



Confronting the Epidemic of Chronic Disease

Global health and the Oxford Health Alliance

April 2009

Who we are

Established in 2003, with partners including:

- World Health Organisation
- Oxford University
- Novo Nordisk A/S

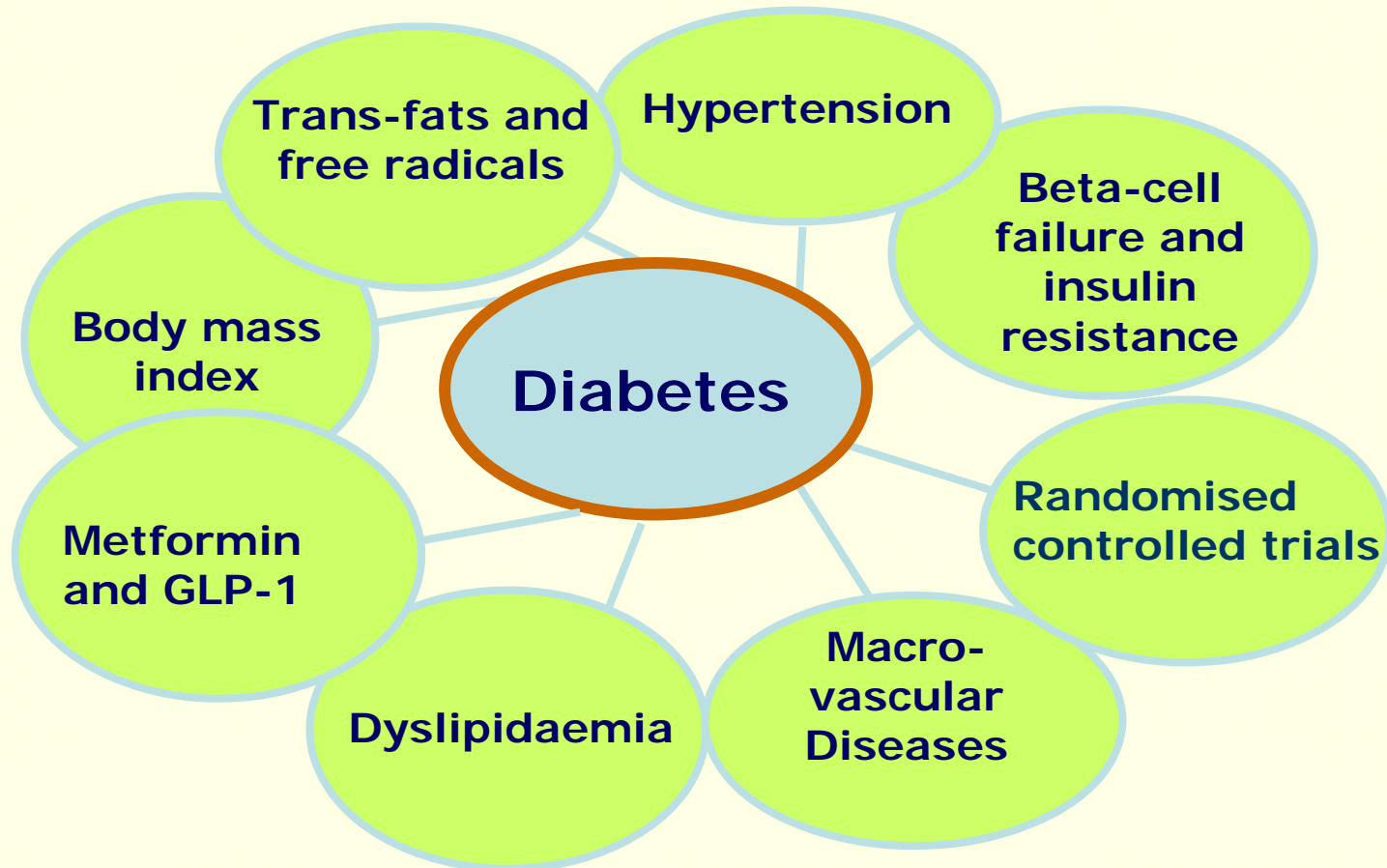
OxHA's Board of Trustees:

- Professor Sir John Bell
- Dr Derek Yach
- Lars Rebien Sørensen
- Professor David Matthews



The universe in which we operate

Medical



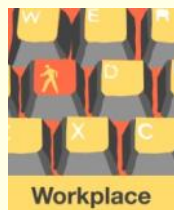
The universe in which we operate

Socio-political



The six workstreams

- OxHA is concentrating its efforts on six key areas in which there is scope for fruitful dialogue between our diverse stakeholders, and where we can foresee facilitating effective action.
 - The economic argument for prevention.
 - Prevention in the workplace.
 - Youth, children and future health.
 - Environmental design for prevention.
 - Industry's role in prevention.
 - Law & health.



FEATURE

Grand challenges in chronic non-communicable diseases

The top 20 policy and research priorities for conditions such as diabetes, stroke and heart disease.

