Regional Seminar on the Implementation of the Cardiovascular Risk Reduction in the Americas

Progress and status of NCD commitments in the Region of the Americas

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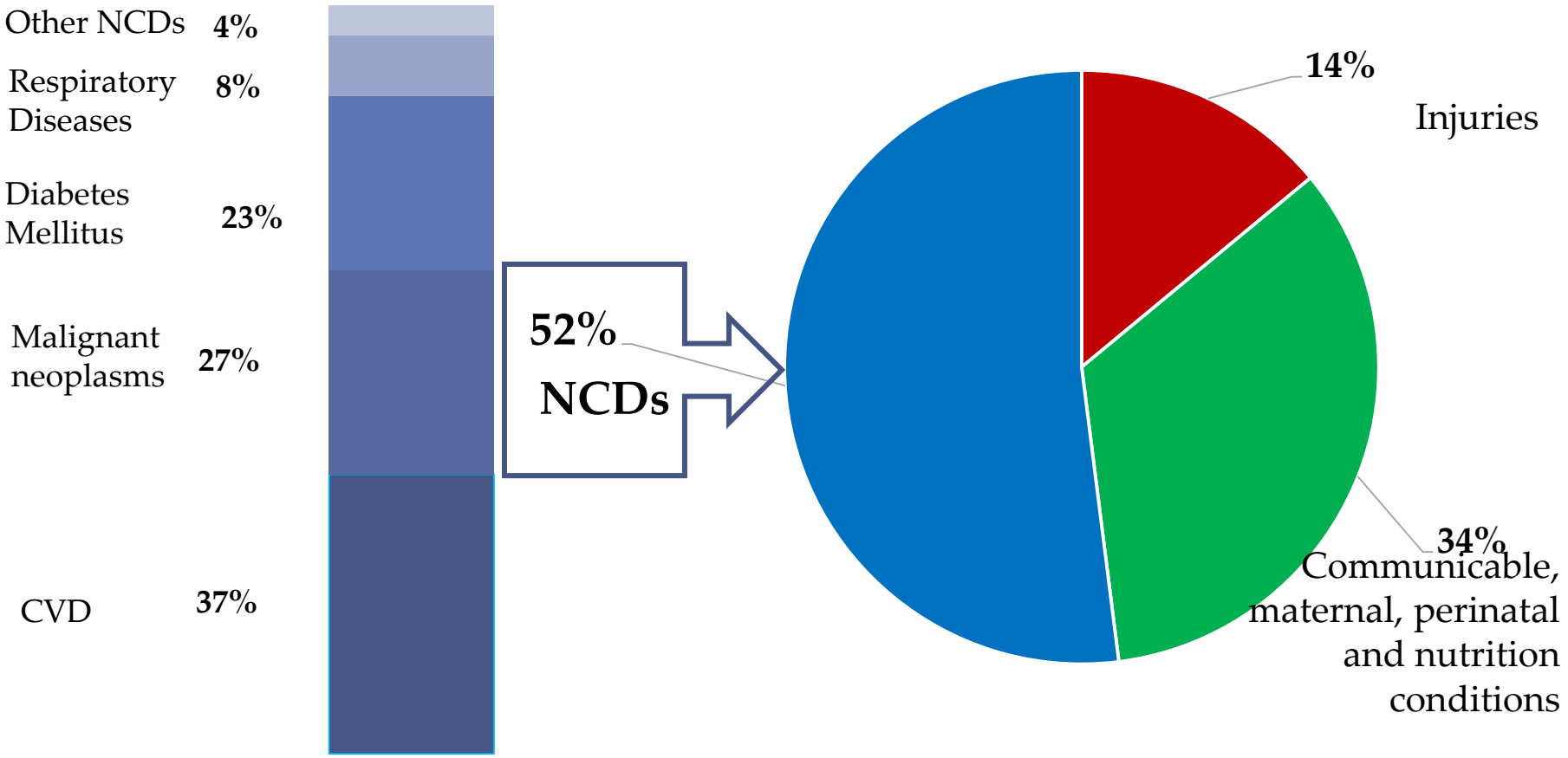
The Global Burden of NCDs

