

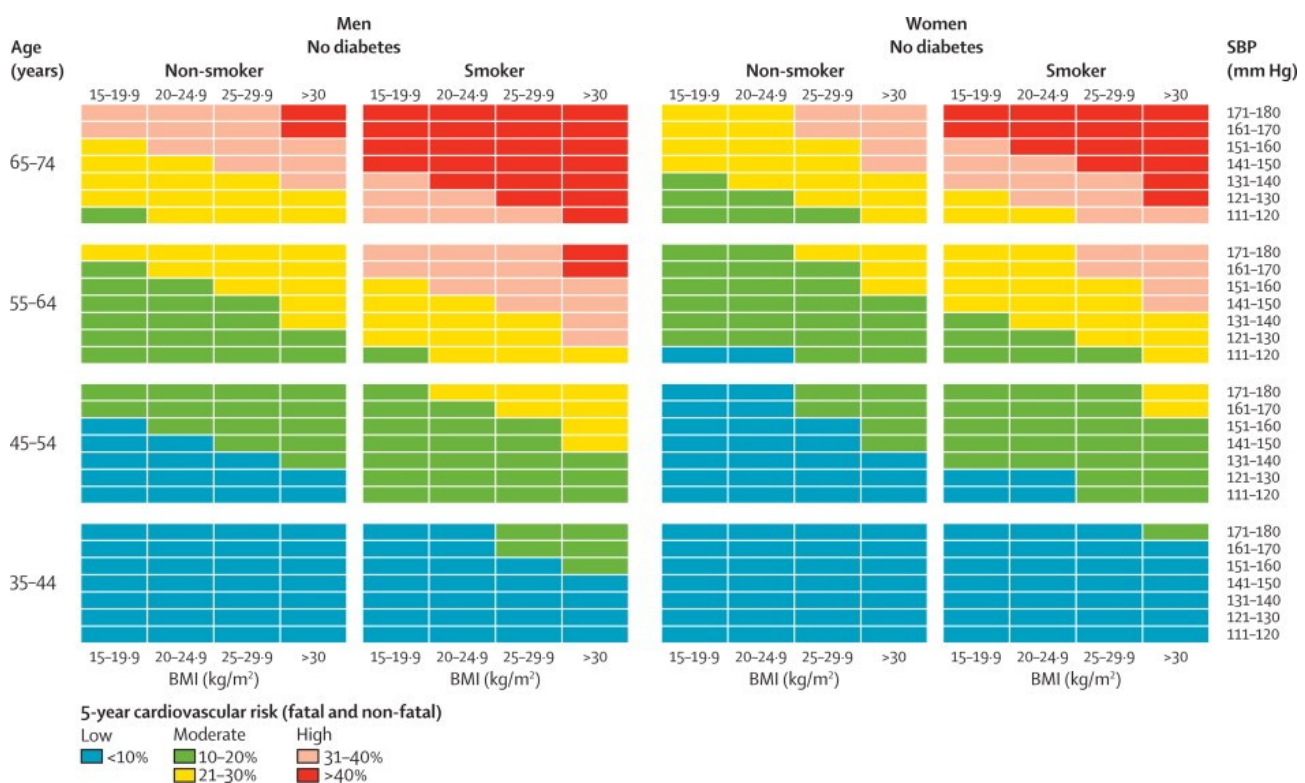
A positive prognosis for community-based NCD screening

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A [study published this month](#) by *The Lancet Global Health* is the first to demonstrate that community health workers (CHWs) in low- and middle-income countries can be trained to screen effectively for cardiovascular disease risk, a major cause of non-communicable disease (NCD) morbidity and mortality.

Over 4000 community members between the ages of 35 and 74 in four countries – Bangladesh, Guatemala, Mexico and South Africa – were screened by 42 CHWs using a simple, colour-coded risk identification tool (shown below). The CHWs' performance was validated by comparing the risk scores they generated to scores generated independently by health professionals (physicians and nurses). On average, 96.8% of the time the CHWs' assessment matched that of the health professionals.



The study findings suggest that community-based NCD screening is potentially a useful addition to the [arsenal of tools and interventions](#) that are needed to address the [NCD epidemic engulfing much of the Pacific](#). Many Pacific island communities also struggle with poor access to professional health care, and could benefit from the services of a CHW who can identify those people who are at high risk of developing cardiovascular disease at an early stage.

Promising though the findings may be, there are some important caveats to note. The Lancet study simply provides proof of concept; the [sustainability of CHW programs](#) when taken to scale often proves logistically challenging, as do the [ethics of 'task-shifting'](#) to CHWs (who are not infrequently volunteers). And while identifying the patient early is an important first step, most NCDs are chronic conditions that typically need long-term management – which requires that patients can access professional health care on a regular basis.

But despite the challenges of implementation, community-based screening for NCDs should not be

dismissed out of hand, given [the difference that early detection can make](#). And, importantly, there may also be financial incentives associated with this model – as the authors highlight in their conclusion, there may be significant cost efficiencies to be gained from community-based NCD screening (though a cost-effectiveness study has not yet been done, and the outcomes would likely vary significantly by the specific setting).