

Three Global Health Challenges — and Strategies for Change (9 min read)

Access to Medical Information

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Every year, one million children fall ill with tuberculosis². Fourteen million people are newly diagnosed with cancer³. Two hundred fourteen million new cases of malaria⁴ were still recorded in 2015. Four hundred million people have no access to any healthcare at all⁵, and two billion people cannot access the medicines they need⁶. This is more than one in every four people worldwide. At the same time, the global cost of healthcare by 2013 had jumped to over USD 7.35 trillion⁷.

The global community faces a double challenge: significant parts of the world's population still lack access to even the most basic medicines. And still, healthcare costs and the financial burden on societies and individuals continue to rise⁶. Sandoz's own research on global access to healthcare has led us to group these challenges into three distinct areas. We believe that all societies need to:

- Build medical capacity
- Increase access to medicines
- Improve access to medical information

We believe that each of these challenges demands a unique approach. And each approach must be multifaceted, because societies must search for solutions on several levels. Here, we look at some strategies that can help to bring change.

1. Build Medical Capacity

Nearly 400 million people lack access to essential health services⁵.

In rich and poor nations alike, millions of people lack access to essential health services. This can be because national systems are not able to cover overall medical costs, leaving payments to come from out-of-pocket expenses that can drive individuals into bankruptcy or poverty. Sometimes the systems themselves are unable to provide people with the medicines, information or capacity to deliver needed healthcare.

Image courtesy of World Health Organization
In the town of Dorf Ocote Tuma, Nicaragua, a nurse runs a small health station to compensate for the lack of a clinic in the region. Credit: Esteban Felix/Archivolatino/laif

Whatever the reason, the outcome is the same – a lack of access to essential health services.

Providing universal health coverage, worldwide – which could be a reality in the coming years – is for many experts the key to providing a solution.

“I regard universal health coverage as the single most powerful concept that public health has to offer,” says

Dr. Margaret Chan, Director-General of the World Health Organization (WHO)⁸.

In practice, this focus on universal health coverage is bringing significant results. More than 100 low- and middle-income countries, home to three-quarters of the world's population, are taking steps in this direction⁹.

In addition to the major systemic initiatives, access is also increasing through smaller, local initiatives. In many regions, health policy increasingly focuses on local efforts to improve medical services, such as making births safer for women and children in sub-Saharan Africa.

Technology is showing promise as an enabler for increasing access to healthcare. For example, telemedicine – medical contact through mobile phones – has the potential to bring health services and advice to more people than ever before.

2. Increase Access to Medicines

Almost two billion people cannot access medicines they need⁶.

We believe, increasing access to medicines has to take many forms – there is no simple, one-size-fits-all solution. Here are some examples from the Novartis Group, of which Sandoz is a division, and their own work in this area:

Partnerships with NGOs

Sandoz partners with the UN to help avoid millions of preventable deaths from pneumonia in developing countries. To date, Sandoz has delivered 500,000 treatment courses of the WHO-preferred medicine for pediatric pneumonia to UNICEF.

Multilevel Programs

Multilevel programs that combine access to medicines, R&D and capacity building, are one example, to fight malaria. Nearly half of the world's population – approximately 3.2 billion people – are at risk of malaria¹⁰.

Kampala, Uganda

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Every two minutes, a child dies from malaria — most of them under the age of five. The problem: Most parents don't know enough about the dangerous infection or they just can't afford to visit a doctor (here in Kampala, Uganda). Credit: Jiro Ose 2015 Redux/laif

The biggest slum in Daressalam, Tansania, offers breeding opportunities for mosquitoes as the Anopheles, which oft

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The biggest slum in Daressalam, Tansania, offers breeding opportunities for mosquitoes as the Anopheles, which often carries the malaria virus. The female mosquito lays her eggs in the stagnant, thousands of mosquitoes hatch every day, and can spread malaria to the inhabitants. Credit: Lorenzo Moscia/ArchivolatinoArchivolatino/laif

This man, working for the organization Malaria Consortium notes on the house wall how many people living there are

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Prevention is the easiest way to avoid getting infected by malaria. Therefore NGOs offer bed nets to the people living in endangered areas. This man, working for the organization Malaria Consortium notes on the house wall how many people living there and how many need a mosquito net. Credit: William Daniels/VISUM

This woman working for the organization tells people on a street in Djibouti how important vaccination and prevention are for their health.

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UNICEF organizes campaigns throughout Africa to inform people about health topics. This woman working for the organization tells people on a street in Djibouti how important vaccination and prevention are for their health. Credit: Anthony ASael/HOA-QUI/laif

A different kind of education. In Liberia, paintings warn how dangerous a malaria infection is

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A different kind of education. In Liberia, paintings warn how dangerous a malaria infection is. Even people without any access to news will learn from such pictures. Credit: Panos Pictures / VISUM

by hanging bed nets

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Another painting shows how parents can protect themselves and their children from getting infected: by hanging bed nets. Credit: Panos Pictures / VISUM

In the world's most threatened regions, the [Novartis Malaria Initiative](#) [1] has provided more than 800 million treatments without profit since 2001¹¹. For the future, the Novartis Malaria Initiative is conducting research and development for the next generation of antimalarials.