Proportion of global deaths below age 70 by cause of death, comparable estimates, 2012

NCD Premature Mortality (30-70 years old) – 52%



Source: WHO. NCD Global Status Report, 2014

The Regional Burden of NCDs

The burden of NCDs in the Americas

4.8 million

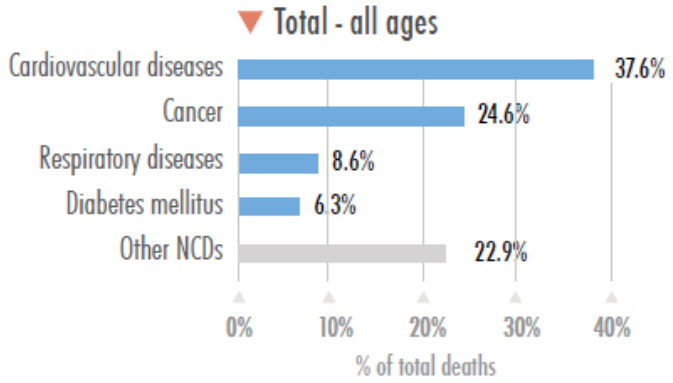
Deaths by NCDs

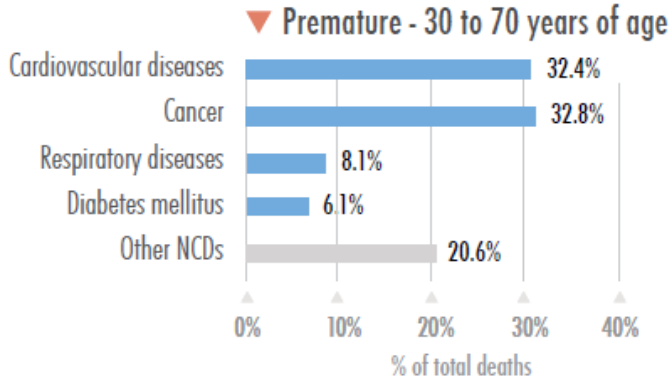
79%

Of all deaths are caused by NCDs

35%

Of NCD deaths are premature (30-69 years of age)



