Voluntary Medical Male Circumcision as a Platform for Non-Communicable Disease Case Finding in Namibia

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Background
- The burden of non-communicable diseases (NCDs) is increasing in sub-Saharan Africa, particularly in urban areas, with evidence of considerable underdiagnosis.
- A systematic review of HTN in sub-Saharan Africa found that less than 50% of people with HTN had been previously diagnosed.
- HTN is more prevalent in African males and increases with age.
- Males, who seek health care less than females, are particularly likely to suffer from undiagnosed HTN and other NCDs.

In Namibia, it is estimated that 30% of the urban populations are living with HTN.

Methods
- Optimal VMMC service delivery infrastructures provide ideal health screening opportunities, including RCD screening.
- The Namibian Ministry of Health and Social Services and Jhpiego launched high-volume, nurse-led VMMC services at Swakopmund State Hospital in Erongo Region, Namibia, in May 2016.
- Over 65% of the clients served through July 31, 2016, were aged 20 years or older, in contrast to VMMC clients across eastern and southern Africa, the majority of whom have been aged between 10 and 19 years.

HTN Screening
- All clients received full physical screening prior to VMMC services, including preparatory screening for HTN, diabetes, bleeding disorder, and other NCDs.
- Blood pressure (BP) was measured using the appropriate cuff size and taken at the level of the heart.
- Clients presenting with BP of 140/90 mmHg were remeasured after progressively assisting intervals of rest (1, 2, and 30 minutes), as needed.
- If BP remained elevated after four measurements, clients were referred to the Outpatient Department for review and management, and surgery was deferred.

Results
- Of the 1,266 males screened for VMMC between May 13 and July 31, 2016, 367 (29%) were suspected to suffer from HTN due to a BP reading of at or above 140/90 mmHg.

Conclusions
- VMMC programs seeking to attract a greater proportion of males aged 15–29 should consider HTN case finding.
- NCD programs seeking to attract more individuals of older age for HTN screening should leverage VMMC programs for HTN and other NCD screening.
- HTN and diabetes programming offers an important opportunity for HTN and other NCD case finding, particularly in programs serving male adolescents aged 15–49 in geographic areas where considerable underdiagnosis is evident.

References