This study aims to enhance the delivery of quality cardiovascular disease (CVD) and hypertension (HTN) care through private health facilities in urban settings.

Background

In urban areas of Pakistan, the availability and quality of first level care in public facilities is not adequate. This makes private clinics and small hospitals an alternate ‘choice’ for first level care in urban areas. However, in the absence of a regulatory or partnership mechanism, the care delivery practices vary widely.

A Public-Private Mix model has been developed through an extensive and systematic exercise in Pakistan. This model has proved successful in TB care and can be transferred to delivering care for CVDs and HTN.

WHO’s Global Atlas on CVD prevention and control states that CVDs are the leading causes of death and disability in the world. The National Health Survey Pakistan highlighted that hypertension affects 18% of adults aged 15 years or older. Additionally, a study of urban settings found that 27.6%, 39.3% and 45.3% of hypertensive patients suffer from concomitant diabetes, hypercholesterolemia, and smoking respectively.\(^1\)

Objectives

To compare the mean change in systolic blood pressure in adult patients receiving the enhanced CVD-HTN care package with patients receiving routine care at the private facilities in Punjab.

Secondary objectives include:

- comparing the mean difference in systolic blood pressure, total serum cholesterol, and glycaemic control in adult type 2 diabetes patients receiving the enhanced CVD-HTN care package
- comparing the tobacco cessation rate in the intervention and control arms
- recording adverse events of CVD (MI, angina) and cerebro-vascular disease (stroke) among the two arms of the study
- conducting an incremental cost effectiveness analysis of managing adult hypertensive patients without associated conditions at private care facilities in Punjab, Pakistan

Study outcomes

The study will develop guidelines and tools to help achieve better case registration, adherence and hypertension control. Specifically, it will develop operational guidelines, training and supervisory support, and patient education materials.

The study will use a randomised controlled trial to evaluate the effects of delivering quality CVD-HTN care.

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COMDIS-HSD themes:

- Primary care
- Urban health care
- Accessible and user-friendly services
- Quality of care

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1. Tazeen et al, 2009