Final CoE SCM in Bethesda and China CoE’s five-year achievements

Bethesda, Maryland is a bustling suburban community located in Montgomery County, Maryland, northwest of Washington, D.C., USA. It is the home of some of the world’s leading research centers, including the National Institutes of Health (NIH).

Apr 13-16, 2014, renowned non-communicable disease (NCD) experts and staff from around the world congregated in the city for a big NCD event: The 9th and Final Semi-Annual Global Health Centers of Excellence Steering Committee Meeting (SCM).

The Global Health Centers of Excellence (CoE) is a worldwide network of 11 centers jointly established by the National Heart, Lung and Blood Institute (NHLBI) of NIH and UnitedHealth Group (UHG) in 2009, whose mission is to help combat the rising chronic disease in developing countries, to enable the development of research and training infrastructures and to foster research on new or improved approaches.

As 2014 will be the last year for this 5-year global health initiative, the 9th SCM was convened to not only present each of the center’s research efforts and capacity building achievements, but also to acknowledge the network’s great accomplishments, and discuss potential collaborations in the future.

Cristina Rabaden-Diehl, Acting Director of the Office of Global Health at NHLBI, and Richard Smith, Director of the UnitedHealth Chronic Disease Initiative, spoke highly of the 5-year achievements made by all of the 11 Centers. Prof. Diehl emphasized that the close collaborations between the Centers were impressive and it was even more gratifying to see that these collaborations would be continued in the future. She also acknowledged the Centers’ efforts to foster the young researchers, saying that the Seedgrant projects provided tremendous opportunities for the young Fellows to improve themselves.

On behalf of the China International Center for Chronic Disease Prevention (China CoE) and Professor Yangfeng WU, Professor Lijing YAN gave a report on the Center’s outcome in the past few years. “China CoE received great success with the magnificent guidance and support from our international and domestic stakeholders. Since its inception in 2009, the China CoE has enlarged its team to over 35 staff and kept on strengthening the capacity building. It has in total 20 projects with over 40 journal articles and book/book chapters published and over 30 conference reports presented. In order to transfer evidence into practice, China CoE organized a series of high-profile events including the Annual Forum on NCD Prevention and Control, and Health Policy Roundtable, convening and fostering conversations among hundreds of leaders and experts both domestic and international to bring the greatest impact on healthcare in China. China CoE has acted effectively and will continue our work and mission of fighting against NCDs in China.”

Dr. Maoyi TIAN and Cong LI (on behalf of Mr. Jing ZHANG), trainees from the China CoE, presented respectively the research results of 2 Seedgrant projects sponsored by NHLBI—“Electronic Decision Support System for Cardiovascular Disease Management in China” and “Verbal Autopsy Using Smartphone for Cause of Death in Salt Reduction Study” Research studies conducted by China CoE and its local partners, including the Flagship China Rural Health Initiative and Seedgrants supported by UHG, were exhibited at Poster Sessions together with studies from other 10 Centers.

Six participants from the China CoE and its local partners also attended the meeting, including Zhixin (Jesse) HAO, Prof. Bei HE and Prof. Ning SHEN from Peking University Health Science Center; Dr. Dongshuang GUO from Yu Xian People’s Hospital, Dr. Bo ZHOU from China Medical University, and developed country partners—Prof. Donald Andrew Wilson from The University of Sydney, Prof. Janet Bettger and Dr. Kelly Deal from Duke University.
The 6th Forum on China Chronic Disease Prevention and Management

Ningxia Hui Autonomous Region lies in the western part of China with rich culture. This summer on May 30th, the 6th Forum on China Chronic Disease Prevention and Management, supported by Ningxia Health and Family Planning Commission (Ningxia HFPC) and The George Institute for Global Health at Peking University Health Science Center (TGI@PUHSC), was held at Ningxia Medical University in Yinchuan, the capital city.

The theme of this year’s Forum was “Strengthen primary care system, establish prevention system, and promote chronic disease prevention and control”. Overall 200 officials, health workers, researchers and experts from local and international partners of China CoE were invited to participate in the event to discuss practical approaches to tackle NCD burdens in China and lead to further exchanges.

The Forum was started with the opening remarks by FENGNIAN TIAN, Deputy Director of Ningxia HFPC, YANGFENG WU, Senior Director of TGI@PUHSC and ZHENGZHI LI, Vice President of Ningxia Medical College.

LIANGYOU WU, Chair of Department of Rural Health Management, Bureau of Disease Control and Prevention, National Health and Family Planning Commission (NHFP), introduced the current situation and tasks of NCD prevention and control in China. Professor YANGFENG WU, Professor Lara FAIRALL, Founding Head of Knowledge Translation Unit, University of Cape Town Lung Institute, and Professor BO ZHANG, Director of Division of Disease Control, Ningxia Health and Family Planning Commission respectively spoke about their research experiences in NCD prevention and control in local contexts.

NCD has become a major global health burden requiring urgent more close collaborations between all sectors, local and global, than ever before.

