

South-East Asia bears NCDs brunt

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These diseases kill 8.5 million people annually in WHO's South-East Asia Region. Of these, 4.2 million deaths are considered premature. The region is home to a quarter of the world's population and a third of the world's poor, those most vulnerable to the negative economic impact of NCDs.

The macro-economic burden of NCDs in low-and middle-income countries is projected to be \$7 trillion from 2011 to 2025. Wide-scale implementation of 'Best Buy' interventions for prevention would cost a fraction of this.

"We are seeing that heart diseases, diabetes, cancers, and chronic respiratory diseases now affect younger and younger people. Deaths from NCDs occur in the age group 30 - 70 years in our region and are considered premature. These diseases disproportionately affect the poor, robbing families of breadwinners and pushing them into a vicious cycle of poverty," said Dr Poonam Khetrapal Singh, regional director for WHO South-East Asia Region.

"The millions of productive individuals lost prematurely to NCDs are seriously undermining social and economic development," she added.

Increased lifespan and changes in people's lifestyles are accelerating the increase in NCDs and their common risk factors including tobacco use, unhealthy diet, inadequate physical activity and harmful use of alcohol.

Globalization, trade liberalization, rapid unplanned urbanization, irresponsible marketing of junk foods, alcohol and tobacco, and increasing socioeconomic inequities are creating a milieu conducive to the rise in NCDs.

This makes addressing NCDs a vital health as well as developmental imperative for countries in the region. 80 percent of heart diseases, strokes and type 2 diabetes and 30 percent of all cancers can be prevented by eliminating the most common NCD risk factors like tobacco and alcohol use, unhealthy diet and lack of physical activity.

At the 65th World Health Assembly in 2012, Member States adopted a goal of reducing premature deaths from NCDs by 25 percent by 2025. To achieve these targets, WHO emphasizes the importance of implementing evidence-based, cost-effective interventions-the 'Best Buys'-to prevent and control NCDs.

NCDs currently cost lower-and middle-income countries nearly \$500 billion annually. In contrast, the total annual cost of implementing all of the 'Best Buys' to address NCDs is just \$11.4 billion, with the added benefit of saving millions of lives.

"Some examples of 'Best Buy' interventions for the prevention and control of NCDs include raising tax on tobacco and alcohol products, reducing salt consumption, eliminating trans-fat in the food supply chain, promoting physical activity and detecting and treating NCDs at an early stage," said Dr Khetrapal Singh.

Although the health sector bears the brunt of NCDs, it has very little control over their root causes.

"Wide-scale implementation of these 'Best Buys' requires coordinated action. Ministries of health as well as non-health ministries such as finance, transport, sports, education, agriculture, and food safety, among others, must work together. This requires the highest level of political commitment, resolve and response," urged Dr Khetrapal Singh.