

ICHA Keeps Hearts Healthy in Rural South India



Above: A child is treated by a health auxiliary, an ICHA-sponsored village health worker with at least a tenth standard education who has been trained to provide immunizations and basic primary care to patients.

Left: Sujatha Sankaran, M.D., of UCSF has created a nonprofit to help control rates of cardiovascular disease in Tamil Nadu.

By **LISA TSERING**
India-West Staff Reporter

SAN LEANDRO, Calif. — The rising rate of cardiovascular disease in urban India and among Indian Americans is a well-known phenomenon. Until now, it was assumed that people in rural India — though faced with their own unique hardships — followed simple diets and got plenty of physical activity, so that they didn't have to worry so much about heart health.

But UCSF physician Sujatha Sankaran knows different. "Currently, Indians have skyrocketing rates of cardiovascular disease, and conventional wisdom was that this rise was primarily in urban areas, due to an increasingly Westernized diet and increased sedentary lifestyle," she told **India-West** in an e-mail.

"However, data shows that rates of cardiovascular disease are rising in rural regions of India as well. This is likely due to similar factors: diets that are rich in 'polished' grains (such as white rice) instead of traditional grains (such as parboiled rice or millet), increased sedentariness, and increase in overall lifespans, where people are living to older ages due to decreases in rates of infectious diseases, and are living long enough to suffer from

chronic diseases such as cardiovascular disease."

The World Health Organization estimates that cardiovascular disease will kill almost 20 million people by 2015, and notes that the condition is exceptionally prevalent in the Indian subcontinent — in part thanks to a genetic mutation. A 2009 study published in the journal *Nature Genetics* explains how a mutation in the heart protein gene MYBPC3 leads to cardiomyopathy, or weakening of the heart muscle, which can lead to heart failure. The mutation affects four percent of Indians and one percent of the world's population. Researchers think that the mutation arose around 30,000 years ago in India.

"India accounts for approximately 60 percent of the world's heart disease burden, despite having less than 20 percent of the world's population," Sankaran told **India-West**.

In an attempt to fight the spread of cardiovascular disease, Sankaran founded the International Cardiovascular Health Alliance (ICHAonline.org), and is bringing UCSF's resources in line with the Tribal Health Initiative, an Indian organization, to identify and manage hypertension in 20,000 people in underserved communities in 21 villages in Tamil Nadu's Sittilingi Valley.

"People in rural areas are suffering from the double whammy of rampant infectious diseases superimposed on a new epidemic of chronic diseases, such as cardiovascular disease," she explained. "Currently, medical resources in India are focused in small urban centers, and the rural poor do not have access to care. Improving this access is an urgent need, particularly in the area of cardiovascular disease."

According to Sankaran, UCSF's studies have shown a high prevalence of hypertension in the 20,000 people in the Sittilingi Valley. "We have trained community health workers to diagnose and treat hypertension as well as pro-

vide lifestyle counseling, provided blood pressure cuffs and medications, and are helping to create an electronic infrastructure so patients' blood pressures can be monitored using electronic tablets across village, clinic, and hospital settings."

"With a simple and incredibly cheap intervention such as controlling high blood pressure, millions of lives can be saved," she continued.

ICHA is a 501(c)(3) nonprofit registered in San Francisco. Over the next five years, ICHA's program is expected to prevent approximately 4,500 strokes and 3,000 heart attacks. ICHA is conducting a fundraising drive,

attempting to raise \$50,000 for the next five years to continue operating the program, she said.

Indian Americans can contribute to the program by visiting ICHAonline.org/donate. "I urge your readers to support systems such as ICHA's program at the Tribal Health Initiative for prevention of cardiovascular disease through risk factor modification," Sankaran told **India-West**. "Cardiovascular disease is an enormous public health crisis among Indians throughout the world, and the epidemic is particularly dire in rural impoverished populations in India, where people do not have access to simple primary care."



Villagers in Sittilingi Valley in Tamil Nadu are beating cardiovascular disease thanks to the International Cardiovascular Health Alliance, a nonprofit founded by Indian American physician Sujatha Sankaran of UCSF.

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