified as obese. In 2014, more than one in three, or 39% of adults worldwide aged 18 and older, were overweight.

'Largely due to unhealthy diet, more than 600 million people overweight, including some 42 million children under the age of five,' Dr. Francesco Branca, Director of the agency's Department of Nutrition for Health and Development said. Almost half of these children lived in Asia and a quarter in Africa.

WHO added that the number of people living with diabetes has also been on the rise, from 108 million in 1980 to 422 million in 2014. Moreover, the disease was directly responsible for 1.5 million deaths in 2012 alone.

'We are recommending that sugar intake is reduced to 10% of energy or even five per cent,' said Dr. Branca, emphasising that a key factor in keeping those numbers dangerously high is the ease of availability of sugary drinks in some parts of the world.

Addressing maternal health and family planning in Nigeria

The Nigerian Minister of Health, Prof. Isaac Adewole, has said that maternal health can not be addressed without tackling the issue of family planning.

The Minister stated this when he received the report 'Maternal Health in Nigeria, A Situation Report', which was presented by Chima O. Izugbara, Senior Research Scientist on Population Dynamics and Reproductive Health, African Population and Health Research Centre.

Adewole said that promotion of family planning and child spacing are key ingredients to reducing morbidity and maternal mortality. He said: 'We need to look at education, address poverty and increase access to healthcare.'

Izugbara stressed that the plight of women in Nigeria would vastly impinge on the achievement of the Sustainable Development Goals in the region.

He attributed top medical causes of maternal mortality in Nigeria to obstetric haemorrhage, infection following

childbirth, unsafe abortion, eclampsia, and obstructed labour. Izugbara said the causes, experts have agreed, were largely treatable and preventable.

According to the report, an estimated 9.22 million pregnancies occur annually in Nigeria, adding that a quarter of these pregnancies were unintended.

Izugbara stressed that the majority of the abortions performed in the country were unsafe due to them being performed either by people lacking the necessary skills or in an environment lacking the minimal medical standard. As a result, unsafe abortion is a leading cause of maternal mortality and morbidity in Nigeria.

Adequate funding is critical for addressing the current shortage of high-quality human resources for maternal health at all skill levels and increased government investment in multi-sectoral funding will help to address infrastructural deficiencies that characterise the Nigerian health system.

Crop contamination a threat to health

Uganda hosted the second Partnership for Aflatoxin Control in Africa (PACA) conference to generate solutions for the poisonous and cancer-causing chemicals produced by certain molds in food.

Participants at the conference, which took place at Imperial Resort Beach Hotel, Entebbe under the auspices of the African Union (AU) framework, include agricultural experts from across the African continent.

The AU commissioner for rural economy and agriculture, Rhoda Tumusiime said that Aflatoxins are so far the most pervasive food security challenge in Africa, causing cancer of the liver and undermining growth in humans and animals.

'Aflatoxins undermine food security, nutrition and limit trade. They hamper agribusiness and economic development,' she added.

For the African countries to achieve their development goals and agenda 2063 of AU, mitigation measures and solutions should be developed to combat aflatoxins that undermine the health of the African population and limit access

of agricultural products produced on the continent to the international markets.

According to findings of a preliminary study of the impact of the aflatoxins in Uganda, the country loses US\$37.56m (sh128b) annually in agricultural products contaminated with the poisonous chemicals. The chemicals are also linked to Hepatitis B and failure of the immune systems.

The Deputy Secretary General of the East African Community, Jessica Eriyo, said the nodding syndrome plaguing northern Uganda could too be linked to aflatoxins.

'There are children (in northern Uganda) who have grown up in Internally Displaced People's Camps, surviving on relief food. I think there is need to do deeper investigation to establish the cause of nodding disease,' she added.

Trade and Agriculture Ministers, Amelia Kyambadde and Vincent Ssempijja, called for building of synergies to combat aflatoxins, arguing that the poisonous chemicals have far reaching consequences for trade and public health.

Abraaj Group plans to transplant private healthcare in Africa

The Abraaj Group, a United Arab Emirates (UAE) based private-equity investment firm, is seeking to invest in Kenya's growing healthcare market and use it as a launching pad to build a network of hospitals to offer quality and affordable medical services in sub-Saharan Africa.

The Dubai-based group is in talks to acquire Metropolitan Hospital and other healthcare centres in the capital of East Africa's biggest economy as part of its \$1 billion expansion plan into Asian and African markets to capitalize on the growing middle class.

The two continents have the world's fastest growing middle class, with Africa leading the way with 313 million people, according to data from the African Development Bank.

Rising cases of lifestyle-related ailments such as diabetes, heart diseases and obesity, which are driven by unhealthier diets amongst the growing middle-class, is attracting investors into the African healthcare industry.

'Nairobi is a sweet spot for us. There is a big population that is growing. You have emerging middle incomes. And there is a massive need for healthcare,' Khawar Mann, the Managing Director and Head of Healthcare at Abraaj Group.

The investment group, alongside the International Finance Corporation (IFC) and Africa Health Fund (AHF), are also funding three doctors to build Iso Health Limited, a \$17.7 million hospital in Kenya's capital, Nairobi, Business Daily reported. Abraaj Group also owns stakes in Avenue Hospital and Nairobi Women's Hospital in the Kenyan capital.

The private-equity firm invested \$145 million in the Tunisian and Egyptian healthcare sectors last year. It has plans to invest in Nigeria, the continent's biggest economy and Ethiopia, the fastest growing economy in Africa, Bloomberg reported.



