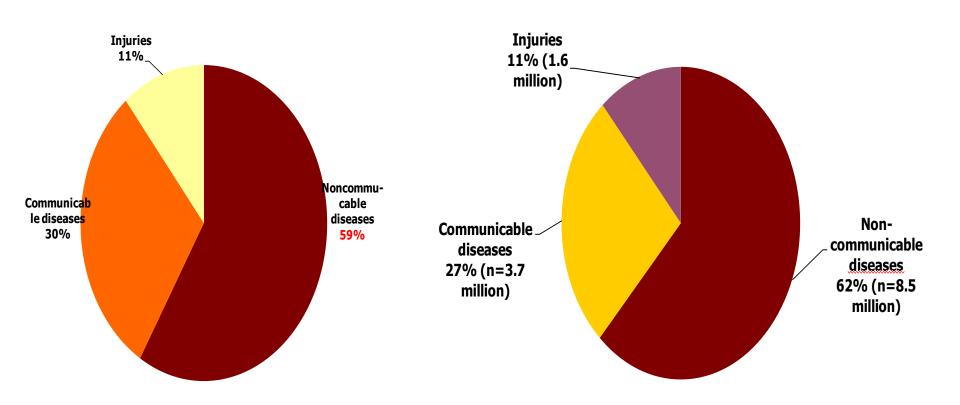
Role of SMOs in reducing Non-communicable Diseases Burden

Dr. Nang Naing Shein
Deputy Director (NCDs)
Department of Public Health,
Ministry of Health and Sports

Outline of presentation

- Disease burden/prevalence of risk factors
- Global and Regional agenda
- National Responses
- Roles of SMOs in reducing major NCDs

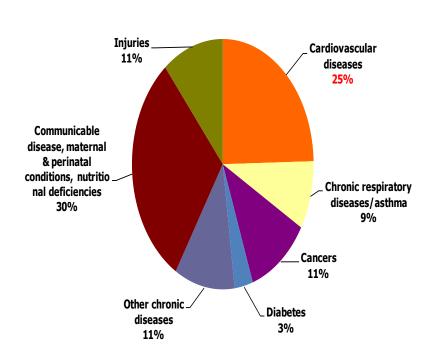
Estimated Percentage of deaths by cause, Myanmar vs SEARO, 2012

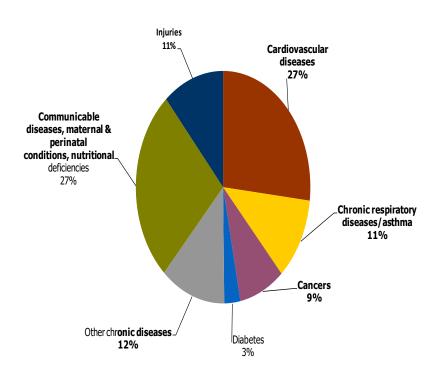


NCDs are the most frequent cause of death in the Region

Source: WHO Global Health Estimates, 2014

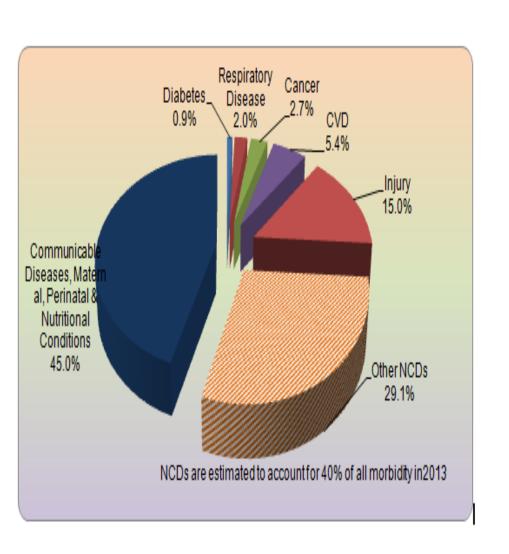
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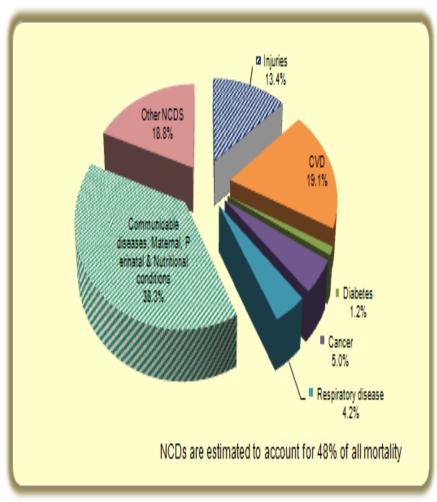