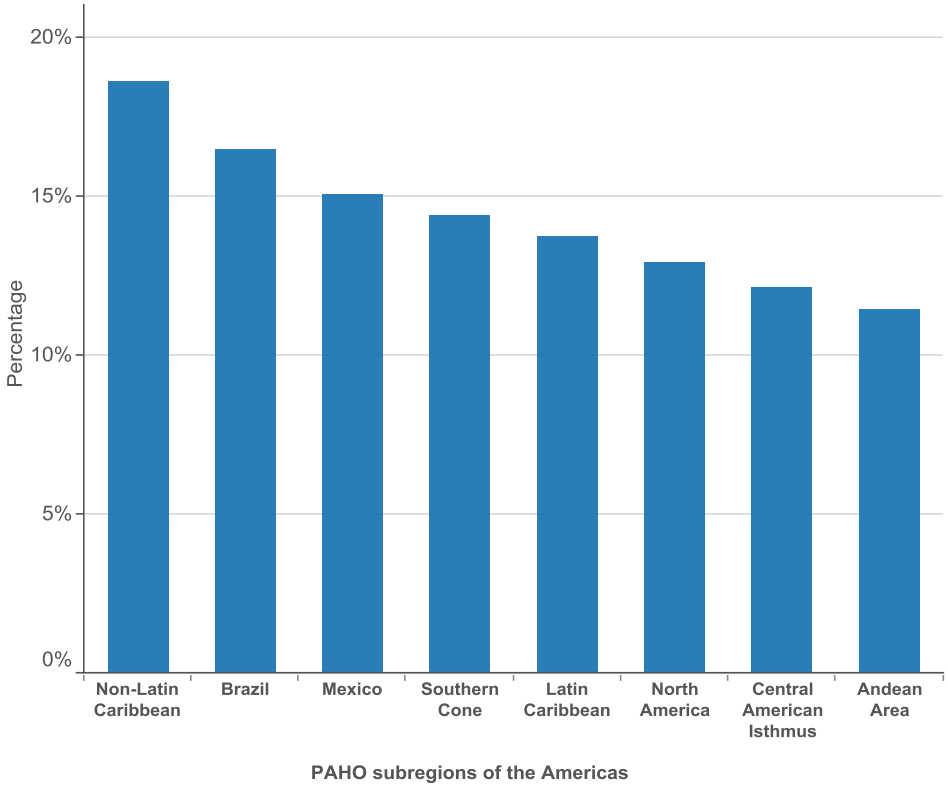


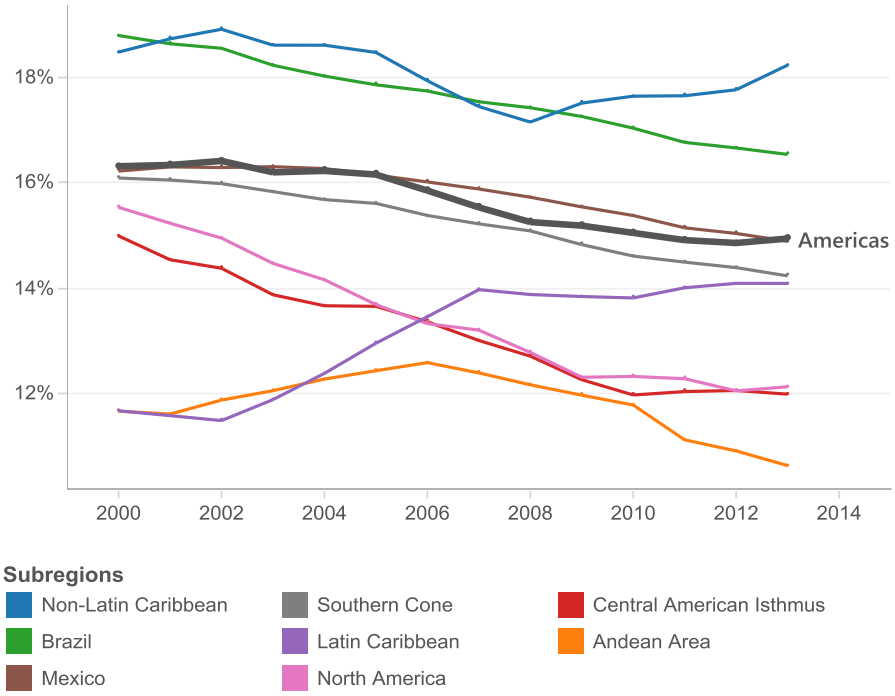
Source: PAHO/WHO Regional Mortality Database, 2016, corrected data

Premature NCD Mortality in the Americas

Premature mortality

Unconditional probability of dying between exact ages from 30 to 70 years old due to any of the four major NCDs





Source: 2012 estimates, WHO NCD Global Status Report 2014

Source: Regional Mortality Information System. PAHO

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Global Commitments for NCDs

NATIONAL TIME BOUND COMMITMENTS FOR MEMBER STATES

By 2015, consider setting national NCD targets

By 2015, consider developing national multisectoral policies and plans

Integrate NCDs into health-planning and national development plans

By 2016, implement "best buys" to reduce risk factors for NCDs

By 2016, implement "best buys" to enable health systems to respond

Strengthen national surveillance systems

Global NCD Monitoring Framework for 2025

	Mortality & Morbidity	Risk Factors						National Systems Response	
									
Targets	**25%** reduction	**10%** reduction	**10%** reduction	**30%** reduction	**30%** reduction	**25%** reduction	**0%** increase	**50%** coverage	**80%** coverage
	Premature mortality	Harmful use of alcohol	Physical inactivity	Salt/ sodium intake	Tobacco use	Raised blood pressure	Diabetes & obesity	Drug therapy (heart attacks & strokes)	Essential meds. & basic tech.

