



EHFG 2012: Chronic diseases pose bigger threat than economic crisis

Every year 36 million people around the globe die of non-communicable diseases (NCDs). The economic costs of these diseases will add up to US\$ 30 trillion by 2030. Low and medium-income countries are the hardest hit according to experts at the European Health Forum Gastein.

Bad Hofgastein, 4 October 2012 – “The economic burden we have to bear from non-communicable diseases is now bigger than from the economic crisis according to the World Economic Forum, and more of a threat than climate change,” Judith Watt, Director of the NCD Alliance, said. This NGO alliance has set itself the task of bringing NCDs – diabetes, cancer, cardiovascular diseases and chronic lung disorders – and their associated risk factors, into the international spotlight.

NCDs are the cause of death for about 29 million people each year in low- and middle-income countries, where about one third of those affected die before reaching the age of 60. In industrialized countries, this figureⁱ is 13%. In a forum of the European Health Forum Gastein (EHFG) arranged by the Taiwanese Health Ministry, experts from around the globe discussed the consequences that the NCD epidemic is having for health and the economy.

Enormous economic burden

Judith Watt: “The biggest challenge facing us is the sheer magnitude of the problem. NCDs pose a threat to social and economic development for every country on the planet.”

The World Economic Forum and the Harvard School of Public Health estimate the total economic burden for the most important of these chronic diseases will mount to US\$30 trillion from 2011 to 2030. The economic cost of mental and neurological disorders is expected to be about US\$16 trillion for this same period. These are enormous sums. Together, they are the equivalent of 75% of the global gross domestic product (GDP) for 2010ⁱⁱ.

Risk higher for those with poor education and low income

Risk factors associated with NCDs are unequally distributed internationally but also within individual countries. Social determinants such as education and income greatly influence the risk of contracting NCDs. People with a low income are more exposed to the risk factors common to these diseases and therefore contract them with correspondingly greater frequencyⁱⁱⁱ.

This effect is particularly dramatic in developing countries. For instance, in Bangladesh, India, Thailand or the Philippines, the smoking rates are highest in the least educated and poorest parts of the population^{iv}. The NCD Alliance reports that in Bangladesh, for example, if a household took the average money it spent on tobacco and used it to buy food, there would be 10 million fewer malnourished people^v.

In countries where the provision of public health care is less well developed, low-income households quickly get into a debt trap because of treatment costs. One study found that cardiovascular diseases result in perilously high spending for 25% of Indian families and drive 10% of Indian families into poverty^{vi}.



Industry is not completely blameless for this global spread of NCDs. Judith Watt: “Mosquitoes causing malaria do not engage PR agencies and government lobbyists, whereas tobacco companies causing NCDs do, in order to defeat, delay or dilute government measures to reduce tobacco use. The producers of processed food, beverage and alcohol products also contribute to the global spread of NCDs,” the expert said. She then added: “These companies can be part of the solution, not just part of the problem, but they must do everything in their power to support efforts to tackle NCDs if they are to be welcomed as partners to governments and NGOs.”

Health in all policies

The international community must respond to these developments. Judith Watt: “The price of not acting is much greater than the price for efficient policies and programs to combat the spread of NCDs.” She urged policymakers in all areas to commit themselves to fighting these diseases. “It is clear that the mass epidemic of NCDs has long been a problem for more than health policymakers alone. The measures needed extend well beyond the areas of responsibility of health ministries; a concerted effort by all areas of policymaking is required.”

The EHFG is the most important conference on health care policy in the European Union. In this its 15th year, the EHFG attracts more than 600 decision-makers from 45 countries to discuss major topics on the future of the European health care system from 3 to 6 October 2012.

Please find photos of the European Health Forum Gastein using this link: <http://www.ehfg.org/940.html>.

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ⁱ *Mortality and burden of disease estimates for WHO Member States in 2004*. Geneva: World Health Organization; 2009. zit. nach: Ala Din Alwan, Gauden Galea, David Stuckler: *Bulletin of the World Health Organization* 2011;89:546-546A. doi: 10.2471/BLT.11.091074

ⁱⁱ World Economic Forum and Harvard School of Public Health, *The Global Economic Burden of Non-communicable Diseases* (2011), p. 6.

ⁱⁱⁱ World Health Organization, *Global Status Report on Noncommunicable Diseases 2010*, 2011.

^{iv} Palipudi KM et al. 2012. *PLoS ONE* 7(3): e33466

^v *Tobacco Atlas* (3rd ed.), p. 44.

^{vi} Mahal A et al. *HNP Discussion Paper: The Economic Implications of Non-Communicable Disease for India*, World Bank, January 2010. As cited by Ala Din Alwan, Gauden Galea, David Stuckler: *Bulletin of the World Health Organization* 2011;89:546-546A. doi: 10.2471/BLT.11.091074