

Systematic Review on the Integration of Chronic Disease Services in Primary Healthcare Settings in Nigeria: Strategies, Challenges, and Opportunities

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INTRODUCTION

- ❖ Chronic diseases present a significant health burden globally, including in Nigeria, where the prevalence of chronic diseases is increasing.
- ❖ To tackle this issue, integrating chronic disease services into primary healthcare settings is essential. The primary healthcare (PHC) system plays a crucial role in enhancing universal access to care for chronic diseases.
- ❖ However, the Nigerian healthcare system has historically prioritized secondary and tertiary care over primary healthcare, underscoring the urgent need to bolster primary healthcare services.
- ❖ Chronic diseases, such as cardiovascular diseases, cancers, diabetes, and chronic respiratory conditions, significantly impact Nigeria's healthcare landscape. These diseases are primarily driven by factors like tobacco use, unhealthy diets, and physical inactivity, which are prevalent due to rapid urbanization and lifestyle changes.
- ❖ Despite the high burden of these diseases, there is a significant challenge in addressing them effectively, particularly in primary healthcare settings due to resource limitations and infrastructural deficits.

OBJECTIVES

The objective of this systematic review is to explore the integration of chronic disease management into primary healthcare settings in Nigeria, while also examining the strategies, challenges, and opportunities that shape this process within the Nigerian healthcare system.

METHODOLOGY

- ❖ Pilot searches were run on multiple databases with keywords such as chronic disease, public health, Nigeria.
- ❖ Three independent researchers searched through Scopus, PubMed, Embase, EBSCO, and Web of Science led to the identification of 1257 articles (See Table 1).
- ❖ The search results were carefully screened by limiting the results to English only, and by selecting results from the last ten years only (2014–2024).
- ❖ The Preferred Reporting Items for Systematic Review and Meta Analysis (PRISMA) guidelines was used.
- ❖ Reviewer one U.O., did the first quality appraisal, which was then checked by the second reviewer E.O.
- ❖ When questions or concerns occurred between the two reviewers the third reviewer N.O broke the tie.
- ❖ Covidence was used for screening, organizing, and extracting data in this systematic reviews.
- ❖ After screening a total of 16 articles was used in this systematic review
- ❖ Has not been registered in PROSPERO yet– *Table 1*

Table 1: Total number of search results obtained from selected databases.

Sr	No.	Database	Total Results	Date of Search
1		PubMed	437	01/25/2023
2		EBSCO	317	02/11/2023
3		Scopus	300	02/28/2023
4		Embase	203	05/11/2023

RESULTS

- ❖ The studies included in the review were mostly studies done in SSA (93%), with only 2 from the United States, and 1 each from Saudi Arabia and Singapore.
- ❖ Our result showed that studies have explored how global health models like the Chronic Care Model (CCM) can be adapted to better fit the local context in sub-Saharan Africa (SSA), including Nigeria.
- ❖ There has been an emphasis on integrating the management of HIV with other chronic diseases like diabetes at the PHC level, reflecting a shift towards a more holistic approach to chronic disease management in settings where HIV prevalence is high.
- ❖ A significant portion of the literature discusses strengthening PHC systems as a fundamental approach to improving chronic disease management.
- ❖ This includes ensuring the availability of essential medicines, implementing effective referral systems, and enhancing the capacity of healthcare workers through training and support. Research has also focused on improving the quality of care and accessibility in primary health settings, particularly in rural areas. This includes addressing the barriers to access and the distribution of skilled healthcare workers to manage chronic conditions more effectively.

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CONCLUSION

- ❖ The findings emphasize how global health models, such as the CCM, can be adapted to fit local contexts in SSA, including Nigeria.
- ❖ A key trend observed is the integration of HIV care with other chronic diseases at the PHC level, reflecting a growing shift toward holistic chronic disease management in regions with high HIV prevalence.
- ❖ Strengthening PHC systems remains a fundamental approach to enhancing chronic disease care, focusing on:
- ❖ Improving access to essential medicines,
- ❖ Developing effective referral systems, and
- ❖ •Building healthcare worker capacity through training and support.

