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**Members of Global Alliance for Chronic Diseases fund landmark research initiative to reduce impact of hypertension**

*Research to focus on implementing high blood pressure prevention and control programs in 15 low- and middle-income countries*

Today it was announced that four member organizations of The Global Alliance for Chronic Diseases (GACD) will fund research projects on hypertension (high blood pressure) prevention and control in 15 low- and middle-income countries (LMICs). The first coordinated funding effort among GACD members, this initiative includes 14 community-based research projects that will focus on implementing effective approaches to control high blood pressure. The projects represent an investment of more than £14 million (more than US\$21.8 million) over three to five years.

The funding awards were announced by Dr. Francis Collins, director of the U.S. National Institutes of Health (NIH), during the GACD Secretariat Launch Event at UCL (University College London). The College's Institute for Global Health hosts the GACD Secretariat, which was established in January 2012.

“This collaboration is significant in scope and critical to addressing the growing global epidemic of chronic noncommunicable diseases,” said Dr. Susan B. Shurin, GACD chair, and acting director of the NIH’s National Heart, Lung, and Blood Institute. “By working together, the GACD funding organizations have an unprecedented opportunity to evaluate implementation strategies, leverage multiple research investments to provide evidence to guide policy, and ultimately stem the tide of deaths from chronic noncommunicable diseases.”

Hypertension is one of the most common chronic conditions worldwide, affecting an estimated 1 billion people. It is a major contributor to heart disease, heart failure, stroke, kidney disease, and other conditions, and, according to the World Health Organization, contributes to more deaths worldwide than any other risk factor.

The GACD is the first collaboration of major international public research funding agencies to specifically address chronic noncommunicable diseases. The hypertension research initiative demonstrates the GACD’s commitment to help combat the global burden of chronic diseases by

coordinating research on prevention and treatment. Noncommunicable diseases, such as cardiovascular diseases (primarily heart disease and stroke), chronic respiratory diseases, Type 2 diabetes, and cancer, account for around 60 percent of all deaths globally, 80 percent of which occur in LMICs.

The NIH is funding five research projects; Australia's National Health and Medical Research Council is supporting five projects, the United Kingdom's Medical Research Council is supporting one project, with funding of an additional project anticipated in the coming weeks; and the Canadian Institutes of Health Research is supporting three projects in partnership with three non-GACD member organizations: Grand Challenges Canada, Canada's International Development Research Centre and the Canadian Stroke Network.

Each research project is conducted through a partnership between investigators in a developed country institution and investigators and institutions in a LMIC. The initiative establishes a framework to examine various underlying mechanisms for hypertension prevention and control, such as family and institutional environments; health system delivery; and economic, social, and cultural factors.

Several projects evaluate the cost-effectiveness and efficacy of strategies based on successful approaches used in developed countries, tailored to local conditions to ensure that they are both culturally relevant and practical. With a focus on implementing effective interventions that can be used within LMICs and potentially expanded to similar environments, the projects provide a unique opportunity for researchers to share data and findings on a global level and to help further address global health disparities.

Specifically, the research programs seek to:

- Develop intervention strategies that involve multiple sectors. For example, in Peru, India, the Pacific Islands of Fiji and Samoa, and China, researchers will study the cost-effectiveness of population-based efforts to reduce salt intake. High salt intake is a well-established contributor to high blood pressure.
- Assess the effectiveness of early interventions and detection, including preventive and control-based approaches. In rural India, Kenya, and Tanzania, researchers will use smartphone technology to improve blood pressure diagnosis and to monitor control by enhancing the efficiency and capacity of health care providers as well as by providing feedback to patients.
- Build strong networks in Africa and elsewhere to strengthen responses to both communicable and noncommunicable diseases, leveraging the existing infrastructure developed in response to the HIV/AIDS epidemic where possible.
- Evaluate the effectiveness of using community health workers in combination with other multifaceted programs in Argentina, Colombia, Malaysia, and several African countries.
- Inform implementation and enable scale-up of larger programs (including related policies in health and other sectors) at local, regional, and national levels.
- Reduce the number of deaths and the prevalence of diseases, such as heart disease and stroke, that develop as a consequence of high blood pressure.

## **RESEARCH PROJECTS**

### **United States**

<http://www.nhlbi.nih.gov/about/globalhealth/alliance-chronic-diseases/index.htm>

**Funding organization:** The National Heart, Lung, and Blood Institute, part of the U.S. National Institutes of Health

**Project title:** Task shifting and blood pressure control in Ghana: A cluster- randomized trial

**Location (LMIC):** Ghana

**Award recipient(s):**

Dr. Olugbenga Ogedegbe, New York University School of Medicine, New York City, New York, USA

Dr. Jacob Plange-Rhule, Kwame Nkrumah University of Science and Technology, Kumasi, Ghana

**Project title:** Comprehensive approach for hypertension prevention and control in Argentina

**Location (LMIC):** Argentina

**Award recipient(s):**

Dr. Jiang He, Tulane University, Health Sciences Center, New Orleans, Louisiana, USA

