

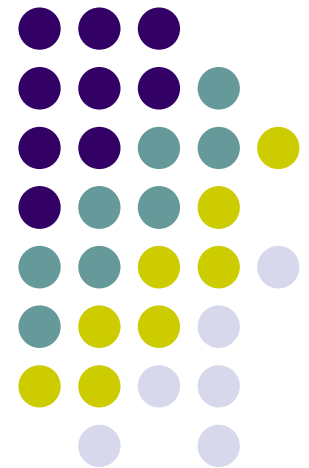
CVD in the rural setting

Mayange MV, Rwanda

Fred Hersch

fredhersch@gmail.com

University of Sydney, School of Medicine



THE MILLENNIUM VILLAGES™ PROJECT





**Communicable diseases,
maternal and perinatal
conditions, and nutritional
deficiencies
30%**

**Cardiovascular
diseases
30%**

**TOTAL DEATHS 2005
58 million**

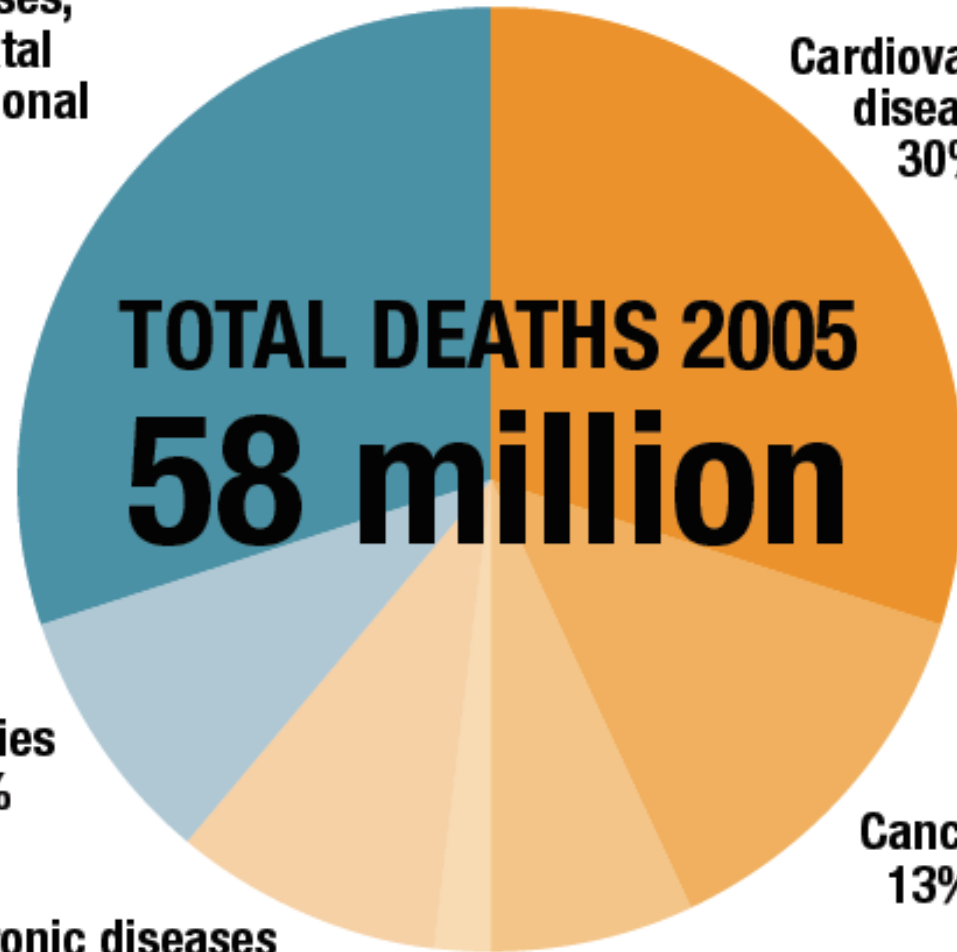
**Injuries
9%**

**Cancer
13%**

**Other chronic diseases
9%**

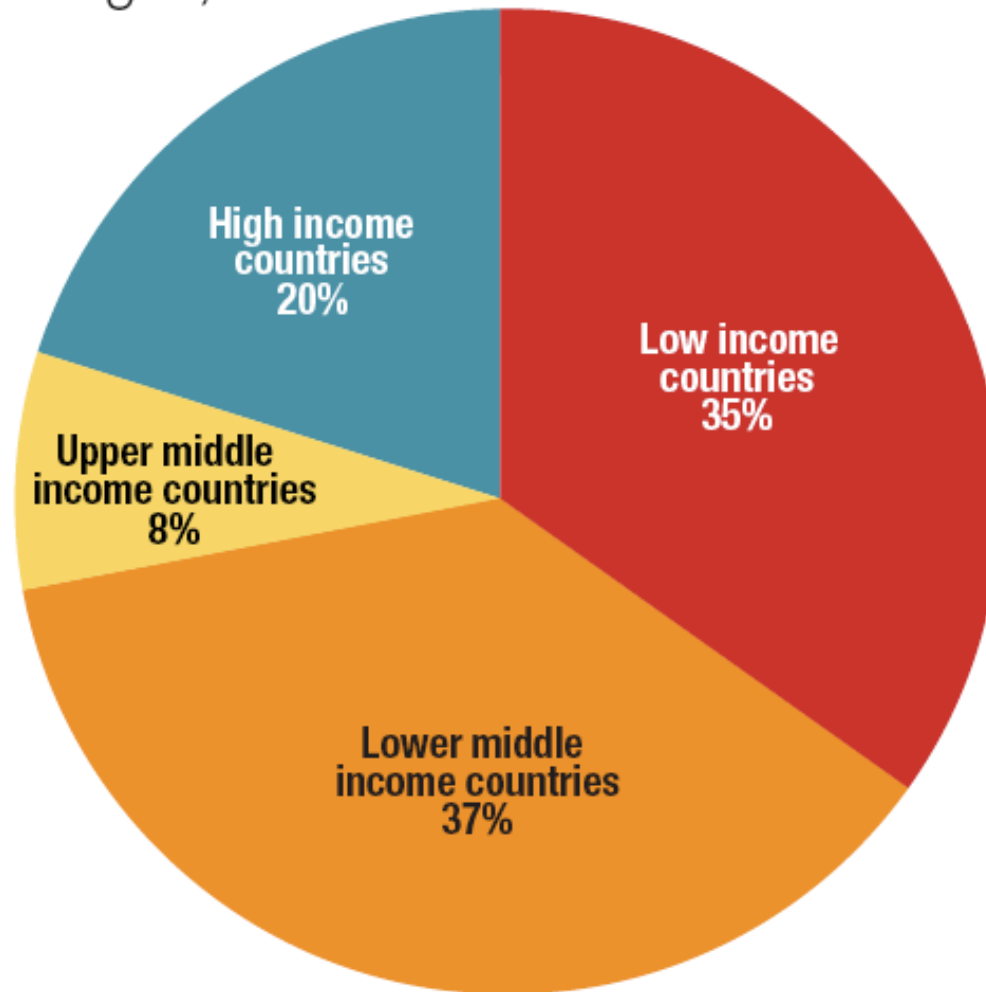
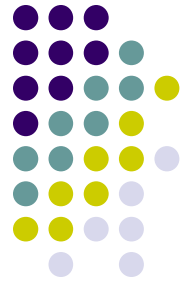
**Diabetes
2%**

