

Tackling chronic diseases in poor countries

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The health problems that have long plagued people in the West—heart disease, diabetes, cancer—are on the rise globally. Yale researchers examine the growing problem of chronic disease in poor countries in the September issue of the journal *Health Affairs*.

"There are major transitions underway in the epidemiology of disease throughout the world from communicable to chronic disease," says Dr. Jeremy I. Schwartz, assistant professor of general medicine and senior author of a research paper focusing on the East Africa region. But "in poorer countries, such as those of East Africa, there are major gaps in funding and policy needed to make substantive change to prevent and deal with this burden."

Growing global awareness and new efforts within the East African countries of Burundi, Rwanda, Kenya, Tanzania, and Uganda may offer solutions to the problem, say Schwartz and his co-authors.

Yet they warn against a "disease-specific" approach. "Chronic diseases, by their nature, share risk factors," Schwartz notes. "We need new models that focus on improving the overall health system, with specific attention to primary healthcare infrastructure."

In a separate paper in the same issue, Dr. Sandeep P. Kishore, a postdoctoral fellow in the Human Nature Lab at Yale and president of the Young Professionals Chronic Disease Network, addresses the problem of access to medicines for chronic illnesses, such as cancer. Drawing on lessons from the successful global effort to improve access

to HIV/AIDS drugs, Kishore examines barriers to drug access, including high costs, intellectual property provisions, inadequate financing, and the need for greater pressure from civil society organizations.

Kishore and his co-authors offer potential solutions, outlining several specific policy recommendations for the public and private sectors, as well as civil society.

One example is expanding the list of essential medicines recommended by the World Health Organization—a step that Kishore and his colleagues took by advocating for the addition of a cholesterol-lowering statin drug to treat [heart disease](#) and life-saving medications for leukemia and breast cancer.

"Chronic [disease](#) are the social justice issue of our generation, and they deserve to be treated as such," Kishore adds. "We affirm that the time to act has now come."

Provided by Yale University

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