

ARISE

African Research And Innovative Initiative For Sickle Cell Education

# Train-the-Trainer Workshop Abuja, Nigeria 11th – 13th September 2019

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INTERNATIONAL COLLABORATIONS IN BDTH – KASU: ARISE, ASH consortium, SPARCO (SADaCC, SickleGenAfrica, SPAN (SICKLE PAN AFRICAN NETWORK) & sickle cell coalition

- Stroke Prevention in Nigeria (SPRING)
- The Sickle Pan-African Research Consortium (SPARCO)
- American Society of Hematology (ASH)
- Kaduna State Newborn Screening of Sickle Cell Disease (KD-NBS)
- African Research Innovative Initiative for Sickle Cell Education (ARISE)



### Nigeria Demography



**Population Est.** 200.96m (2019 proj.)

**Population Growth Rate:** 2.6% (2017 est.)

**Birth Rate:** 38.89 births/1000 births

**SCD births:** >150,000/year in Nigeria

**Death Rate:** 12.4 deaths/1,000 population (2017 est.)

Inusa, et al., Pediat Therapeut 2015, 5:3 DOI: 10.4172/2161-0665.1000262
<u>https://nigerianstat.gov.ng > download</u>

### Kaduna Demography



**Population Est.** 8.9m (2019 proj.) **Population Growth Rate:** 2.6% (2017 est.) Birth Rate: 38.89 births/1000 births **Delivery by health professionals:** 40.4% Delivery without assistance: 28.8% **Facility based delivery rate:** 32.4% Antenatal visit attendance: 30% (2008), 43.8% (2017) Kaduna Pilot NBS (2010-2011): 4000 babies

Inusa, et al., Pediat Therapeut 2015, 5:3 DOI: 10.4172/2161-0665.1000262 https://kdbs.ng/app/uploads/2019/06/KADUNA-STATE-SDGs-WATCH-1.pdf <u>https://nigerianstat.gov.ng > download</u>

### **Growth Rate**



### How and Why They Need to Relate



### SPARCO: BDTH in a nutshell

Learning points from SPARCO		Enrolment Clinic Genetic Counseling
KD – NBS hub at BDTH	Areas that are critical in building this infrastructure are SCD database, standards of care, training and planning for future research	Sickle health education MDTs Community awareness Adherence counseling Research Transition web-based database
SickleGenAfrica (Sickle Cell Disease Genomics in Africa)	To develop prognostic biomarkers of organ damage through the discovery of key genetic modifying factors and cognate mechanisms Build capacity and career pipelines in Africa to support patient-centered research To advance the development of innovative therapy for SCD	
SPAN (Sickle Pan-African Network) involving 20 sites in 15 countries	Develop a sickle cell disease (SCD) database (SCD registry) Establish standards of care Strengthen skills and plan research Implementation studies (newborn screening, infection prevention and Hydroxyurea)	
SADaCC (Sickle Africa Data Coordinating Centre)	Support the activities of a companion SCD Network in Africa Provision of support and maintenance of a centralized e record of sickle Haemoglobinopathies for research and improve clinical care	
Outcome - BDTH	Data - SMOH/FantsuamPaediatric enrolment clinicStandard of Care - SPRING, ASH, SPHCDA, ARISE, MDTsRegistered 73 so farEMR - BDTH HIMSAdult enrolment clinicAwareness - SPRING, SSCFRegistered 150 so far	

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#### http://grantome.com/grant/NIH/U24-HL135881-01

### Database development: Process



### ARISE Project : Acronym: ARISE

- Title: <u>African Research and Innovative Initiative for Sickle cell</u> <u>Education: Improving Research Capacity for Service Improvement</u> <u>(ARISE):</u>
  - Project Number:824021:
- Consortium of 15 institutions
- Africa, Europe, and the US

H2020-MSCA-RISE-2018, https://www.kcl.ac.uk/archive/news/solcs/2018/king's-and-evelina-collaboration



### Kaduna ARISE



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### **ARISE through Kaduna NBS**





### Impact on BDTH - KASU

- On-going exchange
- BDTH/KASU to FGB (Fondazione Gianni Benzi Onlus | Gianni Benzi Foundation)

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- Planned last quota 2019 exchange
  - BDTH/KASU to Royal College of Pathologists (UK)

• 2

- KASU to Guys and St. Thomas'(London)
  - 3



### **ARISE leadership mix in BDTH**

- Clinicians (Paediatricians, Haematologists and Obstetrician and Gynaecologists)
- Basic clinical researchers
- Implementation scientists
- Public health specialist
- Administrators
- Social Scientists
- Educationists



#### SPRING: Primary Prevention of Stroke in Children With Sickle Cell Disease in Sub-Saharan Africa II

- NIH/NINDS funded
- Study type: Interventional (Phase III Clinical Trial) multi-centre (Kano and Kaduna, Vanderbilt University as Coordinating Centre)
- Estimated enrolment: 400 participants
- Allocation: Randomized
- Intervention Model: Single Group Assignment
- Masking: Double (Investigator, Outcomes Assessor)
- Primary Purpose: Prevention



### Delivery

- Target age: 5-12yrs
- Labs CBC, Urea, electrolytes, creatinine, urinalysis, HPLC
- TCD
- Hydroxyurea
- Media Radio jingles
- Community based organizations Sickle Cell Patient Health Promotion, Sickle Cell Aid Foundation (SCAF)



### Benefit/outcome

- Abnormal TCD on hydroxyurea 50
- Conditional monitored
  - High 2 weekly
  - Low 3 months
- Institution of standard of care model
  - Regular routine labs every 3 months
  - Penicillin
  - Improved hydroxyurea uptake
  - Supplements: Vitamins, Folic acid
  - Malaria prophylaxis
  - Health education
- Commitment of government to procure hydroxyurea for confirmed abnormal TCD not in the study
- Training for TCD
- Capacity building in research for the team



### ASH Sickle Cell Disease Initiative

- multifaceted initiative to address the burden of sickle cell disease (SCD)
- In 2016, the <u>Sickle Cell Disease Coalition</u>(SCDC)
  - Improve outcomes for individuals with SCD
  - Facilitate innovative approaches to clinical trials research
  - Expedite drug development

http://scdcoalition.org/global



#### ASH: African Newborn Screening and Early Intervention Consortium

#### <u>Background</u>

- Consortium of sub-Saharan African countries
  - Nigeria (2 sites, Kaduna, Abuja)
  - Tanzania
  - Zambia
  - Ghana
  - Kenya
- to address newborn screening for sickle cell disease (SCD)
- introduce standard-of-care practices for screening and early intervention therapies
- goal of decreasing childhood mortality rates for SCD



### ASH SCD Consortium: Structure and Governance



### ASH SCD Consortium: Lab Organogram for Kaduna Site



#### Kaduna NBS Structure and Governance





### Impact of the Collaborations

- Established protocol for standard of care
- Multidisciplinary teams (MDTs)
- Increase hydroxyurea uptake
- Improved community awareness
  - Media
  - Students
- independent and inter-dependent approach to collaboration
- Program linkage through a fulcrum
- Role definition and ease of operation by team capacity building
  - Research nurses
  - Genetic counselling team
  - Hydroxyurea counselling and monitoring
  - Patient support group
  - Ease of patient recruitment and tracking



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- SickleGen Africa
- The Sickle Pan-African Network (SPAN)
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- HB Manga, SPRING BDTH Kaduna PI
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- NBS-Multiple Indicator Cluster Survey (MICS 2016/17)
- Haematology Department, Barau Dikko Teaching Hospital (BDTH) & Kaduna State University (KASU), Kaduna



## Thanks for Listening







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