

Dr. Sania Nishtar

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Sent: Tuesday, June 15, 2004 12:55 PM
To: 'procor@healthnet.org'
Subject: [ProCOR] IHHC: Guidelines and Action Plans

The 5th International Heart Health Conference has provided those of us who are attending from ProCOR--Dr. Bernard Lown, founder; Dr. Brian Bilchik, Director; Catherine Coleman, Editor in Chief, Dr. Barbara Roberts, Women's Heart Health Editor; Carole Nathan, Executive Director, Lown Cardiovascular Research Foundation; and Holly Ladd, Executive Director, SatelliLife, with the opportunity to renew friendships with long-standing colleagues as well as to meet for the first time many people whom we have long recognized and respected. One such person is Dr. Sania Nishtar from Pakistan. We were pleased to have a chance to speak with her at length on Sunday, when she brought us up to date on the recent historic activities of Heartfile (www.heartfile.org), the organization she directs in Pakistan. Initiated by the non-profit private sector, Heartfile now links with major public sector primary health care programs and is currently spearheading formulation and implementation of the National Action Plan on Noncommunicable Disease Prevention and Control in Pakistan.

In two presentations on Monday, June 14, Dr. Nishtar and other speakers shared information and insights on the important topics of action plans and guidelines that are relevant to developed and developing countries alike.

In a session entitled "National Action Plans for Heart Disease and Stroke Prevention," Dr. Nishtar participated in a panel with Dr. E. Vartiainen (Finland) and Dr. Darwin Labarthe (S), each of whom spoke about the development and implementation of their countries' national action plans. Dr. Nishtar described the process by which Pakistan developed its newly released National Action Plan, a collaboration among Pakistan's Ministry of Health, the WHO Pakistan office, and Heartfile, which was released on May 12, 2004. The process included involving key stakeholders, reviewing available epidemiological data, exploring best practices, examining existing programs and policies in Pakistan, and obtaining input from diverse groups through a series of workshops. The plan incorporates core public health principles, maximizes the strengths of partnerships, and utilizes concepts of social marketing. The plan will utilize television, to which 95% of Pakistan's population has access, to reach the public with health promotion information.

In a subsequent session that focused on "Guideline Dissemination," Dr. Nishtar, Dr. N. Poulter (UK) and Dr. T.A. Pearson (US) discussed the use of guidelines in clinical practice and the feasibility of international guidelines for heart disease prevention. Dr. Nishtar then explored the unique considerations of guideline development in low- and middle-income countries and shared insights derived from her experience in South Asia. She began by clarifying the differences between guidelines (which are direct and specific, and which specify targets and goals) and recommendations (which are more generic). A wealth of data from randomized control trials and population-based longitudinal studies are necessary in order to inform the development of guidelines, and many countries do not have adequate data. Recommendations, conversely, are more generic and not as data-dependent, therefore they can be developed in ways that are less specific than guidelines, and can be more easily tailored in specific localities depending on variables such as level of care, access to drugs, affordability of treatment, type of service delivery system, capacity, infrastructure, and technology resources. In these settings, recommendations may be more appropriate and useful. Dr. Nishtar also pointed that guidelines in developed countries tend to focus on high-risk groups, while guidelines for low-resource settings need to help prevent problems from developing. She emphasized that the high-risk approach and the population approach are not mutually exclusive, but that they overlap and need to dovetail.

Does your country have an action plan and/or guidelines? How were they developed? What challenges were experienced in implementation? What lessons have been learned? What successes can you share?

Catherine Coleman

Editor-in-Chief
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