NCD Management

By 2016, strengthen health systems to address NCDs through people-centered primary health care and universal health coverage

***OBJECTIVE 3**: Improve coverage, access and quality of care for NCD management*

- Improve **quality of care** (eg. Chronic Care Model)
- Increase access to essential **medicines and technologies**
- Implement effective **interventions** for NCD screening, treatment and control

Global NCD Targets:

- 80% coverage of essential medicines and basic technologies
- 50% of people at high cardiovascular risk receive appropriate drug therapy and counselling to prevent heart attacks and stroke

Best Buy Interventions for NCD Management

Cardiovascular diseases and diabetes

- **Drug therapy for hypertension control and diabetes control**
- **Total risk approach and counselling for those who have had a heart attack or stroke and those with high risk of CV event in next 10 years**
- **Aspirin for acute myocardial infarction**

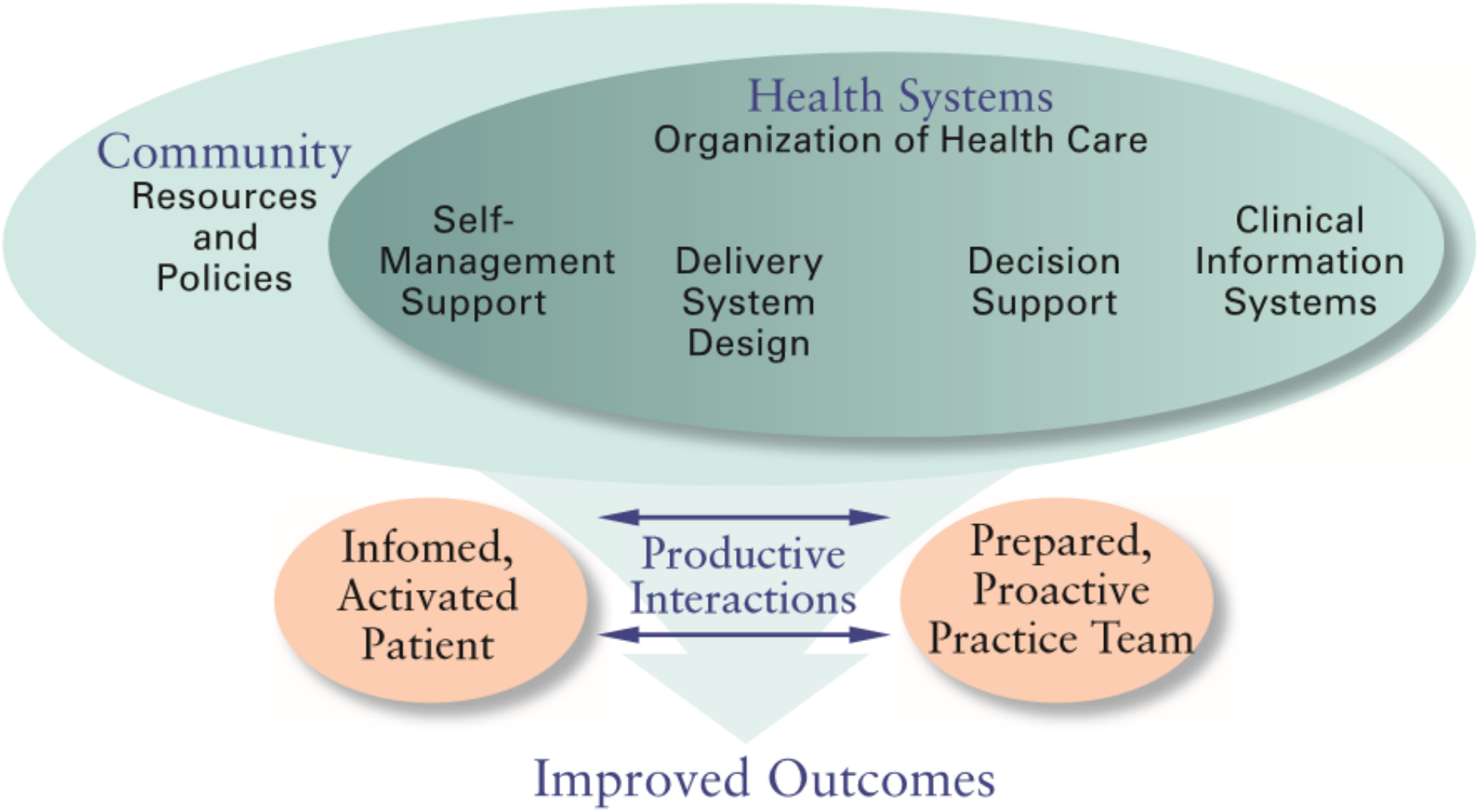
Cancer

- **Liver cancer prevention** by hepatitis B vaccination
- **Cervical cancer prevention** by vaccination against human papillomavirus of 9–13 year old girls and by screening women aged 30-49 years
- **Breast cancer screening** with mammography, every 2 years for women aged 50-69 years
