Against the Growing Burden of Disease

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Chronic diseases are an increasing global challenge…

Most significant cause of death (63%) worldwide¹

Chronic diseases cause premature deaths under age 60:
13% in high income countries
29% in low middle income countries

Even in African nations, chronic diseases are rising rapidly, projected to exceed communicable, maternal/perinatal, and nutritional diseases as the most common causes of deaths by 2020

Source: World Health Organization (WHO).

¹Except in sub-Saharan Africa.
Chronic diseases represent a major fiscal and productivity risk for the economies of low, middle, and high income countries.

Chronic diseases increase income inequities, deplete household wealth, increase health spending and lower labour productivity.

Most countries will not be able to address chronic disease challenge with medical care alone: Prevention is critical.

In Canada, deaths due to chronic diseases are rising…

The proportion of people dying from chronic conditions is constantly increasing.

Source: Centre for Chronic Disease Prevention and Control, Public Health Agency of Canada, using data from OECD HEALTH DATA 2010, June.
...and chronic disease rates are increasing at 14% each year.

3 out of 5 Canadians older than 20 have a chronic disease
4 out of 5 are at risk

Source: Centre for Chronic Disease Prevention and Control, Public Health Agency of Canada, using POHEM Model, Statistics Canada.
Rising obesity rates are driving the chronic disease epidemic.

Obesity increasing among Canadians, especially in children, youth and Aboriginal peoples.

1 out of 4 Canadian children are overweight or obese.

1 out of 6 Canadians aged 20 and older are obese.

Source: Centre for Chronic Disease Prevention and Control, Public Health Agency of Canada, using data from OECD HEALTH DATA 2010, June.
Canada’s population is changing…

Aging population
• Today, 14% of the population is over 65 years. By 2036, this number will increase to almost 25%, or 10 million people

Increase in chronic disease prevalence
• Canadians are living longer and more likely to experience chronic conditions more common at older ages, including neurological diseases

Living with chronic diseases earlier in life
• Chronic disease rates are increasing faster among Canadians aged 35-64 years than Canadians aged 65 years and over
• More children are being affected by chronic diseases previously only seen in adults

Aboriginal peoples at higher risk
• Experience higher rates of diseases such as heart disease, diabetes, cancer, and asthma
• Aboriginal population expected to grow at more than twice the rate of 0.7% of the general population (1.8% annually)
More working age Canadians are living with diabetes.

Increase of 1% per year in 35-44 year age group.

Increase of 1.5% per year in 45-64 year age group.

We understand the pathway to chronic diseases...

80% of heart disease, diabetes and respiratory diseases and 40% of cancers are preventable by eliminating four common risk factors:

- Tobacco use
- Unhealthy diets
- Physical inactivity
- Harmful use of alcohol

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<thead>
<tr>
<th>Chronic Diseases</th>
<th>Tobacco use</th>
<th>Unhealthy diets</th>
<th>Physical inactivity</th>
<th>Harmful use of alcohol</th>
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<td>Respiratory diseases</td>
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Source: WHO, Raising the priority of non-communicable disease in development work at global and national levels.
We are now seeing the consequences of chronic disease.

- Greater demands for health services
- Workforce absenteeism
- Increasing productivity losses
- Escalating economic costs
Chronic diseases account for the majority of direct health care costs.

- Treatment of chronic disease consumes 67% of all direct health care costs, and cost the Canadian economy $190 billion annually – $68 billion is attributed to treatment and the remainder to lost productivity.

- Health expenditures to treat chronic diseases are rising faster than our economic growth.
Health expenditures are increasing as a relative proportion of Canada's GDP...

**Note**

f = forecast.

**Sources**

National Health Expenditure Database, CIHI; The Conference Board of Canada.
… and in British Columbia health care costs are projected to quickly crowd out other expenditures by 2017.
It will take everyone working together to turn the tide.

