

COVID 19 & Noncommunicable Diseases

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Impacts of COVID 19 on health services for NCDs

- Prevention and treatment services for NCDs have been severely disrupted since the COVID-19 pandemic began
- “Many people who need treatment for diseases like cancer, cardiovascular disease and diabetes have not been receiving the health services and medicines they need”
- Survey completed by 155 countries during a 3-week period in May 2020, confirmed that the impact is global, but that low-income countries are most affected.
- This situation is of significant concern because people living with NCDs are at higher risk of severe COVID-19-related illness and death
- It's vital that countries find innovative ways to ensure that essential services for NCDs continue, even as they fight COVID-19

Service disruptions in COVID 19 era

- Among the 155 surveyed countries
 - more than half (53%) of the countries have partially or completely disrupted services for hypertension treatment;
 - 49% for treatment for diabetes and diabetes-related complications;
 - 42% for cancer treatment, and
 - 31% for cardiovascular emergencies.
 - Rehabilitation services have been disrupted in almost two-thirds (63%) of countries, even though rehabilitation is key to a healthy recovery following severe illness from COVID-19.

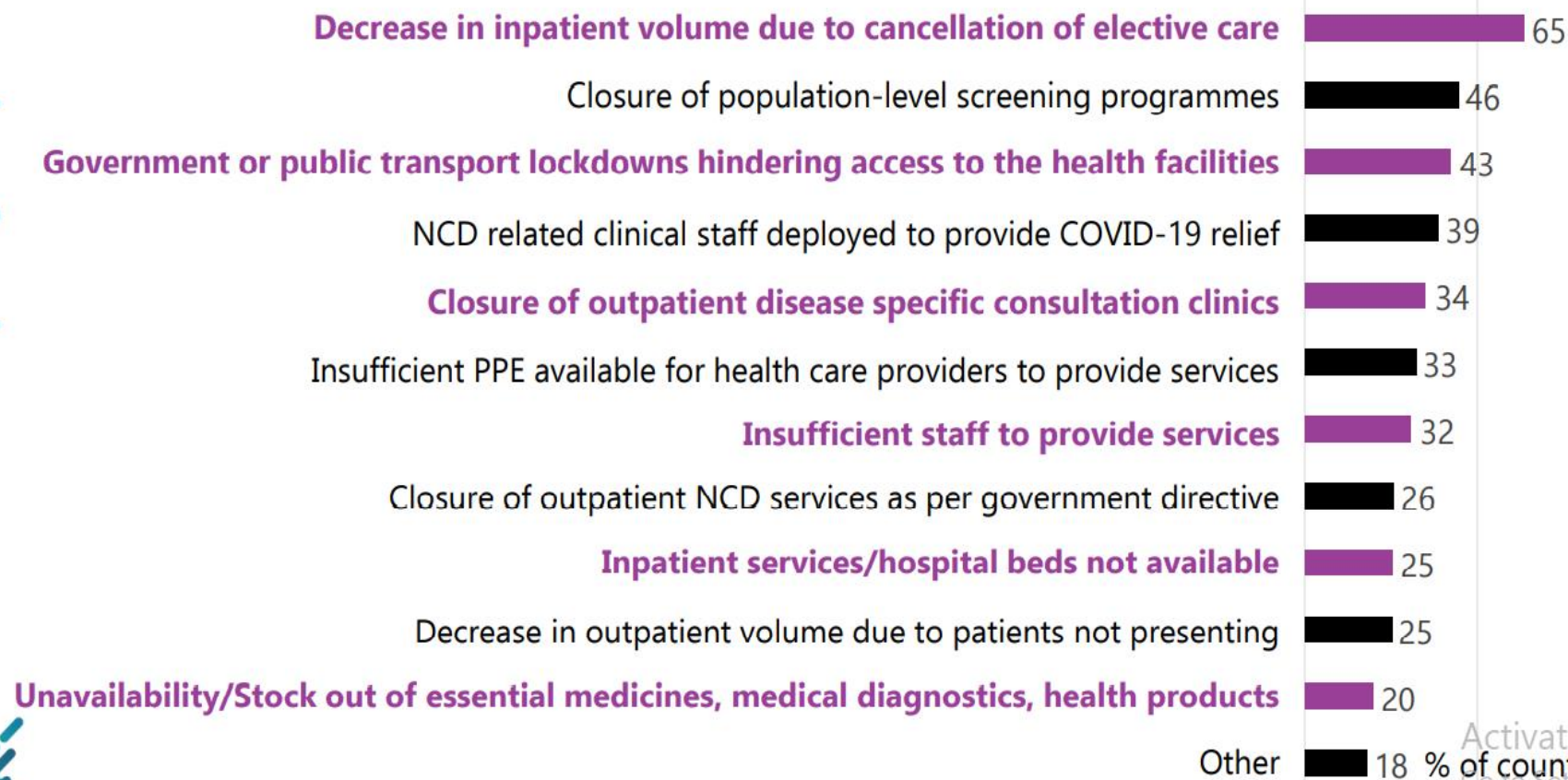
Factors predisposing service disruption

- health staff working in the area of NCDs were partially or fully reassigned to support COVID-19.
- postponement of public screening programmes
- cancellations of planned treatments, a decrease in public transport available and a lack of staff
- shortage of medicines, diagnostics and other technologies