The 5th Health Policy Roundtable on the Study of CRHI-PCP and its Policy Implications

The “China Rural Health Initiative -Primary Care Provider Study” (CRHI-PCP) carried out by China CoE has been completed and generated valuable results. To better understand these study results and their implications to NCD prevention and control in China, China CoE hosted a high-profile health policy roundtable in the end of April. Local CRHI-PCP Science Committee experts and government officials were invited to attend the roundtable, which was hosted by Prof. YANGFENG WU on behalf of The George Institute for global health at Peking University Health Science Center as well as the CRHI-PCP team.

The participants of the Roundtable, hosted by Prof. YANGFENG WU, included BIN WANG, Vice Director of Bureau of Disease Control and Prevention, NHFP, QING YANG, Director of Bureau of Primary Care, NHFP, LINGZHI KONG, Former Director of Bureau of Disease Control and Prevention, NHFP, Bowen CHEN, Vice Chairman of Community Health Association of China, LINHONG WANG, Deputy Director of Chronic Disease Center, Chinese Center for Disease Control and Prevention (China CDC), JIAXIANG MA, Vice Director of Chronic Diseases Center, China CDC, JING WU, Vice Chair of Division of Community Chronic Disease Management, China CDC, WEIGANG FANG, Vice Director department of general medicine, Peking Union Medical College Hospital, and Prof. STEPHEN MACMATHON and Prof. ROBYN NORTON, Principle Directors of The George Institute etc.

Prof. LIJING YAN briefly introduced the PCP program including intervention methods, process and results. Important comments and suggestions were raised through discussions among the audience on how to improve the intervention, the gaps between practices and guidelines, the trends of current health issues faced by the country, as well as the possible actions translating the evidence into practice to ensure our research has real impact on the most vulnerable.
Effectiveness of ACS clinical pathways and barriers to improvements

Clinical Pathways in Acute Coronary Syndromes Phase 2 (CPACS-2), a study designed to determine whether the use of clinical pathways would improve the quality of care for patients with acute coronary syndromes (ACS) in China, has published its research results in “Circulation: Cardiovascular Quality and Outcomes".

The study involved 15,141 patients in 75 hospitals in China. The primary findings showed that: after 12 months clinical pathways intervention, there were improvements in some, but not all processes of care; and though there were trends towards reducing repeated heart attacks and death in hospital with the intervention, it could not be concretely proved.

As part of this study, an assessment was also performed, finding that there are significant barriers to implementing change within hospitals and these barriers are likely to limit the impact of quality improvement efforts in China. This finding was published together with the study’s main paper.

“Our barriers study, conducted in parallel, suggests the presence of multiple organizational and wider system factors which often prevented both the use of the clinical pathways and achieving the desired quality standards outlined by the pathway,” said Professor Runlin GAO, one of the co-Principal Investigators, ex-president of Chinese Society of Cardiology. He went on to describe the key findings from CPACS-2, “Our findings show that limited capacity of hospital emergency care services, high out-of-pocket expenses with the need for "upfront" payments, prolonged discussions with the patient and families for both obtaining consent and pooling funds, and the avoidance of treatments in patients with more severe illness are likely to be major contributing factors.”

Community-based individualized lifestyle intervention significantly improves control of body weight and blood pressure among diabetic and hypertensive Chinese adults

Diet and exercise modification is effective in preventing diabetes and hypertension. However, community-based models for lifestyle intervention for managing these conditions that are practical and effective are few. Recently, a study focused on evaluate the effectiveness of a community-based individualized lifestyle intervention, published on Preventing Chronic Disease, a peer-reviewed electronic journal established by the National Center for Chronic Disease Prevention and Health Promotion, showed that short-term beneficial changes in activity, diet and clinical parameters in patients with mild diabetes or hypertension were produced after intervention.

The trial was conducted in 5 community clinics in Tianjin, China. Energy monitors and software were used by trained physicians as tools to provide individualized lifestyle consultation sessions to 273 eligible residents, who were divided into two groups - the early group which received a 3-month intervention and was then followed up while the late group started to receive 3-month intervention afterwards. Patients were empowered with self-management skills and community support. Larger and longer trials are needed to fully evaluate the effectiveness and feasibility of this model.

NATIONAL HEALTH & FAMILY PLANNING COMMISSION NEWS

NHFPC has officially issued “National Health Literacy Promotion Action Plan (2014-2020)".

The World Health Organization (WHO) advocates its members to promote health literacy and strive to achieve the Millennium Development Goals (MDGs). Health literacy is the ability to obtain, read, understand and use healthcare information to make appropriate health decisions and follow instructions for treatment. In China, health literacy is defined as basic disease prevention knowledge and cognition, healthy lifestyle and behavior, and skills. The average health literacy rate of Chinese residents is 8.8%, which is relatively low level. In order to build up an efficient and long-term national health literacy promotion system which requires positive participation and collaboration between governments, sectors and whole society, and improve the health level of urban and rural residents, NHFPC developed and officially issued “National Health Literacy Promotion Action Plan (2014-2020)".

