Conclusion: Patients in the crizanlizumab MAP had significant disease burden at baseline, as evidenced by the high rate of home- and healthcare-managed VOCs, proportion of patients with SCD-related complications and use of opioids for VOC-related pain relief, despite many patients reporting prior HU use. Crizanlizumab led to clinically relevant reductions from baseline in the median annualized rates of home- and healthcare-managed VOCs and use of opioids in this real-world setting, consistent with results from SUSTAIN.

Figure. (A) Proportion of patients with home- and healthcare-managed VOCs in the 12 months pre- and 12 months post-crizanlizumab initiation and (B) median absolute reductions from baseline in home- and healthcare-managed VOCs, overall and stratified by SCD genotype and history of HU use.

Results: Up to 61% of these patients had micro-albuminuria, 2.4% proteinuria, 71% glomerular hyperfiltration, and 5.9% had renal failure. Six variants are significantly associated with the two quantifiable phenotypes of proteinuria, 71% glomerular hyperfiltration, and 5.9% had renal failure. Six variants are significantly associated with kidney dysfunction phenotypes in SCD, rather than known genetic factors. Only 6/31 characterised gene-variants are associated with kidney dysfunction phenotypes in SCD samples from Cameroon. The data reveal an urgent need to extend GWAS studies in populations of African ancestries living in Africa, and particularly for kidney dysfunctions in SCD.

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O-06 E-SICKLE CELL DISEASE: A FRENCH SPEAKING TRAINING PLATFORM TARGETING ALL LEVELS OF THE HEALTHCARE SYSTEM

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Purpose: Sickle cell disease prevention and management programmes are traditionally based on 6 pillars: awareness, early detection, appropriate management, advocacy, research and training of health professionals. One of the main pitfalls is the lack of educational resources available to all healthcare professionals. Few studies quantify the training needs, but all conclude that it is necessary to deploy these activities at the preliminary levels of the healthcare system. In medical faculties and paramedical schools, little time is allocated to courses teaching about sickle cell disease. At the same time, between 2014 and 2019, average availability of 3G network coverage in sub-Saharan Africa increased from 42% to 44% for 4G. This massive development of information and communication technologies provides a major means of access to training for professionals working outside the capital cities, right down to the last mile.

Materials and methods: The e-sickle cell platform was created to address this issue. In order to offer content adapted to all healthcare professionals, a network of experts developed a training programme on all aspects of the disease with speakers from the North and the South, who are healthcare professionals in the field. This network guarantees the scientific independence of the training material. Low-tech tools have been selected: Dudal for receiving the courses (developed by RAFT), and a simple web platform for their distribution. The training is freely available on e-drepanocytose.com.

Results: The tests carried out in early 2021 with health professionals in 4 countries did not reveal any major accessibility problems to the platform and evaluation in regard to the content was positive in terms of its form and content. Following the opening of the site to the public, 305 trainees were registered by 31st December 2021, at all levels of the health system. The study material has been used in mixed training courses by NGOs in the field (MSF in Niger, Santé Sud in Mauritania). Site content is updated regularly, taking into account feedback from users.

Conclusion: The use of the platform must be extended beyond doctors based in capital cities who at present are the main users (33% of registered users), and access to the platform must be extended to healthcare workers in the most isolated areas. The implementation of MCQ-based assessment’s will provide for better mastery of the platform and also for evaluating its real impact on the trainees’ practice.

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