Main causes of NCD service disruption: 75% of countries reporting disruptions



Out of 122 countries reporting disruptions

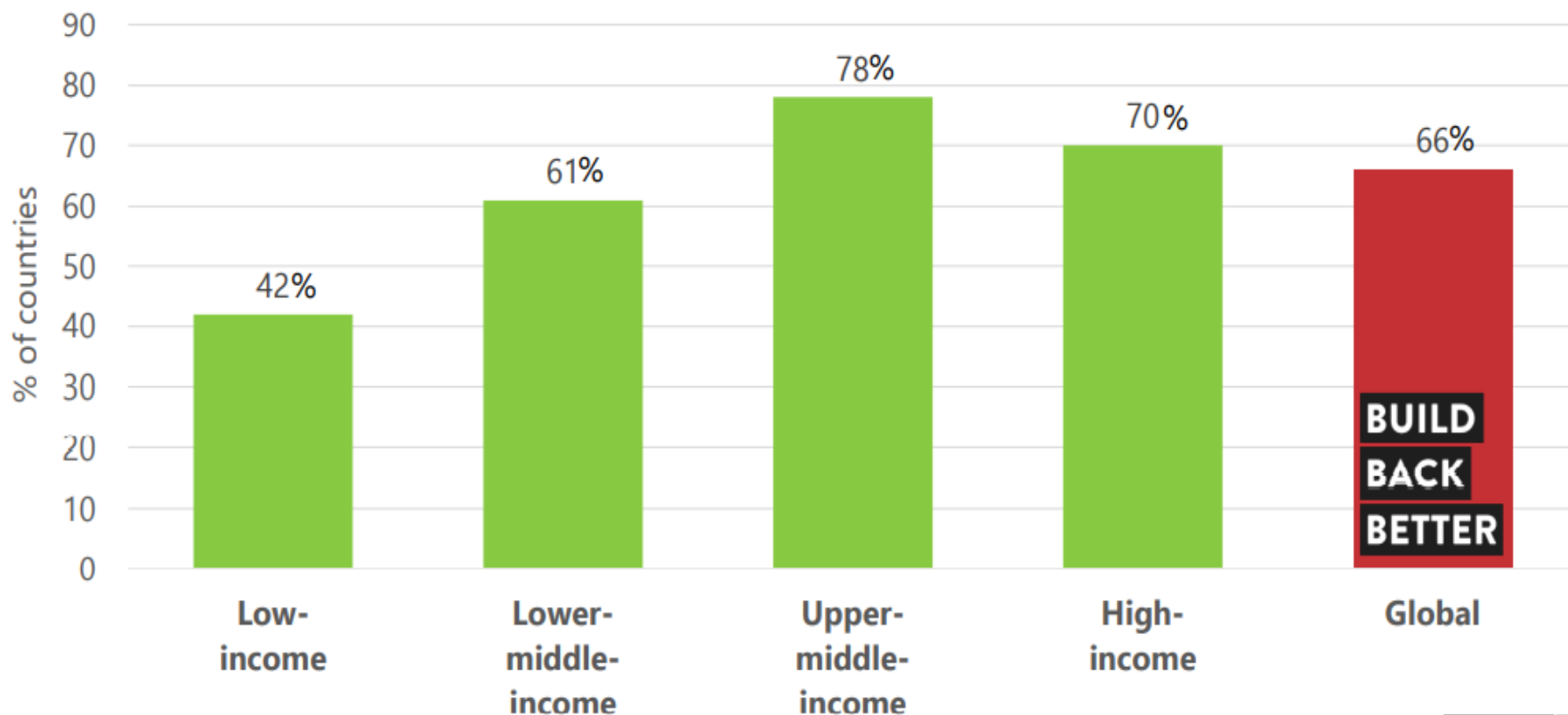


Activate W
Go to Settings

National Response Plans

- Globally, two-thirds of countries reported that they had included NCD services in their national COVID-19 preparedness and response plans; 72% of high-income countries reported inclusion compared to 42% of low-income countries
- Services to address cardiovascular disease, cancer, diabetes and chronic respiratory disease were the most frequently included.
- Dental services, rehabilitation and tobacco cessation activities were not as widely included in response plans according to country reports.
- Seventeen percent-of countries reporting have started to allocate additional funding from the government budget to include the provision of NCD services in their national COVID-19 plan.

66% of countries have included the continuity of NCD services in national COVID-19 plans



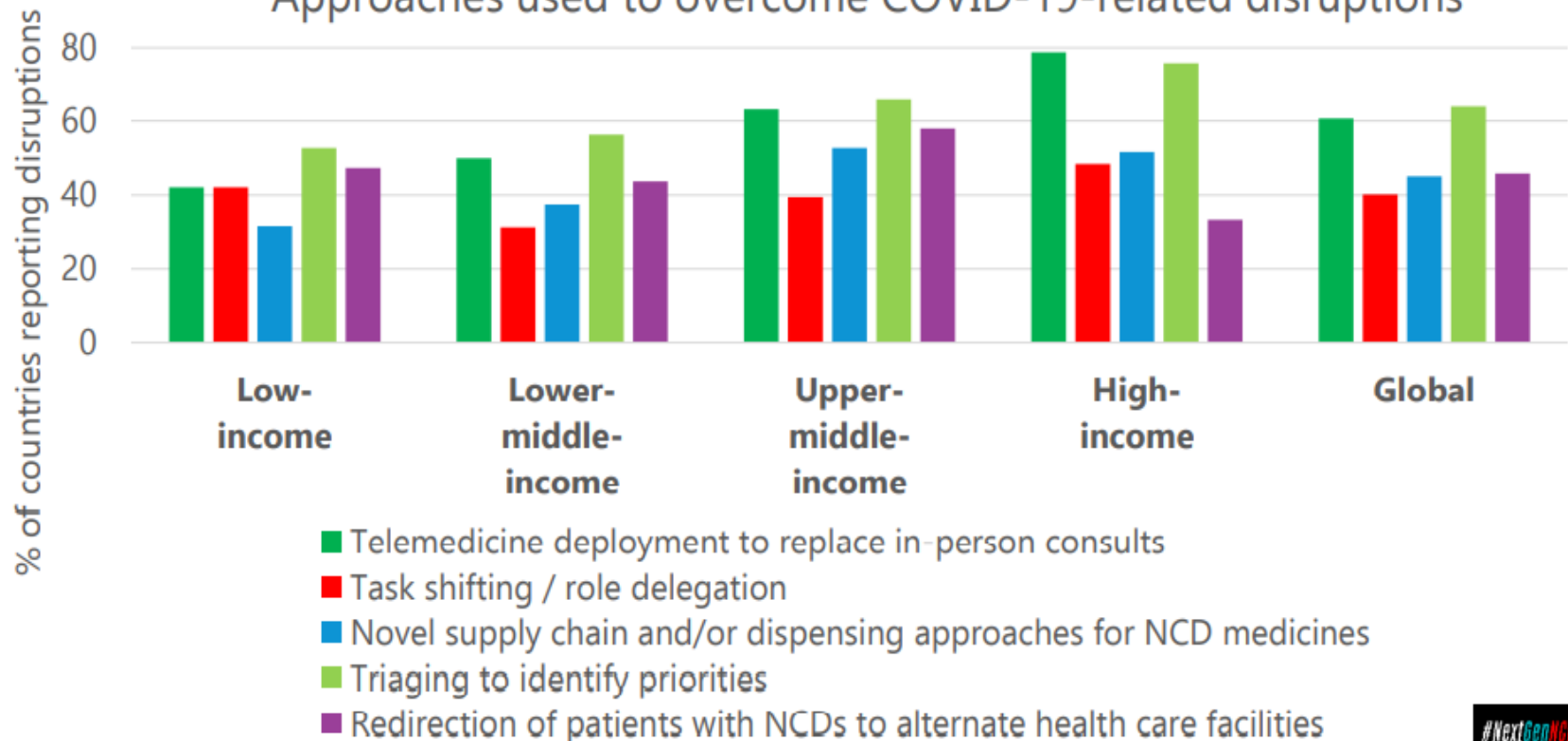
Alternative strategies for continuing care

