CORRESPONDENCE

The burden of cardiovascular disease in sub-Saharan Africa

To the Editor: In the article "The burden of cardiovascular disease in sub-Saharan Africa" by Anthony Mbewu (SA Heart Summer 2009) the hidden epidemic of children with heart disease in Africa is significantly underplayed. (1) There is no evidence that the incidence of rheumatic heart disease (RHD) is decreasing, and its incidence is generally underestimated. The World Health Organisation suggests an incidence in sub-Saharan Africa (SSA) of 5.7 per I 000 population, (2) while reports based on auscultatory screening of school children give incidences of 2.7 to 20 per I 000.(3,4,5) In contrast, reports based on echocardiography give higher incidences; using echocardiography to study 2170 school children in Mozambique, Marijon and colleagues found an incidence of 30.4 per I 000.⁽⁶⁾ It would appear that the true incidence of RHD in SSA is much higher than was previously thought, and there is an urgent need for prevention programs.

Congenital heart disease (CHD), the commonest lethal congenital defect and most significant non-communicable disease in SSA,(7) will become increasingly prominent if the epidemiological transition becomes a reality for children. CHD is also underestimated by Mbewu, who gives an incidence of 2.0 per I 000, with ventricular septal defect, atrial septal defect, patent ductus arteriosus, and Fallot's Tetralogy making up 85% of the cases - data taken from a study of 13 322 school children in Sudan. (8) However, school populations give low CHD estimates, because without treatment many die early, (9) and survivors are often unable to attend school. (9,10) Most studies agree on an incidence of "significant" congenital heart disease (i.e. what will require cardiological care) of about 1% of live births or slightly less,(11,12,13,14) with eight common lesions making up 85% of all CHD.(13) With only minor variations, CHD incidence is constant worldwide, irrespective of socio-economic conditions.(11,13,15) Thus, of the approximately 50 million children born live annually in Africa, (16,17) as many as 500 000 have significant CHD, with an additional pool of older children and adults who have survived the early years.

It is important that we work with an accurate understanding of the burden of childhood cardiovascular disease, so as to establish appropriate research, increase awareness of the burden, and develop effective strategies to deal with it in this vulnerable population.

J. Hewitson, S. Brown, C. Hugo-Hamman, L, Zühlke, E. Hoosen and J. Harrisberg

Paediatric Cardiac Society of SA Executive Committee

REFERENCES

- 1. A Mbewu. The burden of cardiovascular disease in Sub-Saharan Africa. SA Heart lournal, 2009;6(1):4-10.
- World Health Organisation. 2001. Rheumatic fever and rheumatic heart disease. Report of a WHO Study Group. Geneva. WHO Tech Rep Ser. 2001; 923. http://www.who.int/cardiovascular_diseases/resources/trs923/en/ (accessed August 2009).
- 3. Tibazarwa KB, Volmink JA, Mayosi BM. Incidence of acute rheumatic fever in the world: a systematic review of population-based studies. Heart. 2008 Dec; 94(12):1534-40
- 4. Longo-Mbenza B, Bayekula M, Ngiyulu R, et al. Survey of rheumatic heart disease in school children of Kinshasa town. Int J Cardiol. 1998 Feb 28;63(3):287-94.
- McLaren MJ, Hawkins DM, Koornhof HJ, et al. Epidemiology of rheumatic heart disease in black school children of Soweto, Johannesburg. BMJ. 1975;3:474-478.
- Marijon F. Ou P. Celermaier DS, et al. Prevalence of rheumatic heart disease detected by echocardiographic screening. N Engl J Med. 2007 Aug 2;357(5):470-6.
- Christianson A, Howson CP and Modell B. (2006) March of Dimes global report on birth defects: the hidden toll of dying and disabled children. Research report. 2006. March of Dimes Birth Defects Foundation, White Plains, USA. http://www. marchofdimes.com/MOD-Report-PF.pdf. Accessed August 2009.
- 8. Khalil SI, Gharieb K, El-Haj M, et al. Prevalence of congenital heart disease among school children of Sahafa Town, Sudan. Eastern Mediterranean Health Journal 1997-3-24-28
- 9. Children's HeartLink. Global Report on Pediatric Cardiac Disease To Save a Child: We can do more to address global trends in pediatric heart disease. 2005. http://www.childrensheartlink.org/documents/ChildrensHeartlinkStudy.pdf (accessed August 2009).
- 10. Thakur JS, Negi PC, Ahluwalia SK, et al. Integrated community-based screening for cardiovascular diseases of childhood. World Health Forum. 1997;18(1):24-7.
- 11. Children's HeartLink. Global Report on Pediatric Cardiac Disease Linked by a common purpose. 2007. http://www.childrensheartlink.org/documents/Global% 20Report%205-17.pdf (accessed August 2009).
- 12. Vaidyanathan B, Kumar RK 2005. The global burden of congenital heart disease. Congenital Cardiology Today. 3(10):1–8.
- 13. Hoffman JIE, Kaplan S.The incidence of congenital heart disease. J Am Coll Cardiol 2002:39:1890-900.
- 14. Leblanc JG. Creating a global climate for pediatric cardiac care. World J Pediatr, Vol 5 No 2. May 15, 2009.
- 15. Abdulla R. Congenital heart disease management in developing countries. Pediatr Cardiol 2002. 23:48 I-482.
- 16. Population Division of the Department of Economic and Social Affairs of the United Nations Secretariat. World Population Prospects: The 2008 Revision: Highlights. New York: United Nations. http://www.un.org/esa/population/ publications/wpp2008/wpp2008_highlights.pdf Accessed August 2009.
- 17. UNICEF report: The State Of The World's Children 2009. http://www.unicef.org/ sowc09/report/report.php Accessed August 2009.

