

## Editorials

# Non-communicable diseases—neglected diseases in global health work?

Pekka Puska

Director General, National Institute for Health and Welfare (THL), Helsinki, Finland

Correspondence: Pekka Puska, National Institute for Health and Welfare (THL), FI00270 Helsinki, Finland, e-mail: pekka.puska@thl.fi

During the last few years we have seen a move from 'international health' to 'global health'. This is a consequence of understanding how global trends and determinants increasingly influence public health everywhere in the world. There is a mushrooming of meetings, initiatives, programmes and centres on global health.

Consequently, also financial aid to global health activities has much increased. Much of this goes to programmes on infectious diseases or other traditional health issues—many of them in form of vertical disease specific actions. Very little, i.e. less than 3% of the global development assistance for health, goes to prevention and control of chronic non-communicable diseases (NCDs).<sup>1</sup>

This is in sharp contrast to the observations on how global health is rapidly changing. Although many infectious diseases and other traditional health issues, like child and maternal mortality, remain serious problems and should be vigorously addressed, NCDs have started to dominate global public health.<sup>2</sup>

Already now some 2/3 of all deaths in the world, i.e. approximately 36 million annual deaths, are due to NCDs. Gone are the times when NCDs were 'diseases of affluence' and only of industrialized countries. Nearly 80% of NCD deaths occur in the developing world, where much of the mortality occurs in the working aged population hampering social and economic development.<sup>3</sup> And in most countries these diseases and their risk factors have moved to lower socio-economic segments of the population, being a major cause of health inequalities and adding to poverty.<sup>4</sup>

It can only be speculated, why Western countries so far have neglected NCDs in their international health work. It is certainly partly due to inertia in change and to wrong myths and lack of knowledge of the true situation. It can partly also be due to the self interests of Western governments in prevention of infectious disease epidemics from their countries, due to supporting the economic interests of their drug and vaccine industry or due to the perceived problems for trade agreements in NCD prevention.

Fortunately the situation is changing; much because of the political pressure from the low- and middle-income countries. Their governments see the great burden of conditions like hypertension, diabetes, cardiovascular diseases and cancer—and the increasing obesity, smoking, unhealthy diets and reduced physical activity. It is increasingly realized that these are social consequences of globalization that countermeasures are needed.<sup>5</sup> The global epidemic of NCDs has global social determinants that should be addressed by global action.

A milestone in the realization of these new demands was the resolution of the UN General Assembly in May 2010 to decide on a Head of State Special General UN Assembly on NCDs to take place in September 2011 in New York. The preparations are well under

way. The political initiative came from many developing country governments, but fortunately several European countries cosponsored.

The September UN Summit is an unprecedented opportunity to start to tackle NCDs on global level and thus to make a considerable contribution to global public health. The epidemic is global and can effectively only be countered by global action.

It is important that the Summit will have a strong political outcome supporting global actions. The outcome document should not only repeat the technical advice on NCD prevention that WHO has already for years given to its Member States.<sup>6</sup> These, as such very important, have emphasized strengthening of the primary health care and public health infrastructures. But such recommendations are not enough without practical political support measures, such as increasing channeling of development aid to NCD work.

Since the global NCD epidemic is much a consequence of global changes in certain lifestyles, the big potential in global health lies in global action to influence NCD related lifestyles. This calls for development and implementation of global measures and instruments. The WHO Framework Convention on Tobacco Control has been a pioneering international instrument, the favourable impact of which has started to show. Global instrument need not necessarily be heavy conventions but other political effective actions.

The public health community has all the reason to follow the work related to the coming UN summit and to work i.e. with the NCD NGO Alliance, so that best possible outcome could be realized to help prevent and control of NCDs on global scale and thus to make a considerable impact on global public health.

## References

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