



VERONICA: deliVERy of Optimal blood pressure coNtrol in afrICA
(Nigeria) – July 2024



The George Institute
for Global Health

Facts:

- African countries have highly constrained health budgets, and there is extreme poverty in large parts of the continent.
- A recent analysis found that BP control is a cost-effective intervention, but there are gaps in evidence on BP control program elements that may affect cost-effectiveness.
- Nigeria, poised to be the 3rd most populous nation by 2050, is projected to have more than 215 million hypertension cases by 2030, emphasising the urgent need for action.

Project Cycle:

2021–2025

Partners:

The George Institute for Global Health

Local Coordinating Centre

*University of Abuja Teaching Hospital
Gwagwalada, Abuja, Nigeria*

George Institute Services India

Supporters:

The George Institute for Global Health

*National Health and Medical
Research Council (NHMRC), Australia*

The Heart Foundation, Australia

Principal Investigator:

Professor. Anthony Rodgers

Background:

- High blood pressure (BP) is the leading cause of preventable morbidity and mortality globally.
- The benefits of BP lowering in reducing cardiovascular (CV) events are well established and there is clear evidence that greater BP lowering confers a greater reduction in CV events. However, control of high BP is poor globally, with only one-in-three treated patients achieving traditional BP goals.
- Most treated patients receive only one drug, despite guidelines recognising that most patients require multiple medications to achieve target BP.
- There is broad consensus that the key factor driving this treatment gap is insufficient use of combination therapy.

Aims:

- To investigate if using three specific BP medications together is better, safer and easier to use than the usual treatment in Nigeria for controlling high blood pressure in Black African adults who either have not started treatment or are only on one medication.

Methods:

- Study participants will be recruited from participating sites in Nigeria, with additional methods such as community outreach, referrals, and ads in public places to ensure diversity and adequate representation of women and underserved populations.
- 300 individuals with hypertension, either untreated or on one BP medication, and who could appropriately be controlled with a new treatment protocol or Nigeria hypertension treatment protocol, will be enrolled in the study.
- Participants will be randomly assigned to either the intervention or comparator group for 6 months. At the 6-month follow-up, eligible participants who consent will enter an 18-month extension phase.

Impact:

- Initial findings from this research have shown that the treatment achieves rapid and long-term BP control in over 80% of patients, while being highly tolerable and safe.
- The program will develop low-cost, simple, and sustainable healthcare solutions, with affordable medications, minimal clinic visits, low-cost monitoring, and reduced strain on supply chains for multiple medications and doses.

Contact:

To find out more about this project and its principal investigators or The George Institute please contact Tina Wall +61 410 411 983 or twall@georgeinstitute.org.au

The George Institute For Global Health:

We're improving the lives of millions of people worldwide through innovative health research. Working across a broad health landscape, the Institute conducts clinical, population and health system research aimed at changing health practice and policy worldwide.