- Among the countries reporting service disruptions, globally 58% of countries are now using **telemedicine** (advice by telephone or online means) to replace in-person consultations; in low-income countries this figure is 42%.
- **Triaging** to determine priorities has also been widely used, in two-thirds of countries reporting

Telemedicine and triaging are the mitigation strategies most often used to overcome disruptions



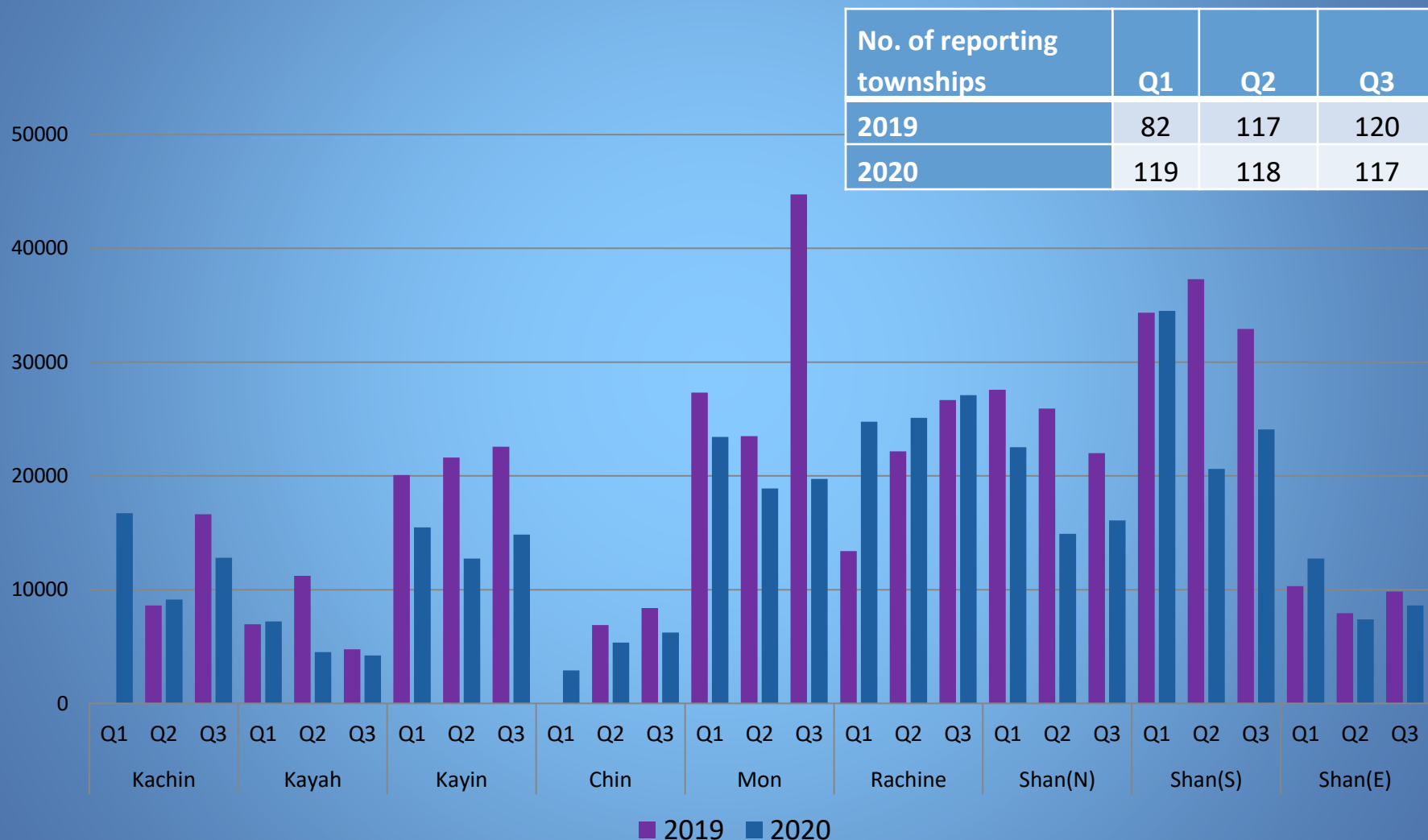
Approaches used to overcome COVID-19-related disruptions



