



# DEADLY HEART TREK

## Medical and educational visit to Indigenous communities in the Northern Territory 2021

### What is the Deadly Heart Trek?

The Deadly Heart Trek was devised as an opportunity to listen, learn, educate, diagnose and treat Aboriginal and Torres Strait Islander communities affected by rheumatic heart disease (RHD).

The project is led by a dedicated group of experienced doctors, local health workers and Aboriginal leaders who are committed to progressing the prevention of RHD.

Initially, it was planned to tour across Australia in July 2021, from Cairns to Broome, in areas with a high burden of disease. When COVID-19 hit, this national Trek was put on hold.

### Results from Nine Communities

- 873 Children had hearts screened by cardiologists and skin checked
- 26 New cases of RHD diagnosed and treated
- 14 New congenital cases diagnosed and treated
- 14 Known cases treated
- 75 Total scabies cases diagnosed and treated
- 3000 Children and families were educated on RHD and skin

### Summary of Results

2.9% of all children (Indigenous and non-Indigenous) had definite RHD.

The World Heart Federation considers a community where more than 0.1% of children have RHD, to be a high burden of RHD.

### The Trek - NT Communities

Several communities in the Northern Territory were still highly enthusiastic to invite the Trek team for a visit. After careful consideration of the COVID situation, it was deemed safe to make a medical and educational visit in 2021 from July to September. Dr Bo Reményi led a small local NT medical delivery team and visited nine communities; five of these were in the Big River Region and four in the Barkly region.

### Community Consultation and Partnerships

An Aboriginal Community Consultant in Darwin worked with the communities in advance, to seek permission to visit and to organise the logistics to prepare the communities. Strong partnerships were established with local health centres/clinics and Aboriginal community controlled organisations which provided vital support for the visit.

### What happened on the Ground

Upon arrival, the team were warmly welcomed by Traditional Owners and local organisations. They had further discussions to ensure community understanding and empowerment.

A lot of work was done at schools and at some youth and community centres. Children and youth were reviewed for healthy hearts and skin, and their general well-being. The local communities were extremely helpful, assisting with coordination of the heart screening consents for the echo screenings.

Fun educational activities were also provided to students, families and everyone who came to the events. These were very well received with many mentioning it was great for the community, as it enabled youth service providers to collaborate and support the trek initiative with confidence.



## Treatment and follow-through

All children who were diagnosed with RHD were treated on the same day, following parental consent. The new RHD patients were formally registered on the Northern Territory control program and linked to standard treatment and cardiology care. A number of children were diagnosed with various health conditions including skin diseases and where required, were treated immediately and linked to health services for long-term management.

## Post visit follow-up

A post-visit survey was sent directly to the communities to gain feedback. All communities stated they greatly benefited from the visits and would welcome them again. They would also recommend the Deadly Heart Trek team to other communities. Some communities have also had another visit from one of the Trek members as further follow-up.

“It was amazing to have so many medical professionals visit our remote school in a coordinated activity that benefits and supports the health of so many students and community members. Thank you from the bottom of our happy, healthy pumping hearts!”

“The community here has limited access to services other areas in Australia consider normal. We are 7 hours from a Dr, a hospital, and many other types of health care. Every specialist who comes helps normalise health checks, preventative care, and helps the kids and families understand the different roles different health professionals play. This is so important, and these checks are potentially life-saving. We would welcome being part of the local team to support the next visit.”

## Recommendation

We are pleased the Albanese Government has committed to more than double the funding for the elimination of RHD in Australia, increasing from \$6 million to \$13.5 million nationally. Only through national action and funding, led by the Federal Government, can we make a difference to the lives of the thousands of Aboriginal and Torres Strait Islander people living with RHD, and meet our obligation to prevent and eliminate RHD by 2030 under the World Health Organisation’s 2018 international resolution, to which Australia is a signatory.

The RHD Endgame Strategy Report provides a clear way forward to both prevent people from developing ARF and to improve the quality of life with those living with RHD. The Report called for an initial investment of \$40 million over three years for Phase 1 implementation to establish the national implementation unit, invest in community level action and support jurisdictional action plans. This investment is needed now as a minimum to meet its 2030 target.

## Where to next?

In 2022 the Trek team are responding to invitations from Communities where there is a high burden of RHD.

## Big River Region 29 July to 6 August 2021

### Heart Screenings

447 **Total Echos**  
410 Normal results  
37 Abnormal results

1341 **Educated**

### Skin

26 Simple scabies  
31 Impetigo  
7 Fungal infection  
64 Total with skin infection

### RHD / ARF

9 New definite cases  
8 New borderline cases  
10 Known definite cases  
8 Known cases of ARF

27 **Total with RHD**  
35 **Total with RHD/ADF**

### Congenital RHD

5 Definite cases  
6 Known cases  
11 **Total**

## Barkly Region 13 September to 17 September 2021

### Heart Screenings

426 **Total Echos**  
402 Normal results  
24 Abnormal results

1341 **Educated**

### Skin

49 Scabies  
50 Impetigo  
28 Tinea  
24 Other

### RHD / ARF

2 New definite cases  
7 New borderline cases  
4 Known definite cases  
5 Known cases of ARF

13 **Total with RHD**  
18 **Total with RHD/ADF**

### Congenital RHD

9 Definite cases  
2 Known cases  
11 **Total**