Significant unmet need for care of diabetes, hypertension, and dyslipidemia in low- and middle-income countries

Launch of new project in the Department of Global Health and Population in collaboration with Goettingen and Heidelberg Universities in Germany and numerous global partners

The HPACC team: (above, from left) Vera Sagalova, Esther Lim, Maja Marcus, Rifat Atun, Lindsay Jaacks, Sebastian Vollmer, Till Barnighausen, Pascal Geldsetzer, (below, from left) Michaela Theilmann, Sarah Frank, Clare Flanagan, Jen Manne-Goehler, Cara Ebert.

December 12, 2017 – Approximately 2 out of every 3 deaths globally are attributable to noncommunicable diseases such as cardiovascular disease, about 80% in low- and middle-income countries. Catastrophic household expenditures on treatment and lost productivity from these diseases have brought them to the forefront of discussions on global development and achieving the Sustainable Development Goals. Yet major research gaps remain.

The GHP Project on Access to Care for Cardiometabolic Diseases (HPACC) was officially launched on December 12, 2017 at the Harvard University Loeb House in Cambridge. Students, researchers, health care professionals, and faculty from numerous institutions around Boston – Boston University, Massachusetts General Hospital, Beth Israel Deaconess Medical Center, Partners in Health – and from Goettingen and Heidelberg Universities in Germany attended.

Lindsay Jaacks, Assistant Professor of Global Health at Harvard Chan School, opened the event by remarking that when the Population Center was first established at Harvard half a century ago, life expectancy at birth was less than 40 years in several of the countries that are participating in HPACC. Today, in those same countries, life expectancy at birth is over 60 years, and as a result, age-related diseases such as diabetes, hypertension, and dyslipidemia are now common.

This, she said, prompted the development of HPACC, which aims to evaluate risk factors – both socio-demographic characteristics and lifestyle behaviors – for diabetes, hypertension, and dyslipidemia, and health system performance for these conditions, among adults in low- and middle-income countries. This work is done in close collaboration with colleagues from over 20 countries around the world. A key founding principle of HPACC is its emphasis on research capacity building and involving key stakeholders from the beginning so to ensure efficient and effective translation of findings to improve population health.

“The preliminary results you’ll see this evening are the first attempt to calculate global cascades of care for these increasingly important chronic diseases,” said Karen Emmons, Dean for Academic Affairs at Harvard Chan School, in her welcome address. “They will be the foundation upon which many more studies on burden and care for cardiometabolic diseases in rapidly developing countries around the world will be built.”

Wafaie Fawzi, Richard Saltonstall Professor of Population Sciences and Chair of the Department of Global Health and Population, emphasized that the "Increased focus on NCDs [noncommunicable diseases] need not come at the expense of infectious diseases. Both are key." Fawzi also encouraged the HPACC team to expand its scope to include vulnerable populations such as pregnant women and adolescents who are increasingly susceptible to diabetes and hypertension.

Dean Karen Emmons of the Harvard Chan School welcomes participants to the event.

To achieve the ambitious aims of HPACC, LeShawndra Price, Chief of the Health Inequities and Global Health Branch within the Center for Translation Research and Implementation Science (CTRIS) at the National Heart, Lung, and Blood Institute (NHLBI) of the National Institutes of Health (NIH), emphasized the need for strong partnerships as well as the importance of supporting early career investigators. She was pleased to see the leadership of junior faculty and students during the event.


Participants at the Harvard University Loeb House in Cambridge.

Other speakers included Rifat Atun, Professor of Global Health Systems at Harvard Chan School; Jen Manne-Goehler, resident physician at Beth Israel Deaconess Medical Center and clinical fellow at Harvard Medical School; Pascal Geldsetzer, doctoral candidate in global health and population at Harvard Chan School; and Till Barnighausen, Alexander von Humboldt Professor at Heidelberg University and Director of the Heidelberg Institute of Public Health. From the University of Goettingen, Maja Marcus and Cara Ebert, doctoral candidates in development economics; Michaela Theilmann, Master's candidate in development economics; Vera Sagalova, research associate; and Sebastian Vollmer, Professor of Development Economics and Director of the Centre for Modern Indian Studies.

The event ended with some discussion on prevention. After all, most noncommunicable diseases including diabetes and hypertension, are preventable. Jaacks said, "This is just the launch." Primary prevention is definitely in HPACC's scope looking ahead to the future.

We live in an age of complex problems that will require team science to come up with solutions. Population aging and health care access and quality are among these problems. HPACC is an ambitious attempt to address these issues on a global scale.

-Lindsay Jaacks

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