Dr. Adolfo Rubinstein, Institute for Clinical Effectiveness and Health Policy, Buenos Aires, Argentina

**Project title:** Launching a salt substitute to reduce blood pressure at the population level

**Location (LMIC):** Peru

**Award recipient(s):**

Dr. Robert H. Gilman, Johns Hopkins University, Bloomberg School of Public Health, Baltimore, Maryland, USA

Dr. Jaime Miranda, Universidad Peruana Cayetano Heredia, Lima, Peru

**Project title:** Optimizing linkage and retention to hypertension care in rural Kenya

**Location (LMIC):** Kenya

**Award recipient(s):**

Dr. Valentin Fuster, Mount Sinai School of Medicine, New York City, New York, USA

Dr. Jemima Kamano, Moi Teaching and Referral Hospital, Eldoret, Kenya

**Funding organization:** The National Institute of Neurological Disorders and Stroke (NINDS), part of the U.S. National Institutes of Health

**Project title:** Tailored hospital-based risk reduction to impede vascular events after stroke (THRIVES)

**Location (LMIC):** Nigeria

**Award recipient(s):**

Dr. Bruce Ovbiagele, The Regents of the University of California, San Diego, California, USA

Dr. Mayowa Owolabi, University of Ibadan, Ibadan, Nigeria

### **Australia**

<http://www.nhmrc.gov.au/grants/types-funding/z-list-funding-types/strategic-awards/global-alliance-chronic-diseases>

**Funding organization:** National Health and Medical Research Council

**Project title:** Improving the control of hypertension in rural India: Overcoming the barriers to diagnosis and effective treatment

**Location (LMIC):** India

**Award recipient(s):**

Dr. Amanda Thrift, Monash University, Melbourne, Victoria, Australia

Dr. Pallab Maulik, George Institute for Global Health, Hyderabad, India

Dr. Nihal Thomas, Christian Medical College, Vellore, India

Dr. Kavumpurathu Thankappan, Sree Chitra Tirunal Institute for Medical Sciences and Technology,

Kerala, India

**Project title:** A smartphone-based clinical decision support system for primary health care workers in rural India

**Location (LMIC):** India

**Award recipient(s):**

Dr. David Peiris, George Institute for Global Health, University of Sydney, Sydney, Australia

Dr. Pallab Maulik, George Institute for Global Health, Hyderabad, India

**Project title:** Improving blood pressure control using a simplified treatment strategy including a three-in-one blood pressure lowering pill in Indian patients

**Location (LMIC):** India

**Award recipient(s):**

Anushka Patel, George Institute for Global Health, University of Sydney, Sydney, Australia

Dr. Pallab Maulik, George Institute for Global Health, Hyderabad, India

Dr. Dorairaj Prabhakaran, Centre for Chronic Disease Control, New Delhi, India

**Project title:** Developing a national salt reduction program for India

**Location (LMIC):** India

**Award recipient(s):**

Dr. Bruce Neal, George Institute for Global Health, University of Sydney, Sydney, Australia

Dr. Pallab Maulik, George Institute for Global Health, Hyderabad, India

Dr. Dorairaj Prabhakaran, Centre for Chronic Disease Control, New Delhi, India

**Project title: Cost effectiveness of salt reduction interventions in Pacific Islands**

**Location (LMIC):** Pacific Islands (Fiji and Samoa)

**Award recipient(s):**

Dr. Jacqui Webster, George Institute for Global Health, University of Sydney, Sydney, Australia

Dr. Wendy Snowdon, Fiji National University, Nasinu, Fiji

## **Canada**

<http://www.cihr-irsc.gc.ca/e/42405.html>

<http://www.cihr-irsc.gc.ca/f/42405.html>

<http://www.cihr-irsc.gc.ca/e/45386.html>

<http://www.cihr-irsc.gc.ca/f/45386.html>

**Funding Organizations:** Canadian Institutes of Health Research, Grand Challenges Canada, Canada's International Development Research Centre and the Canadian Stroke Network.

**Project title:** Utilizing HIV/AIDS infrastructure as a gateway to chronic care of hypertension in Africa

**Location (LMIC):** South Africa, Uganda, and Rwanda

**Award recipient(s):**

Dr. Edward Mills, University of Ottawa, Ottawa, Ontario, Canada

Dr. Andre Kengne, South African Medical Research Council, Cape Town, South Africa

Dr. Amber Featherstone, Mildmay International, Kampala, Uganda

Dr. Robert Kalyesubula, Makerere University, Kampala, Uganda

Dr. Julius Kamwesiga, IntraHealth Rwanda

Dr. Jean-Claude Tayari, Rwanda Ministry of Health, Kigali, Rwanda

**Project title:** Developing an innovative strategy for hypertension detection, treatment, and control in two

middle-income countries (Hypertension Outcomes Prevention and Evaluation: HOPE-4)