Out of 122 countries reporting disruptions

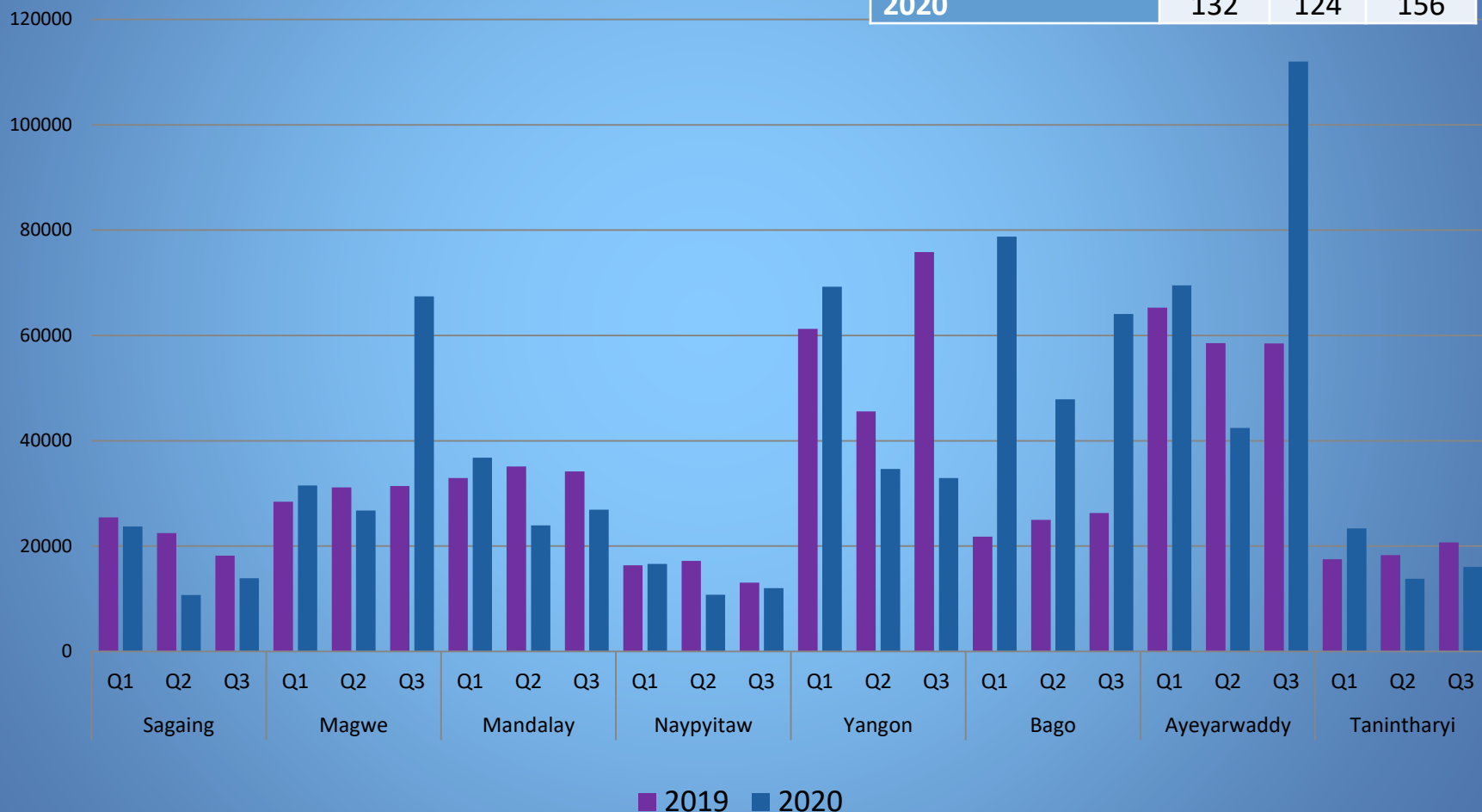
Situation of NCD services in Myanmar at the community level

Total Screened population at NCD Clinics (States)



