

Learning from one another



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Lost in transition



Dr. med. Niklaus Labhardt,
President of SolidarMed

Diabetes, heart attacks or strokes. Our supposed "diseases of affluence" have arrived in Africa. All countries in which SolidarMed works are experiencing the so-called "transition of health". Lifestyle and dietary habits are changing rapidly; more and more people suffer from cardiovascular disease.

This is a challenge for our partner hospitals and health centres. Over the past decades, they have focussed on the treatment of communicable diseases like malaria, diarrhoea, tuberculosis or HIV. Now, they are confronted with a growing number of patients suffering from chronic diseases.

At the same time, millions of children continue to die from malnutrition, diarrhoea and malaria and over one million people are infected with HIV every year. For our partner countries and their health systems, this is an enormous challenge. They are confronted with "new" diseases yet the "old" problems have not become any less urgent. Health experts thus speak of the "double burden".

This creates a dilemma of prioritisation. Where should we invest the limited resources to best do justice to both health challenges? There is the threat of losing oneself in this "health transition", the risk of setting the wrong priorities and neglecting important health interventions like malaria control or mother and child health.

A holistic approach is the only possible answer. Accessible public health care services must address both the "new" and the "old" health challenges. For this, we need efficient and workable approaches. For example, when SolidarMed carries out an HIV testing campaign in a village, this includes blood pressure and blood sugar level checks. In this way, new prevention and treatment elements are gradually and cost-effectively integrated into existing public health care services.

A good example is the new collaboration between SolidarMed and Professor Christoph Henzen of Lucerne Cantonal Hospital. In Tanzania, he trained staff in the diagnosis and treatment of diabetes (page 3). For the first time, people in the catchment area of Lugala hospital have access to appropriate diabetes treatment.

Our partner hospitals need targeted support to tackle these formidable challenges. For this, SolidarMed relies on your donations.

Our heartfelt thanks for your support!

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SolidarMed is the Swiss organisation for health in Africa and improves health care for 1.5 million people. SolidarMed strengthens and expands existing medical services sustainably and meaningfully. The projects pay particular attention to the health of mothers, pregnant women, newborns and children.





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"One should not be chronically ill in Africa."

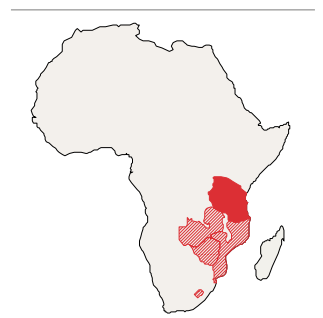
Tanzania Gestational diabetes occurs in Tanzania too. In the worst case, it results in the death of both mother and child. Professor Christoph Henzen, Chief Physician at Lucerne Cantonal Hospital, speaks about his journey to Lugala and what Switzerland can learn from our partners in Africa.

SolidarMed: When you think back to Lugala, which images come to mind?

Henzen: What I remember most is how content people are and how they tackle their daily life in the simplest manner. You meet so many positive people and there is so much laughter. We, who have everything, are really morose in comparison. Since my trip, not a day passes without something making me happy.

Does Lucerne Cantonal Hospital have anything in common with the remote hospital of Lugala?

Sick people are the main focus of both hospitals. The processes are very well organised, but each hospital has different resources available. Interdisciplinary work and respect are important – this is another common feature. I have the utmost admiration for what SolidarMed and the project manager Dr Peter Hellmold have achieved in Lugala.



▶ Tanzania:
 Inhabitants 53'470'000
 Doctors per 1'000 inhabitants 0.022
 Life expectancy 63 years

Where do you see the biggest differences?

The resources each hospital has available are clearly worlds apart. In Lugala, an enormous amount is achieved with very little. We have a whole lot more and do more. This means that Lugala works extremely efficiently, very comparable to the Cantonal Hospital of Lucerne. The latter is certainly one of the best-equipped hospitals with the very highest levels of competence in nearly every area of medicine. In Lugala, everything is concentrated on very few doctors. Despite the challenging circumstances, SolidarMed has also achieved a lot when it comes to the infrastructure. But it is still worlds apart compared to a cantonal hospital.

Given these differences, is an exchange on equal terms even possible?

