

A GLOBAL PUBLIC HEALTH ISSUE

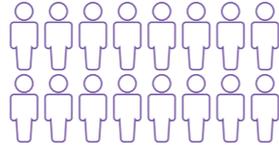
Cardiovascular Diseases (CVD) constitute a major part of Non-Communicable Diseases (NCDs) including diabetes, cardiovascular diseases, chronic respiratory diseases, cancer & mental diseases.



Driven largely by 4 main modifiable risk factors: tobacco use, unhealthy diet, physical inactivity and harmful use of alcohol, Non-Communicable Diseases are a major cause of poverty and a barrier to economic and social development.

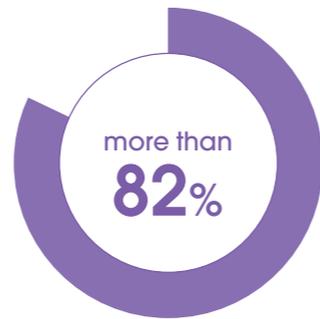


17.9 million
deaths per year⁽²⁾



CVD are **the world's biggest killers**

1 out of 10
people aged 30-70
die from CVD⁽²⁾



more than
82%
of CVD deaths
occur in low & middle-income
countries⁽⁴⁾

References:

1. <https://www.who.int/sdg/en/> - Accessed on May 20th 2020.
2. WHO fact sheet on NCDs - <https://www.who.int/news-room/fact-sheets/detail/noncommunicable-diseases> - Accessed on May 20th 2020.
3. IDF 8th Edition Diabetes Atlas 2017 - <https://diabetesatlas.org/resources/2017-atlas-html/> - Accessed on May 20th 2020.
4. <https://www.who.int/en/news-room/fact-sheets/detail/cardiovascular-diseases-cvds> - Accessed on May 20th 2020.

Our **Global Health** entity is committed to improving access to healthcare for the most vulnerable people living in **low- and middle-income countries**. Working hand in hand with partners we provide sustainable solutions for unmet medical needs with a focus on infectious diseases like malaria, tuberculosis and neglected tropical diseases, and non-communicable diseases such as diabetes, cardiovascular diseases and mental disorders.



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SANOFI GLOBAL HEALTH
IMPROVING ACCESS
TO HEALTHCARE
FOR THE MOST VULNERABLE

DIABETES AND CARDIOVASCULAR DISEASES



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SANOFI



WHAT SANOFI DOES

Sanofi is committed to **improving access to prevention, treatment and care** for people living with Non-Communicable Diseases (NCDs) in low and middle-income countries to reduce the burden of disease in full support of the United Nations Sustainable Development Goals⁽¹⁾.

Several initiatives are aiming to strengthen capacity building and access to care such as:

- **e-diabetes program** for Healthcare Professionals training.
- Establishment of **Diabetes & Hypertension clinics** in sub-Saharan Africa.
- Training of community healthcare workers (**Diabetes & Dignity** project) in India.
- Decentralized access to care through mobile technologies (mDiabetes as part of the « **Be Healthy Be Mobile** » program).

We also participate to several consortiums on improving access to NCD care such as **Access Accelerated initiative**, **PATH coalition for access to NCD medicines & products**, **NCD Alliance** for advocacy work with civil societies.

FOCUS ON



THE DIABETES AND HYPERTENSION CLINICS IN SUB-SAHARAN AFRICA

Diabetes and hypertension are chronic diseases that are a huge public health issue in Africa⁽²⁾. Still today, patients remain under-diagnosed due to lack of disease awareness and to poor access to dedicated infrastructures.

Since 2014, Sanofi supported the set-up of 31 dedicated medical structures called "Diabetes and Hypertension Clinics" in Cameroon, Senegal and Côte d'Ivoire.

This project aims to improve the management of diabetes and hypertension through capacity building (providing material for diagnostic and care, training healthcare professionals).

This initiative allowed training 1,234 healthcare professionals and treating 54,643 patients.

To reinforce this project, a digital tool has recently been launched for capturing patients data at the clinic. This is under deployment in 16 clinics in Côte d'Ivoire, Cameroon and Senegal, which are expected to become reference centers.



The disease frightened me and I was psychologically tired. It was in the Diabetes & Hypertension Clinics, near my home, that I saw the specialist. Thanks to his advice, his empathy and his listening, I started to look after myself every day and regain my confidence. And that changed the course of my life. He also helped me to meet other diabetics. Sometimes I even forget that I am diabetic too...

A patient from Senegal

Watch the video



Partners: UNFM (Unité Numérique Francophone Mondiale), Ministries of Health of Senegal, Côte d'Ivoire and Cameroon

FOCUS ON



DIABETES WITH DIGNITY

India has the second highest number of people (73 million)⁽³⁾ with diabetes, just after China. The problem in India is intensified due to its huge rural population, which face issues such as poor access to healthcare. This is complemented by issues such as illiteracy, poverty and lack of awareness about Non-Communicable Diseases.

Accredited Social Health Activists (ASHAs) are the first point of contact with the health system for villagers residing in rural settings.

With an aim to build on the existing healthcare system and resources, diabetes with Dignity project aims to pilot the feasibility and effectiveness of a model of enhanced diabetes care in adults through the empowerment of ASHAs in a rural community of district Pune, Maharashtra.

Partners: Chelledaram Diabetes Institute, PHFI (Public Health Foundation of India)

Diabetes with Dignity project showed that with the assistance of ASHA field workers, there is a direct improvement in HbA1c as well as qualitative aspects of life. It was very fulfilling and satisfying for me to be a part of this project which could have an impact on the lives of people suffering from diabetes

Dr UnniKrishnan, Chelledaram Diabetes Institute