Innovative Social Business Models

[Novartis Access](#) [2], launched in 2015, is a group-wide initiative that supports expanded access to our medicines in low- and lower-middle income countries. The program provides 15 on- and off-patent medicines addressing key noncommunicable diseases (NCDs) – cardiovascular diseases, diabetes, respiratory illnesses and breast cancer.

Widespread Use of Generic Pharmaceuticals

Use of generic medicines allows budget-constrained healthcare systems to provide access to more medicines for the same, or less, money.

Between 2005 and 2015, for the same budget, generic competition allowed **twice as many patients** access to medicines for key therapeutic areas such as diabetes, depression, epilepsy, cardiovascular disease, hypertension, asthma/COPD or gastro-intestinal disease.

Medicines for Europe

In addition to generics, the use of biosimilars, a new generation of biological medicines, can save healthcare systems billions of dollars¹².

3. Improve Medical Information

Nearly three out of four healthcare experts perceive access to medical information as low.

[The Sandoz 12-country survey](#) [3] revealed that a majority of healthcare experts and members of the public would like to know more about illnesses, medicines and treatments. In some cases, not enough information is available. However, access is also low when the information is unreliable, and an oversupply of information makes it inaccessible, as well. Here are three such scenarios, along with strategies for change:

Lack of Access to Medical Information

Patients and healthcare providers in low-to-middle income countries often have little or no access to medical information. Initiatives on the ground support change, including exchanges between European and local doctors, and specific, condition-related partnerships. For example, the Sandoz-run program [Breathe Africa](#) [4] provides medical students training in making an asthma diagnosis as well as patient education.

Reliability of Information

Many patients turn to the internet for medical information, but there is a risk that one might not recognize what is accurate and reliable, and what is not. Patients want and need to know the details of their illnesses and treatment options. One best practice case for improving access is [The Information Standard](#) [5], a platform operated by the National Health Service in England, which offers certified and verified medical information.

Keeping Up-To-Date

Medical professionals are faced with the challenge of keeping up to date with the latest therapies, treatments and medical research. Each year, about 75,000 scientific, technical and medical papers are published, so finding relevant medical information is hugely time-consuming. Free, open-access and subject-related platforms such as Transplant TODAY, a Sandoz-operated digital service, can help doctors find what they are looking for. On Transplant TODAY, European physicians analyze study results and summarize the findings in English.

Red Cross clinic in Kigoma, Tanzania, a scientist inspects a sample under a microscope

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Doctors around the world need efficient access to medical information and research. Here, in the Red Cross clinic in Kigoma, Tanzania, a scientist inspects a sample under a microscope. Credit: Cordonpress/laif

These are just a few examples of works in progress toward making access happen: capacity building, to make certain that medicine and treatment are available where they are needed; access to medicine, to fight the world's most deadly diseases; and access to medical information, to improve treatment choices, and – more importantly and economically over the long-term – to prevent illnesses in the first place.

1. WHO Fact Sheet: Health and human rights; <http://www.who.int/mediacentre/factsheets/fs323/en/> [6]
2. 10 Facts about tuberculosis; <http://www.who.int/features/factfiles/tuberculosis/en/> [7]
3. World Cancer Report 2014; <http://www.scribd.com/doc/249125578/World-Cancer-Report-2014#scribd> [8]
4. Fact Sheet: World Malaria Report 2015; <http://www.who.int/malaria/media/world-malaria-report-2015/en/> [9]
5. Joint WHO/ World Bank new release; <http://www.who.int/mediacentre/news/releases/2015/uhc-report/en/> [10]
6. The 2016 Access to Medicine Index. Methodology 2015; <http://apps.who.int/medicinedocs/en/m/abstract/Js22176en/>

[11]

7. Health in 2015: from MDGs to SDGs; <http://www.who.int/gho/publications/mdgs-sdgs/en> [12]
8. WHO: The place of health on the post-2015 development agenda; http://www.who.int/dg/speeches/2012/mdgs_post2015/en/ [13]
9. Global Coalition for Universal Health Coverage; <http://universalhealthcoverageday.org/progress/> [14]
10. WHO Fact Sheet: Malaria; <http://www.who.int/mediacentre/factsheets/fs094/en/> [15]
11. Media Release: Malaria Initiative; <http://www.malaria.novartis.com/newsroom/press-releases/2016-july.shtml> [16]
12. IMS Report: Delivering on the Potential of Biosimilar Medicines; <http://www.imshealth.com/files/web/IMSH%20Institute/Healthcare%20Briefs/...> [17]

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