**Chronic
respiratory
diseases
7%**

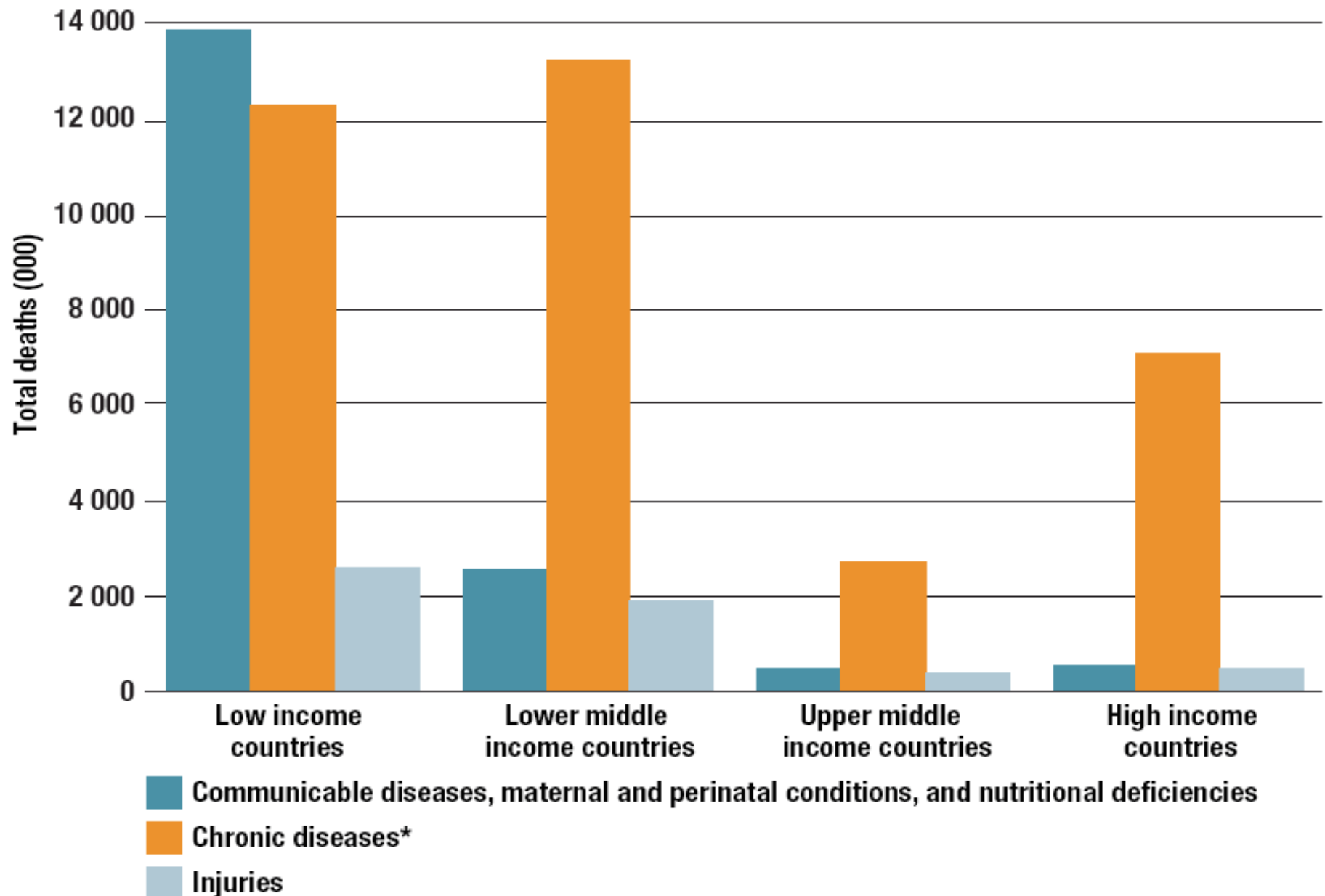


Projected global distribution of chronic disease deaths

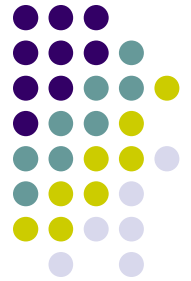
by World Bank income group,
all ages, 2005



Projected deaths by major cause and World Bank income group, all ages, 2005



Situation in East Africa

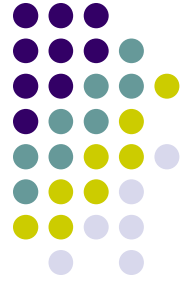


Prevalence of Hypertension by Country

	Malawi (n=408) n (%)	Rwanda (n=535) n (%)	Tanzania (n=542) n (%)	Total (n=1485) n (%)
Blood Pressure Status				
Normal	149 (37)	220 (41)	145 (27)	514 (35)
Pre-Hypertension	166 (41)	230 (43)	252 (46)	648 (43)
Hypertension	93 (23)	85 (16)	145 (27)	323 (22)
Stage 1 Hypertension	57 (14)	70 (13)	99 (18)	226 (15)
Stage 2 Hypertension	36 (9)	15 (3)	46 (8)	96 (7)

Credits: Sarah Stewart, 2007

Research project

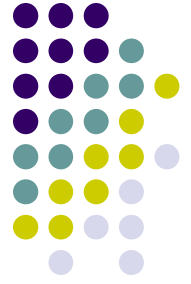


Aim: To develop a “practical” model for cardiovascular disease care in a rural setting

Method: Literature review / site visit to Rwanda

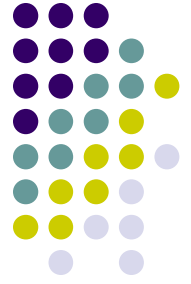
Outputs: Needs assessment / Key findings /
Recommendations

Key findings



1. Opportunities exist for addition of CVD program into existing health system
2. Importance of education of health professionals
3. **Challenge of culture!**

Copyright 2006 by Randy Glasbergen.
www.glasbergen.com



FAST FOOD FRANCHISE DIVISION



**“Our challenge is to convince the public
that heart attacks are sexy.”**

Thank you

Fred Hersch
fredhersch@gmail.com