Researchers collaborate to develop bird's eye view of rural community health

A network of health and demographic surveillance sites will enable understanding of how poverty, inequality and unemployment impacts rural South Africans.

Scientists from the Wits School of Public Health, the Africa Health Research Institute (AHRI) at UKZN and the University of Limpopo have established a network of surveillance sites to study health and demographics in rural communities and thereby understand the impact of poverty, inequality and unemployment.

The South African Network of Health and Demographic Surveillance System (HDSS) sites is an integrated national platform for population data collection and analysis. The initiative is one of 13 projects that make up the South African Research Infrastructure Roadmap and is funded by Department of Science and Technology and the European Union. Research infrastructures (RIs) are large-scale facilities, resources and related services that the scientific community uses to conduct research.

Dr. Mark Collinson, Senior Researcher in the MRC/Wits University Rural Public Health and Health Transitions Research Unit (Agincourt), and HDSS champion, says: 'Establishing this research infrastructure is an important step towards understanding how poverty, inequality and unemployment impacts South Africans' lives, and how to design better interventions to remedy the situation for an improved future.'

The surveillance system will enable real-time longitudinal studies of South Africa's fast-changing poorer communities as well as national datasets on health, education, employment and socio-economic wellbeing. This evidence-based data will inform cost evaluations and policy towards improving health and well-being interventions for the poor.

Furthermore, the surveillance sites will serve as interdisciplinary research platforms for local and international collaboration. This will increase capacity for conducting research in the social sciences crucially needed in South Africa.

New Ebola vaccine under consideration for emergency use

The next Ebola outbreak could have a prime-boost vaccine available, particularly for health workers and vulnerable communities on the front-line, a conference has heard.

Prime-boost vaccination involves giving an initial dose to prime the immune system, followed by a booster dose at a later date with the goal of potentially strengthening and optimising the duration of immunity.

'We are confident that we have the potential to contribute to end the Ebola problem,' says Johan van Hoof, global therapeutic area head, infectious diseases and vaccines, Janssen Pharmaceutical Companies headquartered in Belgium.

Last month (12 September), Johnson & Johnson announced that its subsidiary Janssen Vaccines & Prevention B.V, has submitted its investigational preventive Ebola prime-boost vaccine regimen to the World Health Organization (WHO) to be used in such instances.

This was announced at the eighth International Symposium on Filoviruses

in Antwerp, Belgium, hosted by the Antwerp Institute of Tropical Medicine, last month (12-15 September).

'If listed for emergency use, the investigational Janssen vaccine regimen could be a vital prevention tool for rapid outbreak response,' van Hoof explains. It has already been tested in animal models and for safety.

The application is considered under the WHO Emergency Use Assessment and Listing (EUAL) procedure to fast-track research and development for potential Ebola diagnostics, treatments and vaccines.

'If the WHO grants an emergency use listing, this will accelerate the availability of Janssen's investigational vaccine regimen to the international community in the event another Ebola crisis occurs,' says Paul Stoffels, the chief scientific officer, Johnson & Johnson.

While EUAL potentially allows for deployment of a vaccine in an emergency, the vaccine remains investigational pending formal regulatory agency review and approval.

Nigeria only country harbouring polio virus in Africa, says Health Minister

Dr. Osagie Ehanire, the Minister of State for Health, says Nigeria remains the only country in Africa still harbouring the polio virus.

He spoke in Jalingo at the launching of the monthly outbreak response immunisation campaign against the polio virus.

The minister explained that Nigeria was on the verge of getting out of the menace of polio before the virus unfortunately resurfaced in Borno.

'It is worrisome to note that Nigeria remains the only country in Africa still harbouring wide polio virus.

'Considering the fact that Taraba falls within the region of the outbreak, this exercise is timely and I commend the state government for this,' he said.

Ehanire noted that the Federal government was totally committed to



tackling the menace in order to remove Nigeria from the list of three countries still harbouring the virus.

He appealed to parents to allow the immunisation officers to have access and administer the vaccine on their children, saying, it had no side effects.

Gov. Darius Ishaku of Taraba said the state was doing everything possible to ensure that children were safe.

Photo credit: CDC Global via Flickr. <https://www.flickr.com/photos/cdcglobal/16871251069>



A Global Call to Detect and Act on Anemia

We are happy to share the launch of our initiative **Embrace Health – Unite to Screen and Treat Anemia**. We share the commitment made by the World Health Assembly to reduce the burden of anemia by 50% in women of reproductive age by 2025. Anemia impairs the health and well-being of women and increases the risk of adverse maternal and neonatal outcomes. Anemia also increase complications and the risk of fatal outcome in malaria. The key to act – is to know. The time to act – is now.

30 years ago HemoCue was the pioneer in point of care testing for hemoglobin. Since then we have shared our knowledge about how, when and why

to measure it, and the subject remains close to our heart. We will continue to share our knowledge, and to urge action in detecting and treating anemia.

Please join our movement.
Embrace Health – Unite to Screen and Treat Anemia!

To learn more about the HemoCue®Hb 301 kit and our fight against anemia, contact your HemoCue representative or email info@hemocue.se



Hemoglobin HbA1c Glucose Urine Albumin WBC / WBC DIFF

HemoCue has been a leader in Point of Care medical diagnostics for over 30 years. We specialize in giving healthcare providers tests that deliver fast results with the precision expected of a central lab. Visit hemocue.com