**Location (LMIC):** Colombia and Malaysia

**Award recipient(s):**

Dr. Salim Yusuf, McMaster University, Hamilton, Ontario, Canada

Dr. Juan Gonzalo Lopez Casas, Instituto Nacional de Salud, Bogota, Colombia

Dr. Patricio Lopez, Universidad de Santander, Bucaramanga, Santander, Colombia

Dr. Khalid Yusoff, Universiti Teknologi Mara, Selangor Darul Ehsan, Malaysia

Dr. Zainal Ariffin Omar, Ministry of Health, Putrajaya, Malaysia

**Project title:** DREAM-GLOBAL: Diagnosing hypertension - Engaging action and management in getting lower BP in Aboriginal and LMIC – A research proposal

**Location (LMIC):** Tanzania

**Award recipient(s):**

Dr. Peter Liu, University Health Network, Toronto, Canada

Dr. Kajiru Kilonzo, Kilimanjaro Christian Medical Centre, Moshi, Tanzania

**United Kingdom**

<http://www.mrc.ac.uk/Ourresearch/Globalhealth/Fundingopportunities/index.htm>

**Funding organization: Medical Research Council**

**Project title:** A school-based education programme to reduce salt intake in children and their families

**Location (LMIC):** China

**Award recipient(s):**

Dr. Feng He, Queen Mary University London, London, United Kingdom

Dr. Yangfeng Wu, George Institute for Global Health, Beijing, China

Dr. Lijing Yan, George Institute for Global Health, Beijing, China

Dr. Jun Ma, Peking University, Beijing, China

Dr. Xiangxian Feng, Changzhi Medical College, Changzhi City, Shanxi Province, China

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**Quotable statements:**

**Dr. Francis S. Collins**, director, U.S. National Institutes of Health:

“Hypertension causes no immediate symptoms, but if left untreated greatly increases risks of heart disease, stroke, and kidney failure. These projects will test approaches to improving blood pressure control in low- and middle-income countries that could be adapted by other communities around the globe. The National Institutes of Health looks forward to working across nations and borders through this important collaboration.”

**Dr. Abdallah Daar**, founding GACD chair and member of the Executive Chair; Chief Scientific Officer, Grand Challenges Canada; professor of Public Health Sciences and of Surgery, University of Toronto; and director of Ethics and Commercialization, Sandra Rotman UHN, and University of Toronto:

“It is very gratifying for me, as the former Chair of the GACD, to see the launch of our first internationally coordinated research funding initiative. I have always maintained that the GACD will be here 100 years from now and this is a great initiative to build upon for the many future calls that will address non-communicable diseases and global mental health.”

**Dr. Alain Beaudet**, president, Canadian Institutes of Health Research:

“Hypertension is a significant health issue in lower- and middle-income countries as well as among

indigenous populations in higher-income countries. We are delighted to partner with leading international health research organizations and Canadian partners on this initiative. The research we are funding aims to prevent hypertension and to improve its diagnosis and management. The implementation science focus of this research will help to ensure it makes a difference.”

**Professor Warwick Anderson**, chief executive officer, Australia National Health and Medical Research Council:

“Although the developed nations, such as Australia, have achieved much in reducing the incidence of high blood pressure and related health problems such as stroke, cardiovascular disease, and kidney disease, many groups in developing countries have not had access to effective prevention. Through working with our sister research funding bodies we aim to tackle the chronic diseases more effectively and to share information on successful approaches.”

**Dr. Wendy Ewart**, head of strategy and deputy chief executive, UK Medical Research Council:

“High blood pressure has a huge global impact and continues to be one of the world’s biggest killers. As an alliance, there is much to be gained from working together to concentrate our efforts on noncommunicable diseases that carry the greatest burden in developing countries. The initiatives chosen by the GACD will further our understanding of how to implement interventions globally and adapt them to different local settings.”

**Media contacts:**

**Notes to reporters:**

- A map indicating locations of the developed country partner sites and the low- and middle-income country sites is available from the GACD.
- Photos from the GACD Secretariat Launch Event, with the leaders of the funding organizations, will be available from the GACD.
- Video of one family’s story to illustrate the importance of high blood pressure control in developing countries (Tanzania), produced by Grand Challenges Canada, Canadian Institutes of Health Research, and others, is available at <http://www.youtube.com/watch?v=UiBHC9qCXIA>.

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NHLBI Facebook page: <http://www.facebook.com/NHLBI>

NHLBI Twitter page: [http://twitter.com/#!/nih\\_nhlbi](http://twitter.com/#!/nih_nhlbi)

NHLBI YouTube page: <http://www.youtube.com/NHLBI>

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***About the Global Alliance for Chronic Diseases (GACD):***

*The Global Alliance for Chronic Diseases was established in 2009 to support clear priorities for a coordinated research effort that will address chronic noncommunicable diseases, a growing health crisis now reaching world epidemic proportions. Experts estimate that, unless action is stepped up, 388 million people worldwide will die of one or more such diseases within the next decade. Composed of major international public health research organizations, the GACD's work focuses on the needs of low and middle income countries, and on those of low income populations of more developed countries.*