

Pakistan – Double burden of diseases

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Globally deaths from non-communicable diseases (NCDs) are expected to reach 47.9 million by the year 2020 which is 77% increase from the statistics of 1990 (28.1 million). Among these 70-80% deaths occur in low and middle-income countries.¹

South Asian countries face a double burden of disease (DBD) due to communicable and non-communicable diseases, Pakistan being one of them. On one end of the spectrum is the challenge of controlling the spread of communicable diseases (CD's) while on the other end is the increase in the prevalence of NCDs which will place an unavoidable burden on health services; their availability and affordability.² Unfortunately Pakistan has yet to control the communicable diseases like tuberculosis, malaria, dengue fever, typhoid, viral hepatitis, cholera, vaccine preventable diseases and other infectious diseases. Moreover, there is a rising trend of non-communicable diseases like cardiovascular diseases, diabetes mellitus, hypertension, cancers, stroke, mental health problems and accidents and injuries.³ despite number of vertical and horizontal national health programs, Pakistan is having high maternal and neonatal mortality rates, due to the causes like sepsis and hemorrhage which are mostly preventable. Furthermore, in young children, diarrhea and respiratory illnesses are considered as the major killers. The estimated prevalence for various forms of malnutrition in children under 5 years of age is: 31.6% underweight, 10.5% wasting, 45.0% stunting and 4.8% overweight. While half of the women of reproductive age are anemic i.e. 50.4%.³

According to the WHO country profile of Pakistan, about 80 million individuals suffer from one or more of these NCDs. Among these, 25.3% individuals had hypertension, while 19% had CVD diseases. Moreover,

17% of adult population had diabetes mellitus, while 6% had chronic respiratory diseases, and 8% had cancers.⁴

The factors responsible for the emergence of NCDs are the combination of urbanization, global trade and consumer markets, besides lifestyle factors as lack of physical activity, smoking and drug abuse. However, the number of aging populations is also increasing due to the increasing life expectancy. Non-communicable diseases can largely be prevented by adopting healthy life style. So, proper laws and regulations should be made for making people understand the importance of opting for healthy choice as the easy choice.⁵

Furthermore, if we talk about the communicable diseases, Pakistan ranks 5th highest among the burden of tuberculosis globally. While, malaria is endemic and unfortunately poliomyelitis is yet to be eradicated – for which more than 10 cases have been reported in the first four months of 2019. Presently NCD's along with Injuries and mental health diseases constitute the other half of the burden of diseases. Injuries account for more than 11% of the total burden of disease and is likely to rise with increasing road traffic, urbanization and social conflicts.⁵

One of the factors affecting the health systems strengthening includes low GDP being allocated for health sector, poor spending on social indicators along with slow economic growth, lack of public and private sector partnership for health. However, due to high-cost for curative care it is becoming difficult for the individuals belonging to low socio-economic groups to access and utilize those health services.

Disease prevention and health promotion are the most effective interventions for solving this issue. So, Government needs to give priority to health sector and increase its budgetary allocation for healthcare.⁶

Pakistan needs to chalk out an extraordinary strategy for the existing and the upcoming challenges related to the burden of diseases. Cost effective interventions include early screening, life style modifications; cessation of tobacco use, control of blood pressure by low salt intake, increased consumption of fruits and vegetables along with adopting physical activity in daily routine.⁷

The cost incurred on chronic NCD's include both the direct cost (attributable to illness) and indirect cost (attributable to productivity losses) is very high; in order to decrease this burden of disease (BOD) following recommendations are made.⁸

1. Health education and awareness campaigns using social media should be conducted to highlight the deleterious effects of tobacco use, unhealthy diet, sedentary life style, obesity, drug abuse and alcohol use. Community based activities should be carried out.
2. Provision of recreational and sports facilities including sports ground, parks and walking tracks at community level should be ensured.
3. High risk groups across country should be identified and subjected to screening for early detection.
4. Emphasis should be laid on adopting preventive measures. This may be carried out through the use of health care brochures, through print and electronic media.
5. At the national level increasing taxation and strict legislation on tobacco smoking and manufacture of unhealthy processed food.

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