INTERNATIONAL COLLABORATION AND EXCHANGE (ICE)

Expert from The George Institute spoke at 2014 Jishuitan Forum

Prof. Santosh RATH, Head of Global Surgery and Disability Research Program from The George Institute, was invited to the Jishuitan Forum and gave a lecture on management of older adults with hip fracture at Nursing Session on April 25, 2014. He introduced the retrospective audit of hip fracture patients at Jishuitan Hospital and emphasized the importance of nurses in improving outcomes of hip fractures. Earlier before the Forum, Prof. Robyn Norton, Principal Director of The George Institute, signed an MOU with Jishuitan Hospital to build collaborations in the field of hip fracture management.
*SimCard Study-tackling hypertension in resource-limited areas in China*

China is suffering from severe disease burden. In resource-limited areas such as rural Tibet, the health care is even worse. According to Dr. Maoji Tian, Research Fellow at China CoE, the prevalence of hypertension was as high as 56% in herdsman population in Tibet. “However, only 19.9% of the herdsman are aware of their conditions. The rates of receiving treatment and under control found in this population are also very low,” said Dr. TIAN in his report of the research result of Simcard—a simplified, but guideline-based cardiovascular disease (CVD) management program conducted in Tibet at the 2014 World Congress of Cardiology.

“In the study, CVD high-risk patients were identified by screening the eligible villagers. The village doctors were trained to use the Electronic Decision Support System, which helped them better manage those high-risk patients by providing lifestyle recommendations and prescribing appropriate medications.”

The study results showed the multifaceted intervention program delivered by the primary care providers had the potential to improve patients’ clinical outcomes and behavior change, and might have the potential to reduce CVD burdens and improve the health among high-risk patients in resource-poor settings.
2014 Practical Research Symposium

A 4-day symposium on clinical and public health research methods, aimed at providing early and mid-career scientists with a broad practical understanding of key elements of clinical and public health research, was hosted by The George Institute for Global Health at Peking University Health Science Center. The first day was to provide a broad overview of a range of relevant topics, including epidemiology, biostatistics, qualitative research, health economics, as well as research and project management. The training adopted a more interactive platform with case studies and group discussions, each of these topics was further explored on following days. The teaching faculty for this symposium is comprised of experienced researchers from The George Institute in Australia and China.

Beijing Health Research Lecture Series

Beijing Health Research Lecture Series is a joint initiative organized by TGI@PUHSC, Peking University Health Science Centre (PUHSC), and the University of Sydney. The seminar program, since its inception 5 years ago, has organized over 40 lectures aiming to bring up-to-date theories, perspectives, knowledge, and practices in the broadly defined health science, health policy, and health care fields, and benefited hundreds of young researchers in China.

For more information about these events: www.georgeinstitute.org.cn
Interview with Anna Willard

Earlier this year, Dr. Anna Willard, who studied at Beijing University of Traditional Chinese Medicine from 1991 to 1998 majoring in Acupuncture, moved back to Beijing and expected to widen her skills by conducting research mostly into neurological disease care in China with The George Institute as a part of her master degree at The Sydney University and potentially a part of her Neurology training. Let’s take a closer look at Dr. Willard’s research life in China.

Dr. Willard was born in Moscow and is a dual trained Chinese/Western Medicine doctor. With a background in Clinical Neurology and Internal Medicine, she plans to participate in INTERACT3 trial later this year and is currently planning a literature review regarding implementation of acute stroke management pathways in hospitals in China.

“Stroke has devastating effects on its victims and their families causing physical disability and psychological and economic hardship,” said Dr. Willard. “I haven’t worked with The George Institute before, but in the process of my Neurology training I read the reports of the INTERACT2 trial which was done at The George a few years ago. All INTERACT studies focus on acute management of hypertension in patients who present with haemorrhagic stroke. These studies are particularly important in China as haemorrhagic stroke constitutes a much higher proportion of stroke cases in Asia than in other parts of the world. Hopefully my study of previous interventions in stroke in China will help us tailor the intervention to be used in INTERACT3 specifically to Chinese hospitals making it possible to use the same approach well beyond the trial.”

“I’ve felt very welcome at The George Institute and hope I can form many professional and academic relationships here. There is an astounding depth of knowledge and experience among my colleagues here which no doubt explains high quality of research The George Institute is known for,” added Dr. Willard.

Coming back to Beijing after 23 years, Dr. Willard was also impressed by the great development made by the city.

“Beijing is always changing, but luckily many places stay the same. I’m very impressed with the underground system (when I came to Beijing in 1991 there were only 2 lines and a long way by bus from Xizhimen station up Xueyuan Lu to all the universities). I think the buses were 331 and 375 and there were villages and fields all around universities then. The most exciting building I’ve seen since coming back is the National Centre for Performing Arts - “The Egg”. I’ve been fortunate enough to attend opera performances in the Opera Theatre and cannot praise the architecture and acoustics enough.”

For detailed information on our fellowship and internship opportunities, please visit www.georgeinstitute.org.cn or contact CD-Center@georgeinstitute.org.cn.

Anna Willard at TGIPUHSC

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