

Cost-effective interventions to help reduce early deaths from chronic NCDs

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Three top priority cost-effective interventions to counter non-communicable diseases (NCDs) are recommended as essential for health policy by an Auckland researcher in a recent paper published in the medical journal, the *Lancet*.

The major new *Lancet* series presents the latest results and ideas from some of the world's most eminent scientists that highlight the critical importance of NCDs to the post-2015 human development agenda. They propose cost-effective interventions that might help to achieve the new global target – a 25 percent reduction in premature NCD death rates by 2025.

In the second paper in the series, researchers led by Emeritus Professor Ruth Bonita from the University of Auckland, outline how to implement measures to control [tobacco use](#), [salt intake](#) and a risk based approach to prevent heart attack or stroke.

[Tobacco control](#) is the most important intervention, followed by measures to reduce levels of salt intake (to reduce blood pressure) across the whole population, and provide appropriate drug treatment for all people who have had a [heart attack](#) or stroke (or who are at high risk of one).

These interventions could cost governments in the poorest nations as little as US\$1.00–\$2.00 per head and significantly reduce deaths and disability from NCDs in all countries, says Professor Bonita.

"There are many interventions that could potentially improve NCD outcomes, but we wanted to encourage health policy leaders, especially in low-income and middle-income countries, to keep focused, as a first step, on those that will have the greatest health benefit in reducing heart attacks, stroke, diabetes, cancer and chronic respiratory disease" she says.

These leading causes of death share a few common risk factors. The next step, she suggests, is to deal with other cost-effective measure to reduce alcohol harm, halt the [obesity epidemic](#), and increase levels of physical activity across the whole population.

The cost of the three priority measures compares favourably with the staggering \$7 trillion that NCDs could cost low-income and middle-income countries between 2011 and 2025 if intervention efforts remain ineffective, she says.

"Donor and country financing, especially additional taxes on tobacco and other harmful products, can provide the resources needed."

Cutting back on salt represents a great example; reducing intake by 15 per cent, if sustained over 10 years, could result in 8.5 million fewer deaths in the 23 countries that account for 80 per cent of the global NCD burden.

Dr Bonita says that New Zealand is already leading the way in declaring a clear goal for a Smokefree NZ by 2025 where less than 5 per cent of the population smokes. Other countries are now following suit.

"In New Zealand we consume twice the amount of salt recommended, but there are opportunities to work with the food industry to reduce salt content in bread and processed foods. Tracking progress is essential," she says.

"On the other hand," Dr Bonita says, "we are lagging way behind many other countries in how we deal with harmful use of alcohol. It's important for countries to develop a multi-sectoral approach in dealing with the harmful commodity industries," she says, and alcohol is a great example.

"For instance, in New Zealand, many different sectors have a stake in curbing alcohol abuse - the Police, Social Services, ACC, hospitals, and transport - among others, since the effects of alcohol overuse is far more wide ranging than its impact on NCDs."

All countries signed up to the UN Political Declaration on NCDs in September 2011. This means that they are now committed to action and reporting on progress. Each country will need to develop its own national plan of action for the period to 2025, ensure all sectors are involved, and establish an independent NCD Commission or equivalent to report on progress, "Strong leadership and an ability to resist pressure to expand the range of interventions too widely will be needed. Widespread coverage of the proposals, together with supportive multi-sectoral action, will ensure that the global 25 by 25 goal is met", says Professor Bonita

Provided by University of Auckland

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