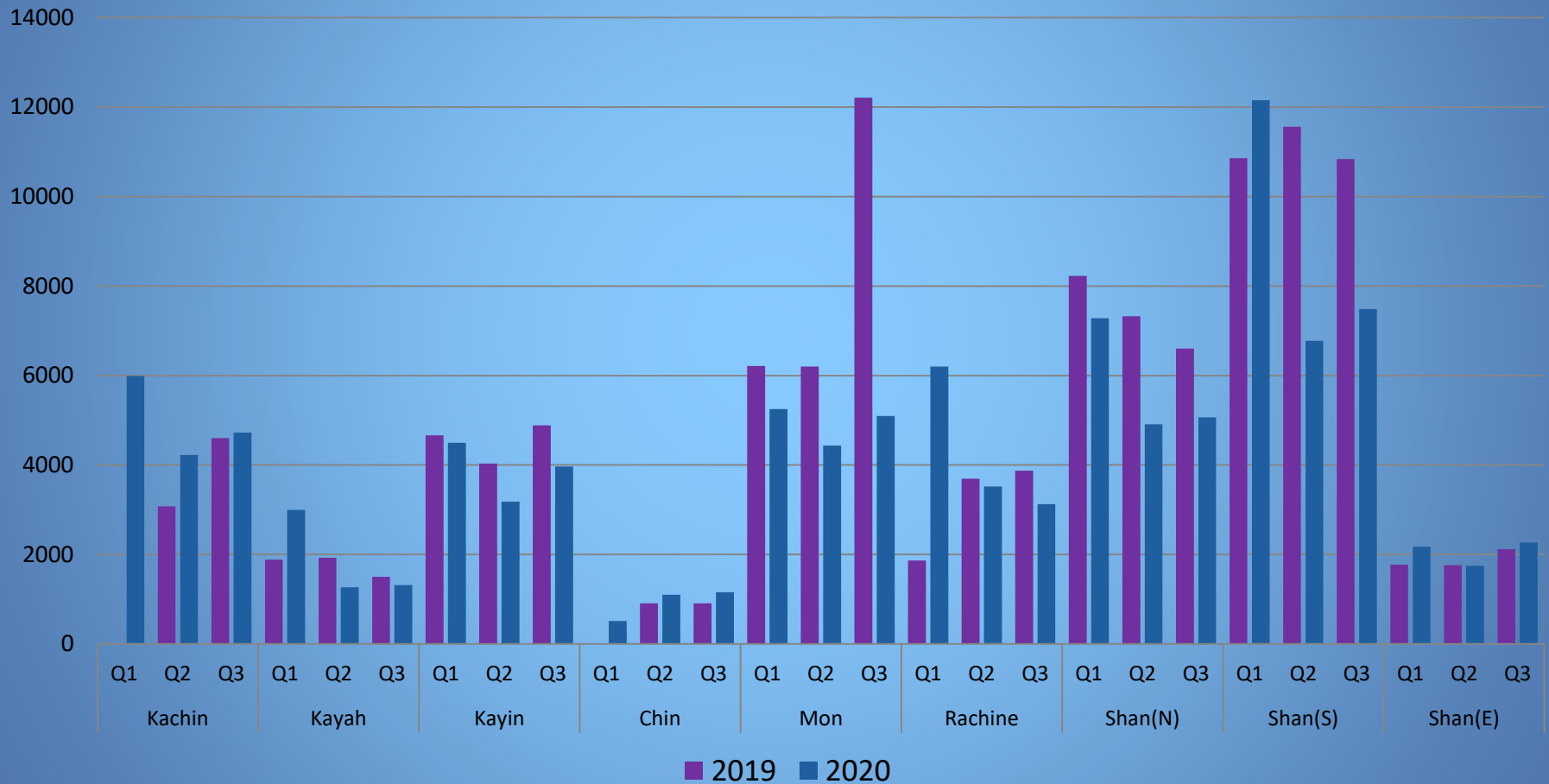
Total Screened patients at NCD Clinics (Regions)

No. of reporting townships	Q1	Q2	Q3
2019	108	107	110
2020	132	124	156

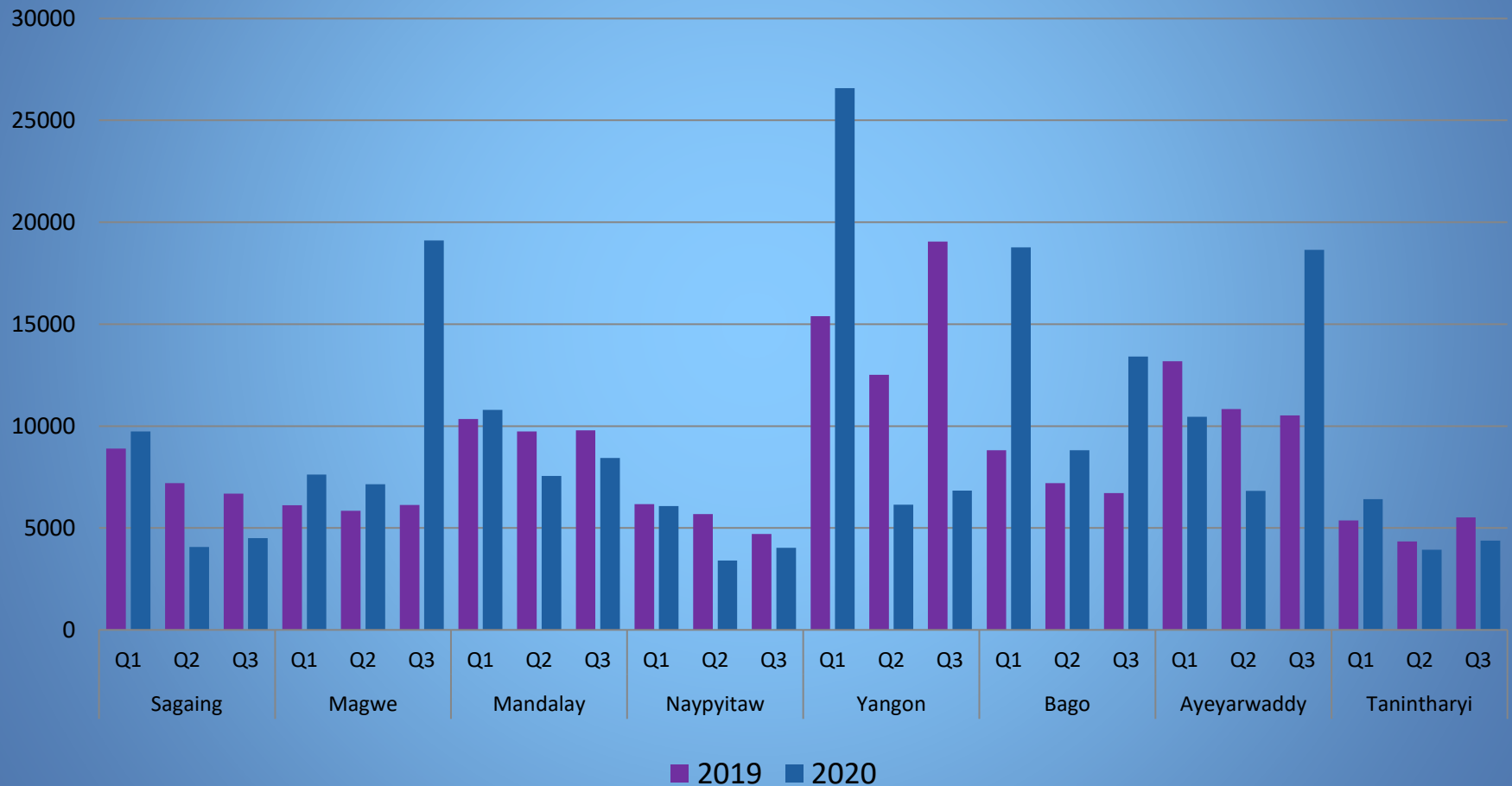


Total Screened patients (1st to 3rd Q in all S&R) - 1,293,996 in 2019 & 1,318,402 in 2020

