

Editorial

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Non Communicable Diseases: Challenge Ahead**Prof. (Dr.) Gautam Kumar Joardar**

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Non-communicable diseases (NCDs) are of long duration and generally of slow progress. The four main groups of NCDs are Cardio-vascular diseases, Cancers, Chronic Respiratory diseases and Diabetes. The NCDs kill 38 million people worldwide annually (63% of global deaths). Almost three quarters of the NCD deaths (28 million) occur in the low and middle income countries. Sixteen million deaths due to NCDs are premature, occurring before the age of 70 years; and 82% of these premature deaths occur in the low and middle income countries. These four groups of diseases account for 82% of all NCD deaths: cardiovascular diseases 17.5 million, cancers 8.2 million, chronic

respiratory diseases 4 million and diabetes 1.5 million. In India, 60% of all deaths are attributable to NCDs, making them the leading cause of death- ahead of injuries and communicable, maternal, prenatal, and nutritional conditions. The NCDs account for about 40% of all hospital stays and roughly 35% of all recorded outpatient visits in India. The globalization of unhealthy life styles, which are recognized as the modifiable risk factors, like tobacco use, physical inactivity, harmful use of alcohol and unhealthy diets are the key factors that increase the risk of dying from the NCDs. The unhealthy behaviours lead to four key metabolic/ physiological changes (called the intermediate risk

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factors of NCDs) i.e. raised blood pressure, overweight/ obesity, raised blood glucose and dyslipidaemia that increase the risk of NCDs. The underlying determinants of NCDs mainly exist in non-health sectors, such as agriculture, urban development, education and trade. In terms of attributable deaths, the leading metabolic risk factor globally is elevated blood pressure (to which 18% of global deaths are attributed), followed by overweight and obesity and raised blood glucose. Tobacco accounts for around 6 million deaths every year and is projected to increase to 8 million by 2030. About 3.2 million deaths annually can be attributed to insufficient physical activity. In 2010, 1.7 million annual deaths from cardiovascular causes have been attributed to excess salt intake. More than 3.3 million annual deaths are attributed to harmful drinking of alcohol.

The rapid rise in NCDs is predicted to impede poverty reduction initiatives in low income countries particularly by increasing household costs associated with health care. Vulnerable and socially disadvantaged people get sicker and die sooner because they are at greater risk of being exposed to harmful products such as tobacco or unhealthy food, and have limited access to health services. In low resource settings, the health care costs for NCDs can quickly drain house hold

resources driving families into poverty. Where the high income groups can access services and products that protect them from the greatest risks, the low income groups can often not afford such products and services.

As a response, a Global Action Plan for the prevention and control of NCDs 2013-2020 was developed under the leadership of the WHO. This plan aims to reduce premature deaths from the NCDs by 25% by 2025 through nine voluntary targets that focus on factors like tobacco use, harmful use of alcohol, unhealthy diet and physical inactivity that increase people's risk of developing the diseases. The plan offers a menu of "best buy" or cost effective, high impact interventions for meeting the nine voluntary targets.

The main life style changes will aim at reduction of tobacco use and exposure to second hand smoke; reduction of harmful use of alcohol; replacing trans-fat with polyunsaturated fatty acids; promoting and protecting breastfeeding; controlling cervical cancers through screening; reduction of salt/ sodium consumption in the population and reduction of salt content in the packaged and processed foods, reduction of marketing of foods and non-alcoholic beverages high in saturated fats, trans fatty acids, sugar and salt; reduction in the prevalence of insufficient physical activity (less than 150 minutes of

moderate intensity activity per week in persons aged 18 years and above; and less than 60 minutes of moderate to vigorous intensity activity daily in school aged children and adolescents).

Due to sudden onset and sudden impact we are more concerned about the communicable diseases. But in terms of magnitude, death, disabilities and huge social and economic impact, the NCDs also deserve attention for their prevention and control. Almost all of us are aware

about the ill effects of tobacco use (smoking and chewing), harmful use of alcohol, unhealthy diet and physical inactivity, but only a few are motivated to change the life styles for a better health. The challenge is availability of evidence-based, cost effective and population based interventions and converting knowledge in to healthy practice. Inter-sectoral collaboration is therefore essential to create an enabling environment.

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