Abdallah S. Daar¹, Peter A. Singer¹, Deepa Leah Persad¹, Stig K. Prammings², David R. Matthews³, Robert Beaglehole⁴, Alan Bernstein⁵, Leszek K. Borysiewicz⁶, Stephen Colagiuri⁷, Nirmal Ganguly⁸, Roger I. Glass⁹, Diane T. Finegood¹⁰, Jeffrey Koplan¹¹, Elizabeth G. Nabel¹², George Sarna⁶, Nizal Sarrafzadegan¹³, Richard Smith¹⁴, Derek Yach¹⁵ and John Bell¹⁶

Chronic non-communicable diseases (CNCDs) are reaching epidemic proportions worldwide¹⁻³. These diseases — which include cardiovascular conditions (mainly heart disease and stroke), some cancers, chronic respiratory conditions and type 2 diabetes — affect people of all ages, nationalities and classes.

The conditions cause the greatest global share of death and disability, accounting for around 60% of all deaths worldwide. Some 80% of chronic-disease deaths occur in low- and middle-income countries. They account for 44% of premature deaths worldwide. The number of deaths from these diseases



Poor diet and smoking are two factors that contribute to the millions of preventable deaths that occur each year.

Nature 450, 494-496; 2007

Grand challenges

6 goals

20 grand challenges

39 steps

GRAND CHALLENGES IN CHRONIC NON-COMMUNICABLE DISEASES

	Grand challenges	Research needed to address goals
Goal A Raise public awareness	<ol style="list-style-type: none"> 1 Raise the political priority of non-communicable disease 2 Promote healthy lifestyle and consumption choices through effective education and public engagement 3 Package compelling and valid information to foster widespread, sustained and accurate media coverage and thereby improve awareness of economic, social and public health impacts 	<ul style="list-style-type: none"> • Study how to engage governments in partnerships for disease prevention • Develop research activities for health that bridge government departments (for example, transport, civic planning, health, education and environment) • Identify reasons for low awareness and advocacy of chronic disease in societies • Study how to create public forums that sustainably raise awareness of issues relating to chronic non-communicable diseases
Goal B Enhance economic, legal and environmental policies	<ol style="list-style-type: none"> 4 Study and address the impact of government spending and taxation on health 5 Develop and implement local, national and international policies and trade agreements, including regulatory restraints, to discourage the consumption of alcohol, tobacco and unhealthy foods 6 Study and address the impacts of poor health on economic output and productivity 	<ul style="list-style-type: none"> • Evaluate the health impacts of agricultural policy interventions • Study the health and economic impacts of comprehensive community-based interventions • Create general population metrics and outcome indicators for policy and programme surveillance. • Quantify impact of chronic non-communicable diseases on domestic economies • Study the international ramifications of changes in food and tobacco consumption • Probe motivations behind domestic expenditures, and how these affect lifestyle choices • Investigate the impact and effectiveness of food-labelling legislation
Goal C Modify risk factors	<ol style="list-style-type: none"> 7 Deploy universally measures proven to reduce tobacco use and boost resources to implement the WHO Framework Convention on Tobacco Control 8 Increase the availability and consumption of healthy food 9 Promote lifelong physical activity 	<ul style="list-style-type: none"> • Do prospective cohort studies to identify risk factors, the magnitude of their effects, and the factors that reduce risk in chronic non-communicable diseases • Evaluate fetal and early-life influences on chronic disease risk • Find and evaluate new or combined medical preparations to prevent cardiovascular disease and diabetes or reduce their morbidities • Evaluate behavioural modifications to reduce risks

Nature 450, 494-496; 2007

Global Alliance for Chronic Diseases



- Grew out of the Grand Challenges process
 - Co-ordinating body working with NIH and similar agencies in Australia, China, India and UK
 - Harmonise efforts among other relevant initiatives
 - Develop an advocacy programme to encourage the adoption of these challenges and goals
 - Encourage development of a parallel process by the private sector
 - Monitor and report (annually) progress towards meeting the Grand Challenges
 - Due to launch in June 2009

- **Community Interventions for Health (CIH)** is the largest and most comprehensive multinational collaborative study for community interventions ever undertaken.
- CIH will address the urgent need to have a greater understanding of best practices in both developed and developing countries.
- The long-term goal of the CIH study is to create sustainable interventions that prevent and control the leading chronic diseases by addressing the three main risk factors – tobacco use, poor diet and lack of physical activity.
- Innovative website to showcase CIH: www.cih.net

Three risk factors

- **Three** risk factors cause **four** chronic diseases that cause **over half** of deaths worldwide.
- The risk factors are:



Tobacco use



Lack of physical activity



Unhealthy diet



3.4.50
PREVENIR PARA
REVERTIR LOS
NÚMEROS



Estos datos son una alerta mundial de salud y se refieren a los 3 factores de riesgo cardiovasculares de 4 enfermedades que provocan el 50% de muertes en el mundo. Nosotros podemos evitar ser parte de dichas estadísticas.

Parfit

3FOUR50
AN OXFORD HEALTH ALLIANCE INITIATIVE



Oxford Health Alliance

The Oxford Health Alliance (OxHA) is confronting the global epidemic of chronic disease.

OxHA enables experts and activists from different backgrounds to collaborate in order to raise awareness and change behaviours, policies and perspectives about the epidemic of chronic disease at every level of society.