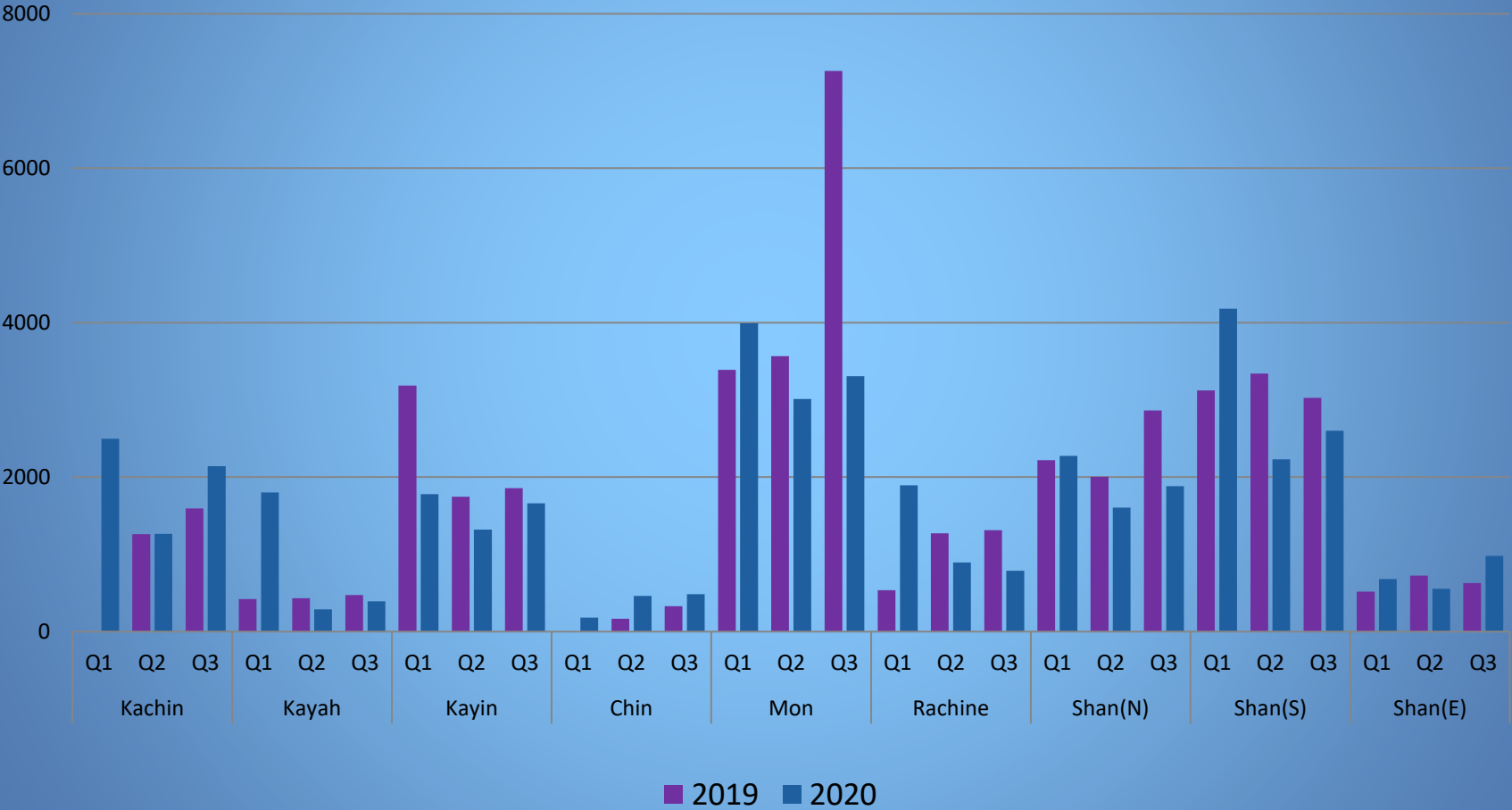
Hypertensive patients diagnosed and treated at NCD Clinics (States)