At the personal, emotional level – definitely. We can learn so much about contentment and humility. But there are also medical areas in which we can learn from Lugala. If I had a complicated case of malaria, I would honestly rather be treated in Lugala than in Lucerne’s Cantonal Hospital (smiles). So there are a whole range of diseases which we do not or no longer know, in which they are absolutely specialised and routinely provide high quality treatment.

You are a specialist for chronic diseases.

What does such a diagnosis mean in Lugala?

Honestly: You should not be chronically ill in Africa. I think the care of chronically ill patients still needs a lot of improvement. If you’re diabetic and need insulin, you will not survive in this region. There is a shortage of money and medication. In addition, the medical staff do not know diabetes. With a life expectancy of around 60 years and an HIV epidemic, this disease was simply not an issue before now. Today, people do not die of HIV quite so often, but rather from a stroke or diabetic gangrene. It was our goal to put diabetes onto the medical map, in an area where you can generate a lot of benefit with relatively little. Gestational diabetes or pregnancy diabetes is a good entry point into this topic.



© Maurice Haas

Photo page 3
Serapia takes a patient's blood pressure. She also visited Lucerne Cantonal Hospital and benefited a lot from the exchange.

Photo page 4
Abel Kilunda is pregnant. After comprehensive counselling, she is tested for gestational diabetes.

Chronic diseases on the rise

Chronic diseases are the main cause of death for people in industrialised countries. Accordingly, complex therapies are also available in Swiss hospitals. These diseases are also becoming more common in the countries in which SolidarMed works, but so far, there is hardly any medical help available. Senior consultant Professor Dr Christoph Henzen from Lucerne is a recognised expert for gestational diabetes. This condition is a good starting point to gain experience with treating a chronic disease.

What are your findings?

We found out that far fewer pregnant women develop diabetes than in Europe. This shows how important diet, age and also excess weight are. The women giving birth in Lugala are on average around 20 years younger than those in Switzerland.

Why should SolidarMed pay attention to chronic diseases when children continue to die from malaria or diarrhoea?

One should do the one and not stop doing the other. It is true, of course: 40 to 70 percent of children in Lugala have growth disorders because they suffer from parasites and worms which cause anaemia. On the other hand, diabetes and high blood pressure cause up to 15 percent of all deaths among people between the ages of 40 and 50, this is significant. And the tendency is rising. In Switzerland, one doesn't really die from these diseases at this age. ■



Photo on the right
After the blood test, all the results are noted in her personal booklet.

Image Box
Dr Henzen advising patients in the Cantonal Hospital in Lucerne together with health staff from Tanzania.

Partnership between Lucerne and Lugala



© René Sager

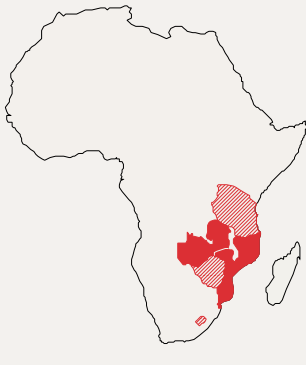
When a woman develops high blood sugar levels for the first time in pregnancy, this is called gestational or pregnancy diabetes. The babies of these women face a greater risk of high birth weight, deformities, lowered blood sugar levels and jaundice. In addition, childbirth complications and developing diabetes later in life are more common. Without treatment, the child can also die in the womb. The very scarce data from Tanzania suggests that one in ten pregnant women are affected. Chronic diseases require life-long, complex treatment. This places enormous demands on a weak health system.



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The Cantonal Hospital of Lucerne and SolidarMed's partner hospital in Lugala (Tanzania) have established a partnership as part of the ESTHER network to improve the quality of care for pregnant women in Lugala. Professor Henzen visited Lugala Hospital in Tanzania's remote south to find out more about chronic diseases and share his knowledge. SolidarMed has supported this hospital for nine years.

HIV self-tests in the health centre



Moçambique
HIV self-tests in the health centre

Moçambique
Direct help for malnutrition

Zambia
Good marks for the students

Moçambique The ambitious 90-90-90 UNAIDS goals to contain the HIV epidemic are still out of reach in Moçambique. So it is very important to find new ways of reaching the population with HIV tests and offering them treatment. New rapid tests offer hope. These tests can be used by the patients themselves. Just one drop of spit on each of the two inexpensive test strips provides certainty on whether a patient is infected or not. This makes the unpopular blood test superfluous.

