The global burden and threat of noncommunicable diseases (NCDs) represent a major contemporary public health challenge that undermines social and economic development throughout the world. Indeed, for the first time in history, globally more people are dying of NCDs than infectious diseases. This loss of human life spares no one – rich or poor, young or old – and it imposes heavy economic costs on nations and individuals. In Sierra Leone, where the Ebola outbreak (2014-2016) has weakened the already fragile health system, NCDs are becoming a crucial challenge (see Table 1). Among others, Gestational Diabetes (GDM) worsens the condition of pregnant women in a country that is already at the bottom of international rankings for safe motherhood (maternal mortality ratio of 1.360 maternal deaths per 100,000 live births in 2015). GDM is hyperglycaemia with blood glucose values above normal but below those diagnostic of diabetes. It occurs during pregnancy and it increases risk of complications during pregnancy and at delivery. Women with GDM and their children are also at higher risk of developing type 2 diabetes in the future. GDM is diagnosed through prenatal screening, rather than through reported symptoms.

**CUAMM’S INTERVENTION TO FIGHT GESTATIONAL DIABETES**

Doctors with Africa CUAMM has been working in Sierra Leone since 2012, in close partnership with the Ministry of Health and Sanitation (MoHS). In January 2017, CUAMM has launched a 2-year project at Princess Christian Maternity Hospital (PCMH) in Freetown to pilot the integration of Gestational Diabetes Mellitus (GDM) screening, diagnosis and management services in antenatal care (ANC) services. The hospital is the only health facility in the district able to offer quality obstetric and neonatal care and it ensures a catchment area of more than 1 million people.

**MAIN ACTIVITIES**

- Introduce routine GDM screening in ANC visits in the hospital;
- Strengthen the health information system and set up a dedicated database for GDM;
- Provide quality assistance and follow up of patients with GDM;
- Develop and distribute a package of information for pregnant women about GDM and other pregnancy related complications (e.g. malnutrition; HIV etc.);
- Implement awareness-raising mass campaigns on GDM prevention and treatment for pregnant women;
- Organize consultation meetings with key stakeholders (Directorate of Research and NCDs; Medical Superintendent and staff of PCMH; Doctors with Africa CUAMM; etc.) to discuss modalities to introduce diabetes screening in pregnancy;
- Promote the integration of GDM services with other national programs and other institutions active in the country;
- Promote operational research on diabetes in pregnancy;
- Organize a national workshop to present findings and results.

**OVERALL EXPECTED RESULTS**

- ANC services at PCMH provide screening for GDM;
- 10,000 women accessing ANC services at PCMH are tested for GDM;
- 59,000 women are reached with information on GDM and related services through awareness raising campaigns;
- A pilot protocol for screening of GDM is introduced and tested at PCHM;
- A dedicated dataset for GDM is designed and implemented;
- Creation of one working group with the leadership of MoHS aiming at developing national guidelines.

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