



The Pan-African Society of Cardiology (PASCAR)
Department of Medicine Faculty of Health Sciences
University of Cape Town
Observatory 7925
Cape Town, South Africa

PO Box 26716, Monument Park, 0105 South Africa

African Union Communiqué on Eradication of ARF and RHD

Action Group 2 Meeting Minutes

23 February 2017, Skype Conference Call

Time: 15h00 – 16h00 (South African Time)

1. **Welcome and Opening Remarks** – Sulafa Ali (SA),
2. **Attendees:** Sulafa Ali (SA), Aidan Long (AL), Geoffrey Madeira (GM) and Janette Lombard (JL)
3. **Summary of meeting**
 - Survey
 - Received 32 responses in total from 16 different countries
 - JL sent Prof Bongani (BM) list of countries we received responses, perhaps he can provide additional contact details of people from countries we have no participants from (done)
 - AL: Should lock the dataset at some stage (survey will close in 4 weeks) This will help finalise the Skin Testing Guideline
 - Meeting with BM
 - Discussed specific objectives for this action group for 2017 (for the coming 6 months)
 - Report on Action Group activities (attached)
 1. Disseminating Administration Guideline book after finalised
 2. Conducting training courses (Zambian experience) – Modules and training in Primary, Secondary and Administration of Penicillin
 - Start with PASCAR Sudan Congress (Oct 2017), add “Training of Trainer Workshop”
 - Each country to conduct course in own country
 3. Publish Skin Testing Guidelines
 4. Improving availability and quality of BPG
 - Finalising the Administration Guide
 - Sandoz (Florian Falch - FF) postponed the meeting - 9 March (working on preliminary draft)
 - BM suggests that PASCAR / clinical review for improvement – to make sure that information is relevant to all countries
 - AL: Write section about Lidocaine and section about the patient with very poor Cardiovascular reserve (draft 2 paragraphs to possible include as addendum)
 1. GM to help with review of Lidocaine (then AL to send to FF)
 - Sandoz doesn't want to recommend what they consider as “non-approved practices” (diluted with another drug not yet approved practise)
 - Administration Guide and Module should have same message (with information on Lidocaine) Share successes and description of drug - but it can't reduce pain & is expensive
 - Possible research idea for PASCAR : Lidocaine
 - GM: Could we also send patients for psychological services? (After Penicillin as secondary prophylaxis) – To improve knowledge of disease (might not be easy to implement)
 - Some NCD (HIV) have such services

PASCAR Governing Council - Prof Bongani Mayosi, South Africa, President; Prof Samuel Omokhodion, Nigeria, Immediate Past Secretary General, Dr Benedict Anisiuba, Nigeria, Secretary General; Prof Karen Sliwa-Hahnle, South Africa, Treasurer; Prof Patrick Commerford, South Africa, Editor (Cardiovascular Journal of Africa); Prof Serigne Ba, Senegal, Vice-President West; Dr Saad Subahi, Sudan, Vice-President North; Prof Ana-Olga Mocumbi, Mozambique, Vice-President South; Prof Elijah Ogola, Kenya, Vice-President East; Dr Anastase Dzudie, Cameroon, Acting Vice-President Central; Dr Harun Otiemo, Kenya, Assistant Secretary General East; Dr Awad Mohamed, Sudan, Assistant Secretary General North; Prof Johan Brink, South Africa, Assistant Secretary General South and Prof Toure Ali Ibrahim, Niger, Assistant Secretary General West.

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- Training Modules

- Sudan BPG Administration Module to adapt/merge with the Zambian Module (attached) for final product – will need clinical reviewing for training package
- AL: Zambian Training Module developed over time (flipchart, educational video available) - Not formalised
 - AL, Sherri Schwaninger & Jonathan Spector will make Module more compact before we present it
 - Report from the Clinton Health Access Initiative (CHAI) – to establish training for Administration of Penicillin and concerned for adverse reactions (commissioned by The Gates Foundation to do better training on the ground – to increase BPG usage)
 - We (PASCAR) should approach them, is this something that they can consider funding?
 - This could help with funding for training Workshops and duplicating Modules
 - SA: Rosemary Wyber (RW) possible contact person (CHAI Report not yet out)

- Publish Skin Testing Guideline

- Paper almost complete – concern to where to send it to get it published quickly
 1. CVJA – takes too long (BM could help)
 2. Magdi Yacoub Journal (could get it published quickly)
- Whole of working group 2 should be the authors of the paper (gives more weight)
- AL did send FF information (Des 2016) on the skin testing to possibly add to the Administration Guide
 1. Should have it included in 2nd part of book or addendum, rather than in main body (to not raise the fear barrier, but to make information available)

- Improving availability and quality of BPG

- RW conducting study in Australia – wait for her results (instead of duplicating) – as we need more data
- AL: Quality Testing: Is there a time limit in this research project?
 1. SA: RW collecting samples from different countries to test, Africa using more or less the same brands (study could be enlightening to us)
 2. AL: When will she be making a statement?

4. Next steps, specific tasks

- **AL:**
 - i. Write two sections and ask FF to possibly add it to Administration Guide (send to GM for review)
 - ii. Will contact RW for us to inquire for funding (Clinton Health Access Initiative)
 - iii. Ask BM to help with publishing 1st Paper in CVJA & inquire for the 2nd Paper
 - iv. Compact Zambian Module (with JS & SS)
- **GM:** Review paragraph on Lidocaine sent from AL
- **JL:** Send Survey out final time (close in 4 weeks)
- **SA:**
 - i. Will contact RW on Research Study (time line) Sample testing – Discuss this on Sandoz meeting (9 March)
 - ii. Work on merging/adapting Sudan and Zambian Module for all to review

5. Other business

6. Closed with thanks

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