- **Colorectal cancer treatment** with surgery, chemotherapy, radiotherapy
- **Palliative care**

Chronic Respiratory Diseases

- Asthma symptom relief with inhaled salbutamol
- COPD symptom relief with inhaled salbutamol
- Asthma treatment using low dose inhaled beclometasone and short acting beta agonist

Chronic Care Model to improve NCD management



Source: Wagner E et al. 2001

PAHO Tools and Resources for NCD Management

PAHO strategic fund

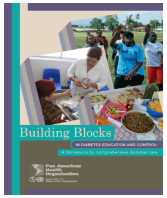
Innovative care for chronic conditions: organizing and delivering high quality care for chronic NCDs in the Americas

Guideline for Assessment and Management of Cardiovascular Risk

Chronic care passport for professionals

National cancer control programs: policies and managerial guidelines

Comprehensive cervical cancer control. A guide to essential practice



Building blocks in diabetes education and control: A Framework for comprehensive diabetes care

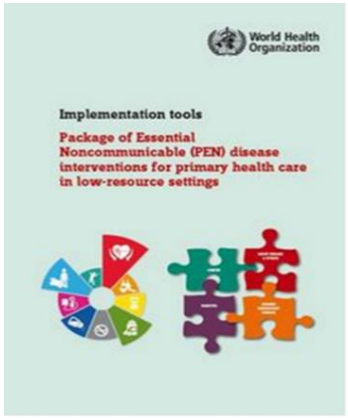
PAHO Tools on NCD Management

Capacity building tools (virtual courses)

Self-learning and tutorial virtual courses on:

- diabetes
- tobacco control
- alcohol
- hypertension
- chronic kidney disease
- *How to effectively address NCD (CARMEN School)*

