

Cardiovascular disease community calls for tougher targets to curb global risk

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Agreement by governments, by the end of 2012, on a set of ambitious global targets to curb the growing scourge of non-communicable diseases (NCDs), which includes cardiovascular disease (CVD; heart disease and stroke), is critical to avoiding the millions of premature deaths worldwide. This, according to a new paper published by the Global Cardiovascular Disease Taskforce a group of eminent experts who represent five leading heart-health organizations.

On the occasion of the first anniversary of the second ever United Nations High-Level Meeting on a health-related issue – NCDs – the Taskforce is calling on governments and the CVD community to accelerate progress on the commitments made at this landmark event by supporting 10 evidence- based targets. CVD is the leading cause of death worldwide, killing 17.3 million people a year and making up nearly half of the 36 million NCD deaths. Around 80 per cent of these deaths are in low- and middle-income countries where human and financial resources are most limited to address them. The number of CVD deaths is expected to rise to 23.6 million by 2030.

As a first step, a global target to reduce [premature deaths](#) from NCDs, 25 per cent by 2025 was agreed at the 65th [World Health Assembly](#) in Geneva this past May. However, as the Global CVD Taskforce suggests, additional targets developed by the [World Health Organization](#) (WHO) are key to achieving this overarching goal. These include curbing [physical inactivity](#), [tobacco consumption](#), [salt intake](#) and hypertension.

"The number of people with CVD is growing and its impact is disproportionately felt by those in the developing world, where people die younger; we now have the opportunity of a lifetime to stem its rise with concerted international action that will help countries tackle the preventable causes of CVD," said Dr Sidney C. Smith, Jr (World Heart Federation President and Chair of the writing group).

"[Cardiovascular disease risk](#) can be lowered by public policies that help people to make healthier choices. This set of robust targets can focus governments' efforts on this vital task and make progress measurable," said Dr Ralph Sacco, Past President of the American Heart Association.

"In addition to policies that aid in prevention, it is also paramount that those living with CVD and at risk of developing CVD have access to prevention and rehabilitation services, including affordable and simple medical treatments", said Dr Hans Stam, President of the European Heart Network.

With CVD costing governments nearly US\$863 billion globally, the Taskforce recommends the uptake of a set of interventions designed by the WHO and designated as "best buys" – cost-effective treatments that can be delivered regardless of the income level of a country. These include the widespread adoption of multidrug therapies that could save nearly 18 million lives over a 10-year period, at a cost of just over a dollar a day.

"The treatments are out there, and they are feasible and cost-effective; we need to make them available and affordable around the globe for a healthier outcome", said Dr William A. Zoghbi, President of the American College of Cardiology. "The European Society of Cardiology (ESC) has recently made a call for governments to implement population-level changes, such as taxation and regulation of advertising" said Professor Robert Ferrari, ESC Past President. "Up to 50% of deaths

from CVD in Europe could be avoided by making the environment healthier, in order to nudge individuals in the right direction," added the ESC Secretary and Treasurer, Professor David Wood.

The CVD Taskforce paper is released ahead of World Heart Day on September 29, when supporters worldwide will rally for healthy homes and countries, with a particular focus on the lesser known CVD risks for women and children.

Provided by European Society of Cardiology

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