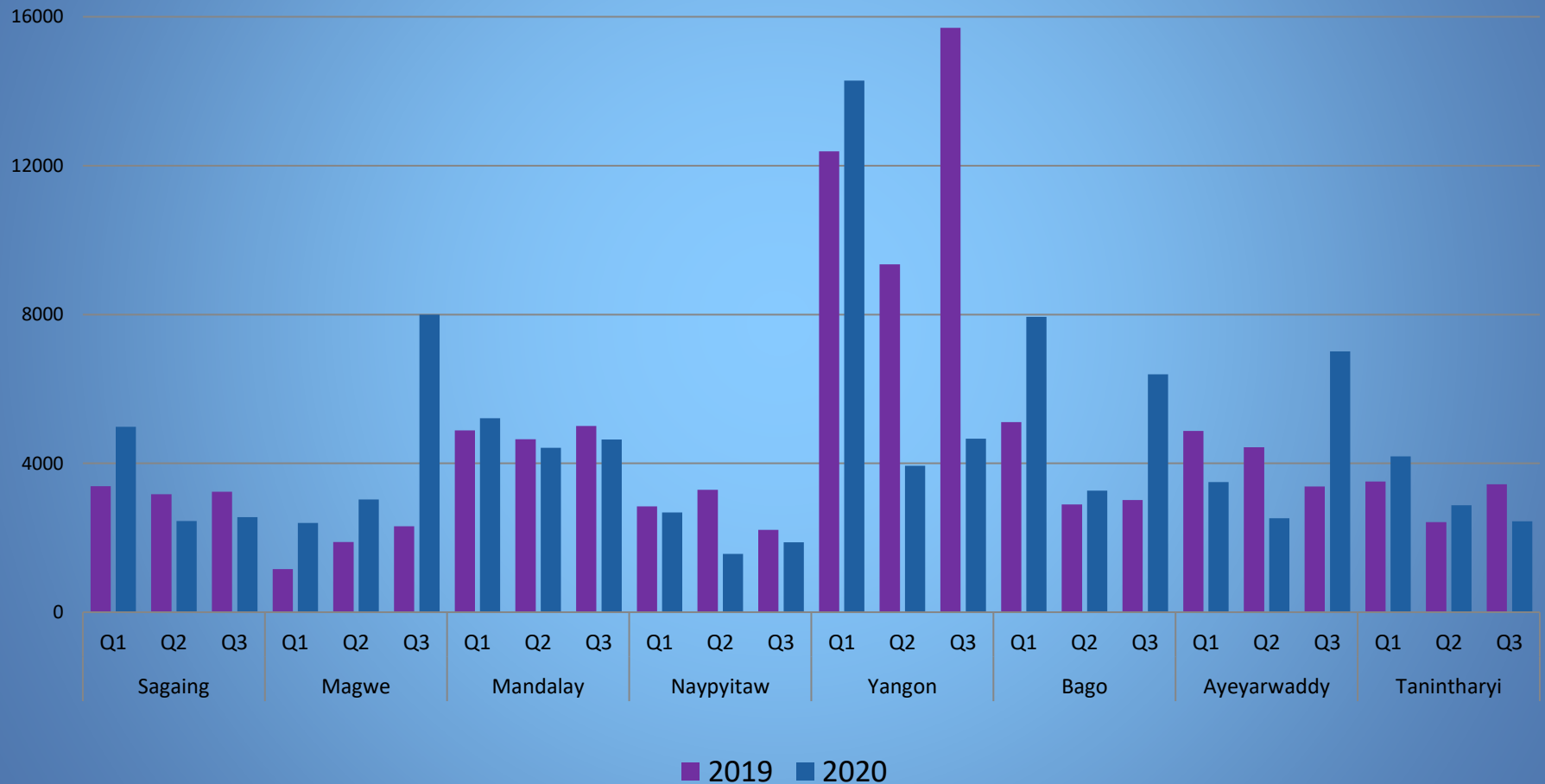
Hypertensive patients diagnosed and treated at NCD Clinics (Regions)



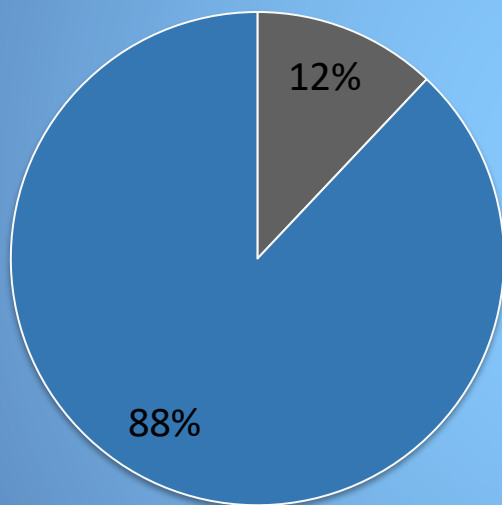
Diabetes patients diagnosed and treated at NCD Clinics (States)



Diabetes patients diagnosed and treated at NCD Clinics (Regions)



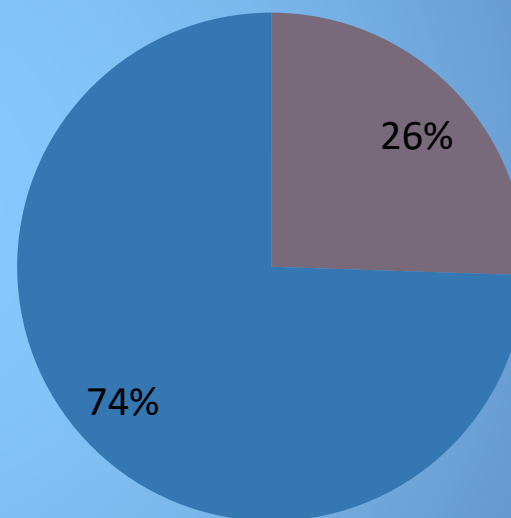
Diabetes among screened population (2019 Q1 to Q3)



■ Diabetes ■ Non-Diabetes

155,801 among 1,293,996 screened

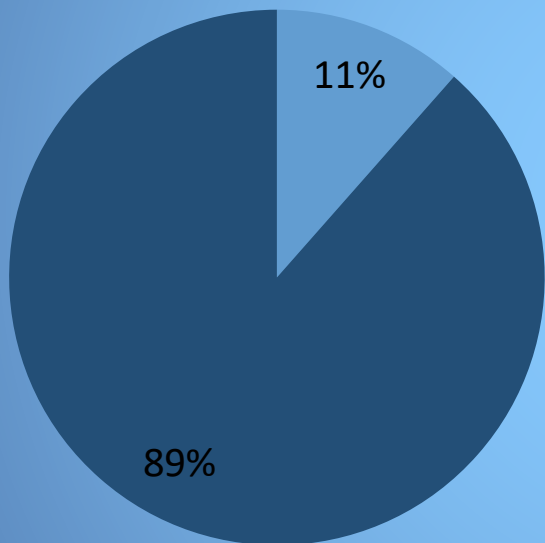
Hypertension among screened population (2019 Q1 to Q3)



