

Chronic disease and public health failures fuel COVID-19 pandemic

October 16 2020



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Australia was not spared as a 30-year global rise in chronic illness and related risk factors such as obesity, high blood sugar, and outdoor air pollution created a perfect storm to fuel coronavirus (COVID-19) deaths, new research shows.



The latest Global Burden of Disease Study findings also reveal that people globally are living more years in <u>poor health</u>, despite treatment advancements in many countries. While Australia has done relatively well with COVID-19 despite Victoria's second wave, experts are concerned about worrying levels of cardiovascular disease and stagnating <u>life expectancy</u>.

Published today in *The Lancet*, the latest results outline how well countries were prepared for COVID-19 in terms of underlying population health, and the scale of the challenge to protect the population against further pandemic threats.

The 30-year global study, which involves several University of Melbourne experts, analysed 286 causes of <u>death</u>, 369 diseases and injuries, and 87 <u>risk factors</u> in 204 countries and territories.

It found urgent action was needed to address the global syndemic—the aggregation of two or more concurrent or sequential epidemics, including <u>chronic diseases</u>, social inequalities, and COVID-19—to ensure more robust <u>health</u> systems and healthier people, making countries more resilient to future pandemic threats.

Several risk factors and <u>non-communicable diseases</u> highlighted, including obesity, smoking, diabetes, and cardiovascular disease, are associated with increased risk of serious illness and death from COVID-19.

Although global healthy life expectancy—the number of years a person can expect to have good health—increased steadily (by over 6.5 years) from 1990 to 2019, it has not risen as much as <u>overall life expectancy</u> in almost all of the 204 countries assessed, indicating that people are living more years in poor health.



The study also reveals that the rise in exposure to key risk factors, including high-blood sugar, high body-mass index (BMI), and elevated cholesterol, combined with rising deaths from cardiovascular disease in some countries or regions (e.g. the USA and the Caribbean), suggests that parts of the world might be approaching a turning point in life expectancy gains.

Healthy life expectancy in Australia has increased steadily over 30 years to 70.0 years in 2019 (a 4.1 year increase from 1990), but it has not risen as much as overall life expectancy (82.9 years in 2019; a 5.9-year increase from 1990), indicating that people are living longer in poor health.

Australian data also revealed:

- Ischaemic heart disease was the leading cause of health loss in Australia in 2019, followed by lower back pain, falls, major musculoskeletal disorders, and chronic obstructive pulmonary disease (COPD)
- The top-five risk factors for death in 2019 were high systolic blood pressure (contributing to an estimated 25,500 deaths), dietary risks (21,600 deaths), tobacco use (20,100), high BMI (18,700), and high blood sugar (17,700)

Senior author and University of Melbourne Laureate Professor Alan Lopez said while Australia had been comparatively "remarkably successful" in controlling COVID19 cases and especially deaths, despite Victoria's second wave, it had been much less so in controlling obesity and risks associated with poor diet. As a result, the long-term Australian decline in cardiovascular disease had ceased.

[&]quot;Australian life expectancy has not increased in the past five years,"



Professor Lopez said.

"While the immediate global public health priority is understandably the rapid control of the COVID-19 pandemic, these findings about the state of the world's health are a wake-up call that large, avoidable causes of health loss such as smoking, alcohol, obesity and poor blood pressure and cholesterol control continue to claim millions of lives prematurely each year."

"Of even greater concern is that the impact of this risk factor 'cocktail' of smoking, poor diet and inadequate control of blood pressure and other metabolic factors is increasing in many countries, including Australia, as evidenced by the stagnation in life expectancy over the past five years."

Study authors from a range of countries and institutions stressed that government actions to prevent <u>disease</u> through incentivisation of healthier behaviours and facilitation of better access to healthcare are not being realised globally.

Professor Christopher Murray, Director of the Institute for Health Metrics and Evaluation at the University of Washington, USA, led the research.

"Most of these risk factors are preventable and treatable, and tackling them will bring huge social and economic benefits," Professor Murray said.

"We are failing to change unhealthy behaviours, particularly those related to diet quality, caloric intake, and physical activity, in part due to inadequate policy attention and funding for public health and behavioural research."

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0140-6736(20)X0042-0

Provided by University of Melbourne

Citation: Chronic disease and public health failures fuel COVID-19 pandemic (2020, October 16) retrieved 2 May 2024 from https://medicalxpress.com/news/2020-10-chronic-disease-health-failures-fuel.html

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