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Letter to Editor

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World Health Organization Recommends Cost-effective Interventions to Control the Rise in Incidence of Noncommunicable Diseases in Low-resource Settings

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DEAR EDITOR,

Worldwide, noncommunicable diseases (NCDs) have emerged as the leading public health threat which accounts for the deaths of 38 million people annually.^[1] Even though the problem of NCDs is universal in distribution, nevertheless, low and middle income nations have to bear the maximum toll (viz., 74% of total deaths and 82% of all premature deaths).^[1] However, a significant burden of these premature deaths can be minimized by motivating people to adopt healthy lifestyles, delivering universal health care, and strengthening of the primary health care.^[2,3]

The current costing estimates released by the World Health Organization (WHO) suggest that by mere investment of US\$ 1–3/person/year, policy makers can remarkably reduce both morbidity and mortality attributed to NCDs.^[1,3] It is very important to understand that multiple cost-effective interventions (namely tools for early detection, strategies for modification of NCD risk factors, and cheap drugs for prophylaxis/therapy) have shown their utility in heterogeneous settings.^[4,5] If these measures are implemented in a planned manner and extended even in the remote settings, not only the ever-rising burden of NCDs in low-resource settings will be halted but also a massive reduction in medical expenses and improvement in quality of life of people will be accomplished.^[3-5]

Now, the question arises, if cost-effective interventions are available, what is preventing its implementation, especially in low-resource settings?^[4,5] This is predominantly because of the weak health care delivery system, poor utilization of the available resources, no mechanism for continued financial support, limited access to both diagnostic and therapeutic services, low level of awareness among community, poor socioeconomic status, catastrophic expenditure on diseases, and defective referral mechanism.^[1,5,6] However, most of these hurdles/challenges can be addressed by the delivery of community-based, sustainable, and equitable health care services via the primary health care.^[5]

In fact, in an attempt to effectively respond to the NCDs in low-resource setting, the WHO has formulated a package of interventions which can be executed at grass root level.^[5] These interventions include prevention, diagnosis, management, and referral services for all major NCDs, essential tools/drugs for management of NCDs, self-care practices, and strategies for creating awareness about healthy lifestyle practices.^[5] The rationale behind these interventions is to ensure merging of the NCD strategies within the set-up of primary health care.^[5]

Most of these advocated interventions are cost-effective, and thus will not only enhance the appropriate utilization of resources but even empower the team of health professionals to play their role in an integrated manner.^[5,6] At the same time, it will assist in early diagnosis and management of NCD and its associated complications, so that the nations can proceed ahead in achieving the global NCD targets by the year 2020.^[5,6] However, none of the anticipated benefits can be achieved unless sustained political and financial support is warranted.^[1,3,6]

To conclude, in the global fight against the NCDs, it is high time that all the concerned stakeholders work in a coordinated manner to ensure integration of recommended cost-effective services at the level of primary health care.

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