

STROKE IMPLEMENTATION WORLDWIDE IMPLEMENTATION IN AFRICA

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Facts about Stroke- Ethiopia

- 1st killer disease in those age 50-69 years
- 2019, stroke has killed 30,700 people in Ethiopia
- The 4th commonest cause of premature death in Ethiopia
- Stroke is 10th leading cause of death in those age 15-49 years
- No thrombolytic drug available in the country
- No organized stroke service

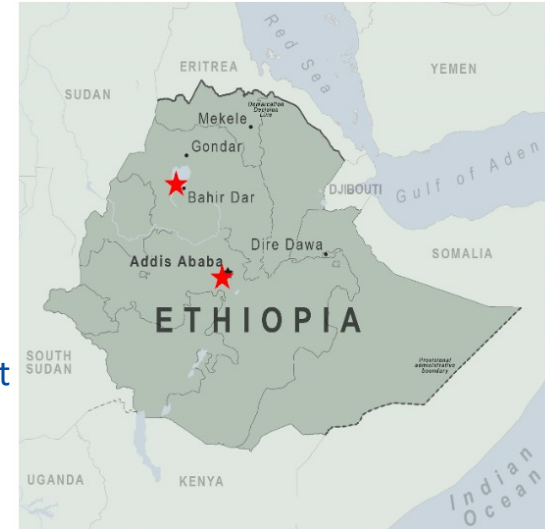


GBD 2019 Ethiopia Subnational-Level Disease Burden Initiative
Awoke et al, *Lancet* 2022

African Task Force



- 1. Pilot in 3 hospitals in Ethiopia (118million inhabitants)
- 2. To evaluate the hospitals structure
 - 2a. WSO Online Roadmap
 - 2b. Virtual visits to see the structure of the hospitals
- 3. tPA
- 4. Telemedicine in all 3 hospitals – Join App (“telemedicine without borders”)
- 5. A simple stroke unit in the 3 hospitals (a safe place to treat and rehab patients)
- 6. To prepare and implement a teaching course
- 7. Data collection – started November 2021
- 8. Cost of stroke before and after the implementation
- 9. Pre-hospital and population
- 10. Government



Telestroke without borders



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STROKE UNIT

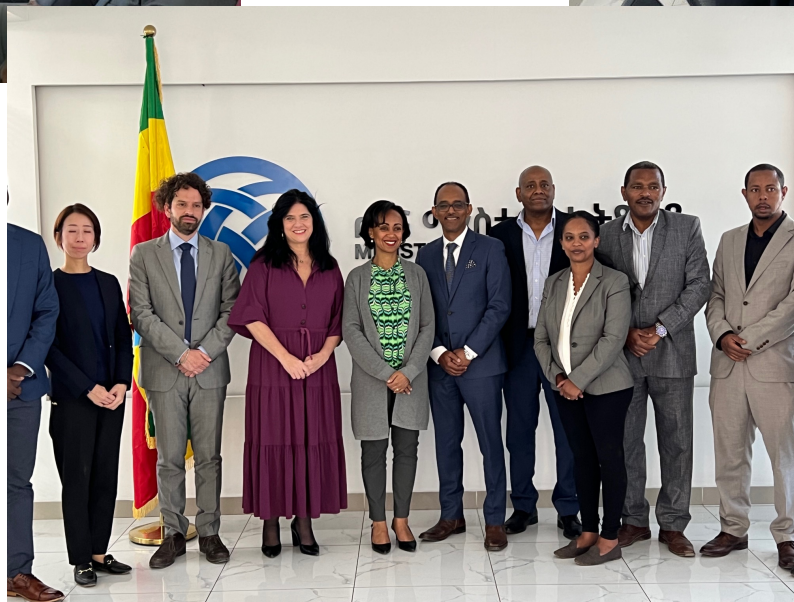


On site visits – January 23
to 27, 2023



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Ministry of Health –
Agreement to build a
National Stroke Plan
with the WSO support

What can we do to change the reality?

- We have the evidence on our side
- We know what need to be implemented
- We need the opportunity to be heard to convince the health managers
- We can start small, in our hospital
- Collecting data since the first steps
- Showing the good results
- Telemedicine is a good and low cost tool for areas without experts
- If possible, work together with the local health manager
- To be available to help to organize the region
- Work together with other countries in the same region