

Concept Note for the Africa CardioRenalMetabolic Summit (ACRMSummit)

Background

Cardio-renal-metabolic, including hypertension, diabetes, and chronic kidney disease (CKD) diseases represent a growing public health crisis globally. These conditions are intricately linked, often coexisting and sharing common risk factors. The interplay of these diseases amplifies their impact, leading to higher morbidity, mortality, and healthcare costs, particularly in resource-limited settings like Africa.

Hypertension in Africa

Hypertension, often termed the "silent killer," is a major public health issue, affecting an estimated 1.28 billion adults aged 30-79 years worldwide. Nearly two-thirds of these individuals live in low- and middle-income countries. Hypertension is a leading risk factor for cardiovascular diseases, which are responsible for over 20.5 million deaths annually. In Africa, the prevalence of hypertension is alarmingly high, with estimates suggesting that over 46% of adults are affected, many of whom are undiagnosed or inadequately treated. This silent epidemic is a leading cause of CVD, including heart failure, stroke, and kidney damage.

Diabetes in Africa

According to a new study published in the Lancet, more than 800 million adults have diabetes worldwide. Additionally, recent data suggests that the number of people living with diabetes globally could soar to 1.3 billion by 2050, highlighting the urgent need for comprehensive strategies to address this epidemic. The most significant increases are expected in Africa, driven by rapid urbanization, lifestyle changes, and inadequate healthcare systems. Shockingly, over 60% of people with diabetes in Africa remain undiagnosed, leaving them at risk for complications such as CKD and cardiovascular diseases. This gap highlights the urgent need for improved screening, diagnosis, and care.

Chronic Kidney Disease in Africa

CKD is a growing concern, often resulting from poorly managed diabetes and hypertension. Africa faces a disproportionately high burden of CKD due to late diagnosis, limited access to dialysis, and inadequate treatment options. CKD prevalence is estimated at **13% globally**, with Africa bearing a significant share of the burden. The condition is often undiagnosed until its advanced stages, compounding the risk of cardiovascular complications and mortality.

The Triple Threat: Coexistence of Hypertension, Diabetes, and CKD

The coexistence of hypertension, diabetes, and CKD is a critical challenge, as these conditions often exacerbate each other. For example:

- Hypertension accelerates kidney damage and increases the risk of cardiovascular events in people with diabetes.
- Diabetes is the leading cause of CKD globally, with nearly **30% of individuals with diabetes developing kidney complications**.
- CKD patients are significantly more likely to die of CVD than progress to end-stage kidney disease.

Studies reveal that individuals with all three conditions face exponentially higher risks of adverse outcomes.

In Africa, the burden of cardio-renal-metabolic diseases is rapidly increasing due to urbanization, lifestyle changes, and inadequate healthcare infrastructure. The rising prevalence of diabetes, hypertension, and CKD presents a significant public health challenge that necessitates coordinated and integrated care models to improve prevention, management, and treatment across the continent.

After the successful organization and hosting of three editions of the Nigeria Diabetes Summit (NDS) and one edition of the Nigeria Hypertension Summit (NHS), PHS Consult is poised to expand its vision and impact by launching the Africa CardioRenalMetabolic Summit (ACRMSummit). The ACRMSummit will succeed the NDS and NHS, representing a strategic shift towards a more integrated and comprehensive approach to addressing cardio-renal-metabolic health across Africa.

Justification for the Integrated Approach

Cardio-renal-metabolic conditions often coexist and share common risk factors, necessitating a holistic and integrated approach to their management. By merging the NDS and NHS into a single, larger summit, we can:

1. **Enhance Knowledge Sharing:** Provide a platform for a wider exchange of knowledge and best practices among healthcare professionals, researchers, policymakers, and stakeholders from across Africa.
2. **Promote Integrated Care:** Emphasize the importance of managing diabetes, hypertension, CKD, and other cardiometabolic conditions in a coordinated manner to improve patient outcomes.
3. **Increase Impact:** Leverage the combined resources and expertise of both summits to create a more impactful event that addresses the broader spectrum of cardio-renal-metabolic health.
4. **Foster Collaboration:** Encourage interdisciplinary and cross-border collaborations to tackle shared challenges and drive innovations in cardio-renal-metabolic health.
5. **Maximize Resources:** Utilize logistical, financial, and human resources more efficiently to host a larger, more comprehensive event.

Event Details

- **Event Name:** Africa CardioRenalMetabolic Summit (ACRMSummit)
- **Dates:** March 6th and 7th, 2025
- **Venue:** Eko Hotel and Suites, Victoria Island, Lagos, Nigeria
- **Theme:** Integrated Approaches for Cardiometabolic and Renal Health in Africa
- **Organizer:** PHS Consult

Objectives

1. **Knowledge Dissemination:** To disseminate the latest research findings, clinical practices, and policy developments in the field of cardio-renal-metabolic health.
2. **Capacity Building:** To build the capacity of healthcare professionals through interactive sessions, workshops, and training.
3. **Policy Advocacy:** To advocate for evidence-based policies and programs that address the prevention and management of cardio-renal-metabolic conditions.