The challenge:
- Developing countries face a double burden of malnutrition and obesity
- Circular relationship between poverty and chronic disease
- Infectious diseases are an on-going threat
- Disease prevention requires a multisectoral approach
Poverty is a significant issue.

Poverty creates conditions for chronic diseases:

- Tobacco use/exposure
- Poor nutrition
- Low physical activity
- Harmful use of alcohol
- Poor indoor air quality
- Decreased access to health care

Chronic diseases create poverty:

- Low productivity
- Increased risk of disabilities & premature death
- Increased household expenditures
Canada’s approach to public health…

- Public health places a focus on prevention over treatment. It works to keep people healthy, safe, and productive by responding to direct risks to health (e.g. infectious diseases, emergency events) or trends that contribute to risk (e.g. obesity).

- The Public Health Agency of Canada seeks to protect and promote the health of Canadians through leadership, partnership, innovation and action in public health.

- By helping to support conditions for healthy aging, chronic diseases can be prevented or delayed.

- Investments in research help us to better understand disease and the wide range of determinants that affect health over the life course.

- Working with a range of partners is also critical to providing information and tools to promote healthy aging and prevent chronic disease.
...involves working together towards prevention.
Prevention is everyone’s business…
... and we are building critical partnerships to deliver results.

• Provinces / Territories
  » Federal support for health system innovation towards sustainability, with a focus on health system efficiency and better patient outcomes
  » Key partnerships on northern health issues
  » Federal government provides added value to collaborative strategies through leadership and strategic investments to address key issues while respecting jurisdictional responsibilities

• Stakeholders
  » Strategic partnerships across critical areas, such as:
     » Canadian Partnership Against Cancer
     » Mental Health Commission of Canada
     » Canadian Diabetes Association
     » National Aboriginal Organizations

• International partnerships
  » Multilateral (e.g. through World Health Organization, Pan-American Health Organization)
  » Bilateral key partnerships
Canada is investing domestically…

- Significant investments in disease-specific strategies: **Canadian Strategy for Cancer Control**, implemented by the Canadian Partnership Against Cancer, the **Canadian Diabetes Strategy**, the **Aboriginal Diabetes Initiative** and the **National Lung Health Program**

- The **Canadian Task Force on Preventive Health Care** provides national expert guidance on effective prevention for primary care providers

- **Age-Friendly Communities Initiative** with provinces and territories brings older Canadians into the planning and design of their communities to create healthy, safe and supportive environments

- The **National Population Study on Neurological Conditions** is advancing the knowledge of neurological diseases – a leading cause of disability in Canada

- **Canadian Longitudinal Study on Aging** will increase our understanding of health, social, and economic issues of Canadians age 45 to 85 over the next 20 years

- Many initiatives promoting healthy lifestyles: **Healthy Living Fund, Aboriginal Head Start, Community Action Program for Children, Canada Prenatal Nutrition Program, and Nutrition North Canada** program
...and working with partners globally to make a difference.

- The Government of Canada is part of an international effort to prevent chronic disease.

- In September 2011, the United Nations Political Declaration on the prevention and control of noncommunicable diseases was adopted.

- The UN Political Declaration calls for the WHO to establish a Comprehensive Global Monitoring Framework and develop Voluntary Global Targets by the end of 2012.

- The WHO is also to develop an updated Global Action Plan for the Prevention and Control of NCDs 2013-2020.

- Multisectoral action is a key element, and the health sector can be a catalyst for change by building understanding about chronic disease prevention across many sectors.
In summary,

• The health and economic pressures of a changing, aging population are not unmanageable. We know that a longer lifespan comes with an increased risk of chronic disease. And we can work to prevent and manage that risk.

• We know that health promotion interventions benefit people of all ages. Research shows that health promotion across the life course not only improves health behaviours and, as a result, health outcomes and quality of life, but also has very a real impact on reducing health care costs.

• Quite simply, healthy people make less use of health care services, and they live longer and better.

• We must recognize that public health is not just a health issue. Promotion and prevention involve all of us, in many different sectors and across levels of governments.