



7.5 MILLION LIVES SAVED AND COUNTING

Resolve to Save Lives' partnerships for heart health between 2018 and 2023 will result in 7.5 million fewer deaths worldwide. We resolve to expand this life-saving work and to prevent 100 million deaths from cardiovascular disease by 2047.

Here's how we supported countries to make rapid progress, and how we measured our impact.







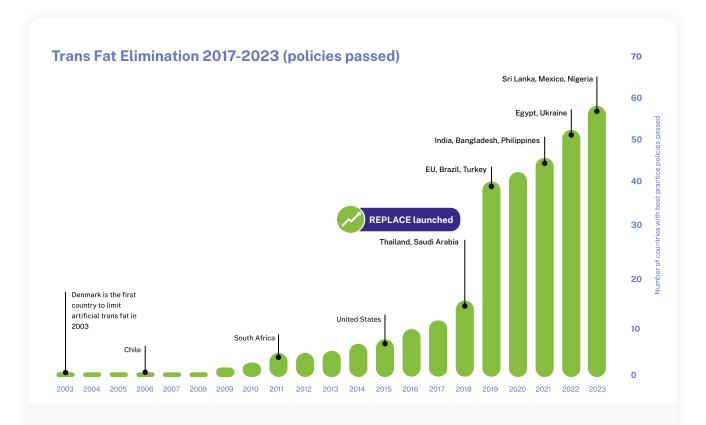


7.3 MILLION LIVES SAVED TOWARD A TRANS FAT-FREE WORLD

Trans Fat is a toxic food additive that was estimated to kill 500,000 people every year worldwide.

We've helped reduce that number by two thirds in just five years by supporting countries to adopt best-practice trans fat elimination policies.





Caveat

It's possible some of these countries would have become trans fat-free without RTSL action. However, until RTSL supported WHO to call for the global elimination of trans fat, there was no global momentum and little country action. The announcement of REPLACE in 2018 marked an inflection point, with momentum building quickly afterwards. Our support has been instrumental at all phases of the REPLACE initiative: from advocating for WHO to make the commitment, to developing the REPLACE package, to providing technical assistance and partnership to countries to take action.

2







- 1 We start with the annual number of heart disease deaths attributable to trans fat intake in each country where RTSL has influenced policy using Wang et al, 2016.
- We then multiply by the number of years the country's TFA elimination policy will be in effect until 2047. We assume policies become effective halfway through the year. To account for population growth and aging, and for changes to cardiovascular disease mortality rates over 30 years, we apply a correction factor of 1.3 to the total lives saved. This is based on the modeled estimate in Kontis et al.

BANGLADESH EXAMPLE:

In Bangladesh 8,100 people were estimated to have died each year from heart disease caused by trans fat intake. Bangladesh's policy to eliminate trans fat — passed thanks to RTSL and partners' advocacy, relationship-building and influence with government and media partners — was effective from 2022.

Accounting for the estimated deaths per year, the number of years between 2022 and 2047 and the estimated increases in population size and changes to cardiovascular disease mortality rates, we calculate the total lives saved in Bangladesh as follows:



This calculation is replicated for all 43 countries where RTSL has influenced policy from 2018-2023, adding to an estimated 7,285,000 lives saved by 2047.



3



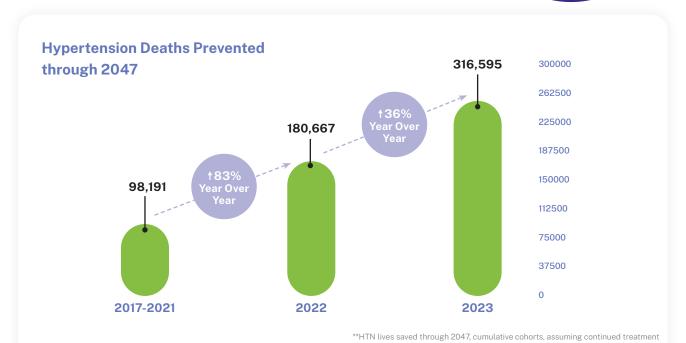
320,000 LIVES SAVED

TAMING HYPERTENSION – THE SILENT KILLER

High blood pressure is the world's leading cause of premature death, but it's often overlooked.

We help countries build simple, scalable, life-saving programs that streamline hypertension treatment and make it easier for patients to control their high blood pressure.





Caveat

It's possible, but unlikely, that some patients would have been treated without our support. Until we partnered with WHO and other organizations, calls for treatment of non-communicable diseases had not resulted in improved treatment of hypertension in most low-and middle-income countries. RTSL inputs, both directly and through many partners, included developing training and policy materials, advocating for and supporting medication procurement, establishing standard treatment protocols, supporting phased expansion in multiple countries, and collaborating with WHO to develop standards for meaningful indicators of effective treatment and supporting countries to implement systems to track and improve performance on these indicators. Our experience is that, once started, programs continue and maintain or increase their quality; most countries progressively increase their investment in treatment programs. Addition of statin treatment for high-risk patients substantially increases the impact, and is being done in an increasing number of programs.

4







- 1 To estimate the impact of hypertension treatment programs, we use a ratio known as the "number needed to treat" to prevent one death from heart attack or stroke, which is derived from clinical trials of hypertension treatment and considers factors such as patient survival rates and retention in care.
- In countries where we work, the number of hypertension patients who need to be treated to prevent one death is between 60 and 130. This means that, for every 1 million patients treated for five years, between 15,000 and 40,000 lives will be saved. This may be a conservative estimate. Some evidence from low-and middle-income countries China, in particular suggests an even greater impact. As many as 50,000 lives may be saved per million treated.

EXAMPLE:



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