4. **Innovation Showcase:** To showcase innovations in technology, treatment, and care models that can improve cardio-renal-metabolic health outcomes.
5. **Community Engagement:** To engage with patients, caregivers, and communities to raise awareness and promote preventive measures.

Proposed Tracks and Themes

1. **Hypertension in Africa:** Strategies for effective hypertension management and control across the continent.
2. **Diabetes in Africa:** Current trends, challenges, and innovations in diabetes care and management.
3. **Chronic Kidney Disease (CKD) and Metabolic Health:** Exploring the link between CKD, diabetes, hypertension, and other metabolic health issues, and strategies for effective management.
4. **Heart Failure and Cardiovascular Diseases:** Addressing the prevention, management, and treatment of heart failure and other cardiovascular diseases in the African context.
5. **Integrated CardioRenalMetabolic Care:** Approaches to managing multiple cardio-renal-metabolic conditions through integrated care models.
6. **Public Health and Policy:** Policy frameworks, public health strategies, and healthcare infrastructure improvements for cardio-renal-metabolic health.
7. **Research and Innovation:** Latest research, technological advancements, and innovative solutions in cardio-renal-metabolic health.

Key Activities

- **Plenary Sessions:** Featuring keynote speakers and thought leaders in cardiometabolic health.
- **Breakout Sessions:** Focused discussions on specific themes and topics within cardiometabolic health.
- **Workshops and Training:** Practical workshops and training sessions for healthcare professionals.
- **Panel Discussions:** Interdisciplinary panels addressing cross-cutting issues in cardiometabolic health.
- **Networking Events:** Opportunities for attendees to network and collaborate.
- **Exhibitions:** Showcasing products, services, and innovations relevant to cardiometabolic health.

Target Audience

- Healthcare Professionals (Doctors, Nurses, Pharmacists, etc.)
- Researchers and Academics
- Policymakers and Government Officials
- Industry Stakeholders (Pharmaceuticals, Medical Devices, etc.)
- Non-Governmental Organizations (NGOs)
- Patients and Caregivers

Past Sponsors of NDS and NHS

- **Novartis**
- **Roche**
- **Boeringher Ingelheim**
- **Codix Pharma**
- **New Heights Pharma**
- **Embassy Pharma**

- Society For Family Health (SFH)
- Svengen
- ISN Medical
- Evans Health
- Symbiotica
- Ifean Health
- Bond Chemicals
- The Limi Hospital

About PHS Consult

PHS Consult is a leading healthcare consulting firm dedicated to advancing health outcomes in Africa through innovative solutions, strategic partnerships, and capacity-building initiatives. With a proven track record of organizing impactful events such as the Nigeria Diabetes Summit and Nigeria Hypertension Summit, PHS Consult is committed to addressing the continent's most pressing health challenges and fostering sustainable improvements in healthcare delivery.

Conclusion

The Africa CardioRenalMetabolic Summit (ACRMSummit) represents a significant step forward in our efforts to address the growing burden of cardio-renal-metabolic conditions in Africa. By integrating the Nigeria Diabetes Summit and Nigeria Hypertension Summit into this larger, more inclusive event, PHS Consult aims to create a platform that fosters collaboration, innovation, and action towards better cardio-renal-metabolic health outcomes for all Africans.

References

1. **World Health Organization (WHO)**. "Cardiovascular Diseases (CVDs)." [WHO Fact Sheet](#). Accessed November 28, 2024.
2. **International Diabetes Federation (IDF)**. "IDF Diabetes Atlas, 10th Edition." [IDF Diabetes Atlas](#). Accessed November 28, 2024.
3. **World Health Organization (WHO)**. "Hypertension." [WHO Fact Sheet](#). Accessed November 28, 2024.
4. **International Society of Nephrology**. "Global Kidney Health Atlas." ISN Global Kidney Health Atlas. Accessed November 28, 2024.
5. **National Kidney Foundation**. "Diabetes and Chronic Kidney Disease." NKF Resource. Accessed November 28, 2024.
6. **Centers for Disease Control and Prevention (CDC)**. "Chronic Kidney Disease in the United States, 2021." [CDC Report](#). Accessed November 28, 2024.
7. **World Health Organization (WHO)**. "Global Report on Diabetes." [WHO Report](#). Accessed November 28, 2024.
8. **International Diabetes Federation (IDF)**. "Diabetes in Africa." IDF Africa. Accessed November 28, 2024.
9. **World Health Organization (WHO)**. "Noncommunicable Diseases Progress Monitor 2020." [WHO Report](#). Accessed November 28, 2024.
10. **Global Burden of Disease Study 2019**. "Global Burden of 87 Risk Factors in 204 Countries and Territories, 1990–2019: A Systematic Analysis." The Lancet. Accessed November 28, 2024.