SolidarMed carried out a study to investigate whether these self-tests would be accepted by the population in a rural area. In order to find out, the health centres in Ancuabe offered young people (the test group) the possibility of a self-test. The goal of the lead investigator Dr Jonas Hector and his team was to find out whether the tests would be accepted and whether they'd be used correctly. The results are gratifying and surprising at the same time. Young people prefer the self-test. However, around 80 percent of the adolescents did not take the test home, but rather tested themselves directly in the health centre.

The students administer an infusion using a practice dummy.



© Olivier Brandenberg

This study helps to understand how this modern diagnostic tool can work in practice and how to make optimal use of it in future. SolidarMed wants to find out in which social group this form of testing has the maximum impact, in order to reach at-risk groups better. This study was published in the scientific magazine PLOS One.

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Direct help for malnutrition

Moçambique With the financial support of the UN and UKaid, SolidarMed is providing additional food for infants and breastfeeding mothers during the dry season. Due to the severe economic crisis, there is even less food available this dry season than in other years. In the previous six months, 700 severely malnourished infants and 150 breastfeeding mothers received direct support. In addition, SolidarMed trained 36 medical professionals and 29 lay counsellors in nutrition counselling.

SolidarMed will continue these activities beyond the project phase supported by the UN. Extending this intervention will serve to build a longer-term awareness of malnutrition amongst health staff and village communities.

Good marks for the students

Zambia Before the summer, students from Mpanshya Nursing School completed their mock exams. To see in which areas they still need to improve, they also had to complete practical tasks. The trainee nurses were very successful. 90 percent passed their practical exam with very good marks. This is a clear sign of the high-quality training offered at this school which SolidarMed helped establish and continues to support.



On the road with...

Eveline Muvirimi trains midwives with expertise and passion.

Her hands move with the confidence and surety of experience. Eveline Muvirimi turns the baby's foot slightly and then pulls the left leg slowly but surely out of the birth canal. Her audience is spellbound. Eveline is demonstrating a difficult breech delivery. Watching and listening intently, we nearly forget that the baby is just a training doll and the maternal birth canal is an anatomical model. Today, Eveline Muvirimi is training 30 nurses and midwives from rural health facilities in Bikita in emergency obstetric care. Her manner leaves no doubt – she is an expert with decades of hands-on experience.

Eveline worked as a healthcare professional in the hospitals of Masvingo province for over 20 years. She has witnessed and experienced the challenges of obstetric care in Zimbabwe first-hand.

"Helping the mothers in my country is my passion", she says during a break in the training. "Training staff that are competent in obstetric care is a key measure."

As project manager of the SolidarMed project MAMA, Eveline Muvirimi organises, among other things, the so-called BEmONC training (basic and emergency obstetric and newborn care) for nurses and midwives in two districts in Zimbabwe. Over the course of five days, their knowledge is refreshed and they practice important moves and procedures. At the end of the course, the participants complete an exam. Three months later, Eveline visits the course participants in their health facility and provides practical in-service training.

Tanzania in Lucerne



A few weeks after Professor Henzen from Lucerne visited Lugala Hospital (page 3) Lucerne could repay the favour of their Tanzanian hosts. Over the course of one week, Tanzanian assistant medical officers visited the Cantonal Hospital of Lucerne, where they participated in joint training in chronic diseases. The experts from both countries also treated patients together and exchanged their knowledge. A third visit is planned, once again to Tanzania, to see the newly-introduced measures against gestational diabetes in action. One direct result of the visit from Lucerne is that blood sugar tests have been introduced as a routine part of antenatal care in Lugala.

solidarmed.ch/en > countries > Tanzania

Red / white for good

The football world cup and the performance of the Swiss team are now a happy memory. SolidarMed used the attention surrounding the competition to raise awareness among the Swiss public. The captain of the Swiss national team Stephan Lichtsteiner campaigned for solidarity using the fan bracelet #1goal1mission, generating a lot of attention amongst his fans. He was supported by the SolidarMed goodwill ambassadors Nino Schurter and Nik Hartmann. In total, 865 people participated in the sensitisation quiz and 791 ordered the bracelet in the Swiss national colours.

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#1goal1mission



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