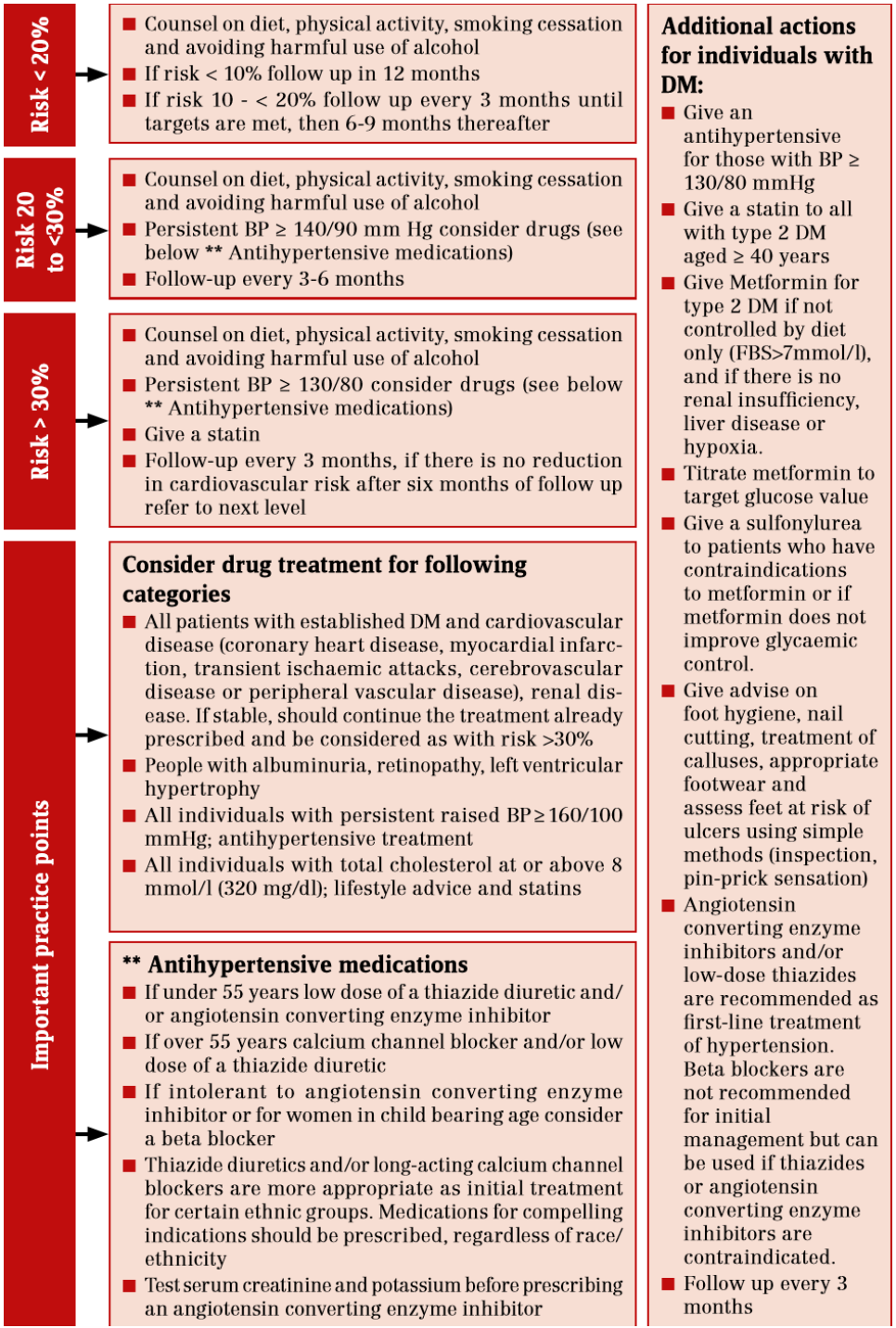
WHO Package of NCD Interventions



- Guidance to assess needs, strengthen health systems, and implement NCD interventions
- Protocols for clinical diagnosis and treatment
- Tools for risk prediction of heart attacks and stroke
- Minimum requirements for essential NCD medicines and technologies
- Standards and indicators to measure progress and impact

Source: WHO, 2010; WHO, 2013

Example of PEN protocol for CVD and diabetes management



Source: WHO, 2013

PAHO Tools and Resources for NCD Management

HEARTS

Technical package for cardiovascular disease management in primary health care

Healthy lifestyle
Counsel on tobacco cessation, diet, harmful use of alcohol, physical activity and self-care

Evidence-based treatment protocols
Simple and standardized protocols

Access to medicines and technologies
Access to a core set of affordable medicine and basic technology

Risk-based management
Total cardiovascular risk assessment, treatment and referral

Team-based care and task sharing
Patient-centered care through a team approach and community participation

Systems for monitoring
Patient registries and program evaluation

PAHO's Next Steps for NCD Management

- Support Member States to achieve the NCD commitments
- Implement the cost-effective measures "Best Buys", focusing on cardiovascular diseases, diabetes, and common cancer types
- Build country capacity to reorient health systems and services to improve NCD management
- Increase access to NCD medicines through the PAHO Strategic Fund.

OUR GOAL

By 2030, reduce by one-third premature mortality from NCDs

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