

HOW TO PLACE INNOVATION PRIORITY IN MEDICAL CARE FUTURE IN NORTH AFRICA

Abdessalam.K

Tunisian Stem Cell Association, Tunisia

Abstract

Regenerative medicine represents a growing disruptive innovation that leads to the particular quaternary care innovation; behind Information Technology (IT) sector, both represent a way forward for an employment and great booming economic for emerging country.

North Africa (NA), looks to lead continent with a growing economy based on education and medical services to safeguard the actual increasing rate of life quality for population how will exceed 200 million capital (NA) with 28% which are aged between 15 and 25 with Net enrolment ratios (NER) average 94 percent.

Growing infrastructure in Public health care and Universities shown last decades the massive involvement of graduate in academic research with a majority oriented for medical care, biological science and its research subjects. Faced to the shortage of the economic model, this begun to be as a shortness Politics solution against the high rate of unemployment.

We promote through the emerging civil society activity that advocate for the event of subsequent economic model, on the horizon of 2030, to including bio-science sort of a head model which is used for high added value industry and high skills demand market.

he World Health Organization (WHO) announced in December 2015 that the worldwide incidence of malaria had finally been slowed, thanks in large part to a huge rollout of mosquito nets, antimalaria medicines and indoor residual spraying of insecticides. The news was particularly welcome in Africa, where the disease has been the deadliest. Malaria is caused by parasites that are transmitted to people through the bites of infected female anopheles mosquitoes. Between 2000 and 2015, malaria with its mortality rates in Africa fell by 66% among all age groups. Among children under five, who are the foremost susceptible to the disease, fatalities fell by 71%, from 694,000 to 292,000

deaths, during an equivalent period. Progress in the use of mosquito nets has been impressive. WHO data shows that in 2000, just 2% of the 667 million people living in Sub-Saharan Africa at that point slept under mosquito nets. By 2015, quite half Africa's 1 billion people were using bed nets. In addition, Margaret Chan, the directorgeneral of WHO, wrote within the foreword of the planet Malaria Report 2015 that "a rapid expansion in diagnostic testing and therefore the availability of antimalarial medicines has allowed more people to profit from timely and appropriate treatment." A coordinated approach Efforts to stop malaria have also resulted in significant health care cost savings. SubSaharan countries saved up to \$900 million on the costs of malaria case management between 2001 and 2014, notes the world health body. Mosquito nets represented the most important cost savings, followed by artemisinin-based combination drug therapies (ACTs) and indoor residual spraying. An ACT consists of an artemisininbased compound combined with a drug from a different class. Medical experts recommend the use of a combination of drugs because using one drug can speed up the development of drug resistance in parasites. Much progress within the malaria fight has been the results of global partnerships and funding schemes established in 2000. A notable partnership is the Roll Back Malaria (RBM) initiative, which was set up by WHO, the United Nations Children's Fund (UNICEF), the UN Development Programme (UNDP) and the World Bank. Under the RBM, over 500 development groups, private- and public-sector organizations and research and academic institutions have pooled their resources and expertise to fight the disease. High-profile partnerships are effective, as they put pressure on governments to fight diseases, stated the Centers for Disease Control and Prevention (CDC), an American public health institute, in a 2011 report. The report commended leaders in malaria-endemic countries for his or her commitment to treating malaria control as a national priority, as they

agreed to try to to . under the 2001 Abuja Declaration and Frameworks for Action on Roll Back Malaria and therefore the UN Millennium Development Goals. Reproduction of multiple copies of materials during this publication, in whole or partially , for the aim of economic redistribution is prohibited except with written permission from NEPAD. The New Partnership for Africa's Development (NEPAD) is a socio-economic development programme of the African Union (AU) whose express objective is to stimulate Africa's development by bridging existing gaps in Infrastructure (Energy, Water and Sanitation, Transport and ICT); Agriculture and Food Security; Human Resource Development, especially Health/Education, Youth and Training, Social Affairs; Science, Technology and Innovation; Trade, Industry/Market Access and Private Sector Development; Environment/Climate Change and Tourism; Governance/Public Administration, Peace and Security; Capacity Development, and Gender Development. The implementation of these programmes is based on the AU/NEPAD principles of African leadership and the ownership of the continent's development agenda and process, as well as a commitment to good political, economic and corporate governance. African leaders have explicitly recognized that socio-economic transformation of the continent can't be achieved without increased investments in science, technology, and innovation. To that end, the leaders have initiated a number of concrete actions geared towards promoting the continent's scientific and technological development. The actions include the creation of the African Ministerial Council on Science and Technology (AMCOST) and its subsidiary bodies -- the NEPAD Office of Science and Technology, and the AU Commission for Human Development, Science and Technology. These institutions have collectively developed a comprehensive strategy and action plan -- Africa's Science and Technology Consolidated Plan of Action -- adopted at the second African Ministerial Conference on Science and Technology in Dakar, Senegal, in September 2005. The main goals of Africa's Science and Technology Consolidated Plan of Action (CPA) are to strengthen Africa's capacities to develop, harness and apply science, technology, and innovation to achieve millennium development goals (MDGs), as well as mobilizing the continent's expertise and institutions to contribute to the worldwide pool of science and

technological innovations. Key to these goals is the promotion of transnational Research and Development (R&D) programmes.

Yet despite recent progress the fight is far from over. Africa, the epicentre of the disease, is still vulnerable. Last year 88% of the 214 million cases and 90% of the 438,000 malaria deaths reported worldwide occurred in the WHO African region. The region includes Algeria but excludes Sudan and Somalia.