■ Hypertensive ■ Non-Hypertensive

330,268 among 1,293,996 screened

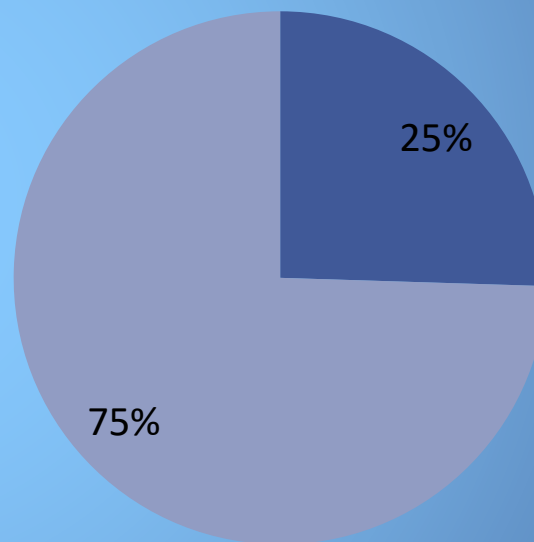
Diabetes among screened population (2020 Q1 to Q3)



■ Diabetes ■ Non-Diabetes

151,997 among 1,318,402 screened

Hypertension among screened population (2020 Q1 to Q3)



■ Hypertensive ■ Non-Hypertensive

336,101 among 1,318,402 screened

Approaches to overcome COVID – 19 related disruptions

Supply of NCD medicines

- distributed some NCD medicines to COVID – 19 centers in Ygn
- giving priority to procuring NCD medicines for all S & R with 2020-2021 budget
- preparing to distribute another round of supplying NCD medicines to COVID – 19 centers in Ygn

Task shifting / Role delegation

Plan to

- conduct online training on basic paediatric haemato-oncology including identification, diagnosis and management
- conduct online training on common emergencies in paediatric haemato-oncology and their management

	Referral Hospitals	State/Region
1	Taunggyi	Shan
2	Magway	Magway
3	Myeik	Tanintharyi
4	Hpa An	Kayin
5	Yay	Mon
6	Kaw Kayeik	Kayin
7	Dawei	Tanintharyi
8	Bago	Bago
9	Pakkoku	Mandalay
10	Nyaung Lay Bin	Bago
11	Gyo Bin Kauk	Bago
12	Pyay	Bago
13	Hinthada	Ayeyarwady
14	Pathein	Ayeyarwady
15	Kyaingtone	Shan
16	Myauk Oo	Rakhine
17	Mawlamyine	Mon
18	Phyuu	Bago
19	HLae Guu	Yangon
20	Min Bu	Magway
21	Taungoo	Bago
22	Tike Gyi	Yangon
23	Okkan	Yangon

"Type 1 Diabetes Management in Children online Training"
to paediatricians from Myitkyina, Magway, Loikaw,
Taungoo, Kyaintone, Hpa -An, Sitwee, Hinthada, Loilin,
Mawlamyaing, Yangon Children Hospital and Yankin Children
Hospital

Redirection of patients with NCDs to alternate health care facilities

Community Based Non-Communicable Disease Project

(Medical Action Myanmar - MAM)

Objectives

- To improve access to hypertension & diabetes health care services for remote communities
- To reduce morbidity and mortality due to hypertension and diabetes

Proposed Townships

Kayin - Kyainseikgyi, Thandaunggyi, Kawkareik

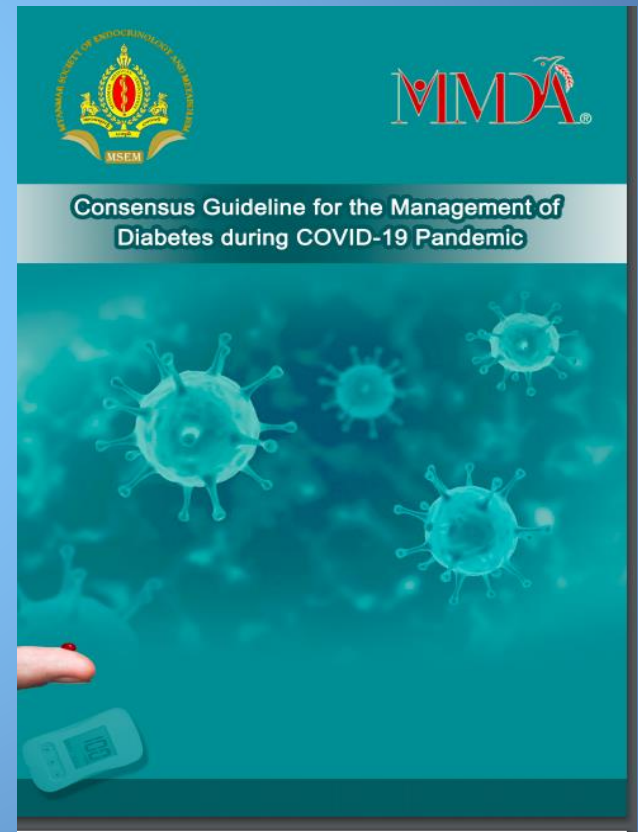
Kachin - Putao

Adapting SOP and Guideline for Cancer and Diabetes Mellitus Treatment

Cancer Care during COVID-19

- Prioritizing according to risk of each type of cancer
- Safety general measures
 - switching IV to subcu/ oral alternatives
 - using shorter treatment regimens
 - Triage system
 - Promoting tele-medicines
 - for patients: minimize time in the waiting area
- Modifying cancer treatment options (Chemo, Radio, Palliative care)
- Prioritizing systemic chemotherapy treatment
- Maximizing the safety of healthcare professionals and patients with cancer
- Supplies and sustainability of resources (man power/ safety medical equipment)

For Management of Diabetes during COVID-19



THANK YOU