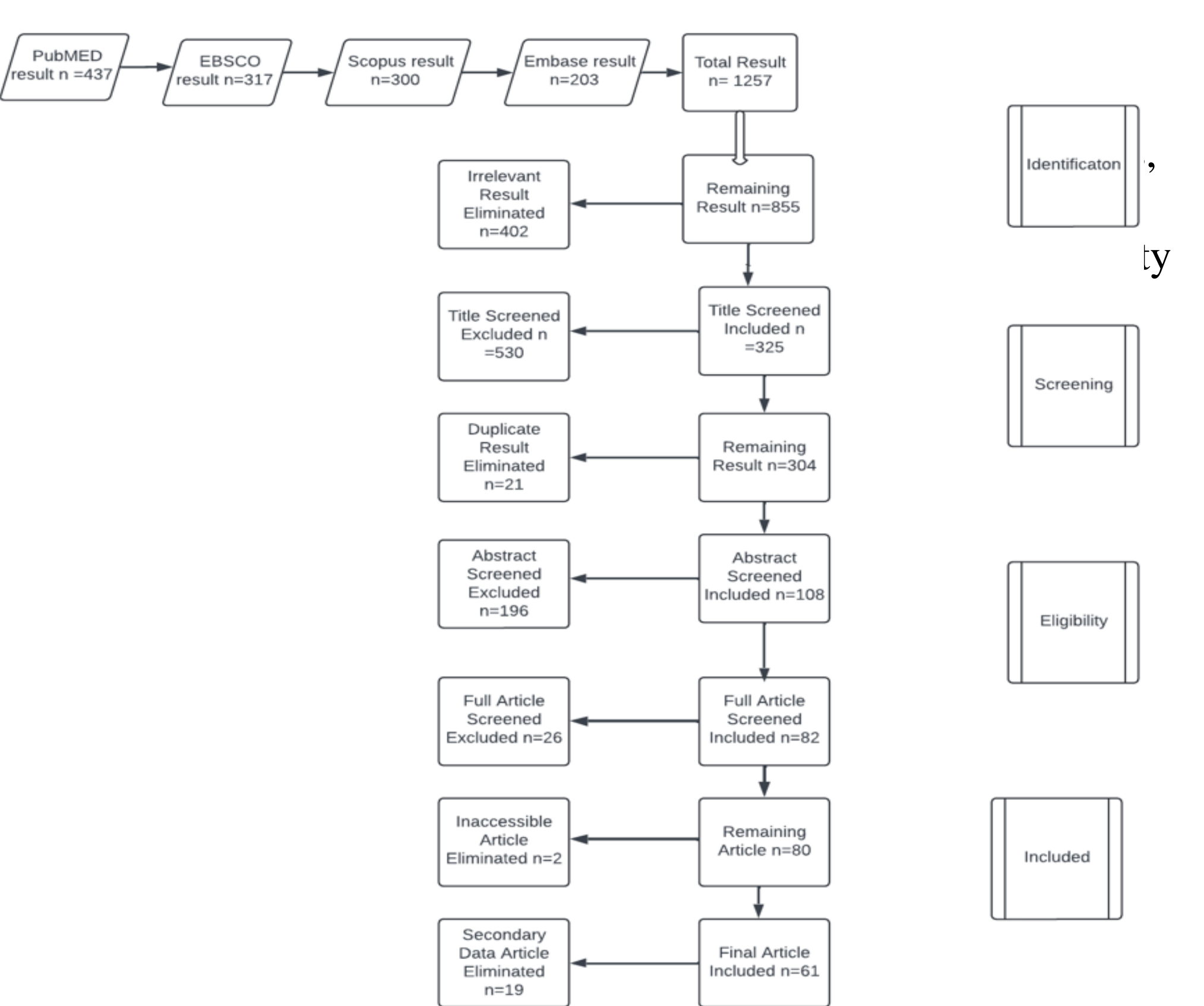


Fig 1:PRISMA flow chart of systematic literature review for the Integration of Chronic Disease Services in Primary Healthcare Settings in Nigeria.

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