Four major NCDs account for most of NCD-related deaths

Proportion of Morbidity and Mortality (Non-Communicable Diseases -2013)





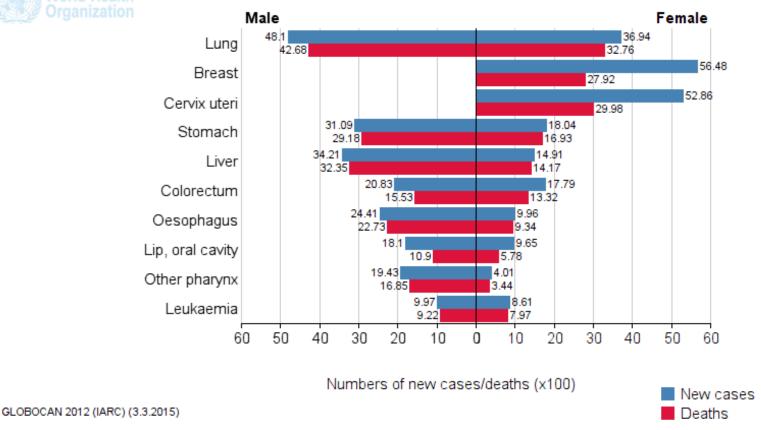
Source: Hospital Inpatient Statistics, HMIS

Incidence and mortality of top 10 cancers, by gender, Myanmar, 2012

International Agency for Research on Cancer

Myanmar





Breast cancer is most common in females, while lung cancer is most common in males

What is driving the NCD epidemic?

NCDs

NCDs

Raised blood pressure
Overweight/obesit
Raised **Raised lipids**

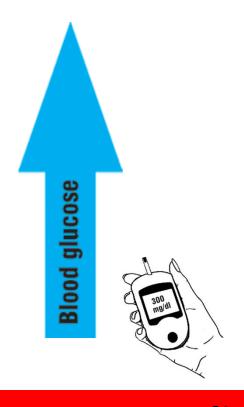
> **Tobacco use Unhealthy diet Physical inactivity** Harmful use of alcohol

Social **Determinants** of Health

Globalization Urbanization Population ageing

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Prevalence of Risk Factors for NCDs (WHO STEPS Survey 2014)



RAISED BLOOD GLUCOSE

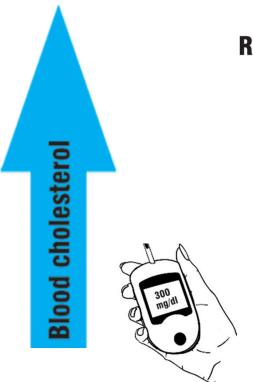
(FBS \geq 7 mmol/L or 126mg/dl 2HPP \geq 11.1 mmol/L or 200mg/dl)

Both Sex



Prediabetes 19.5%





RAISED BLOOD CHOLESTEROL

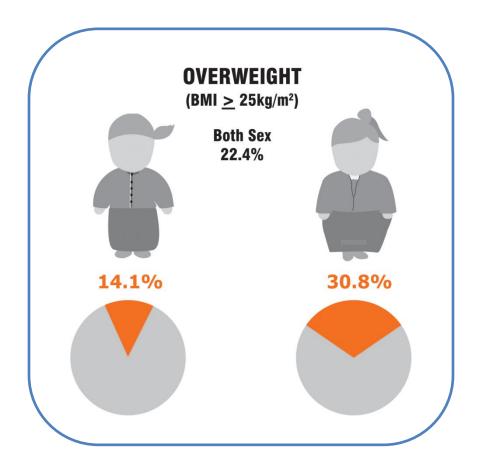
(More than 5.0 mmol/L or 190mg/dl)

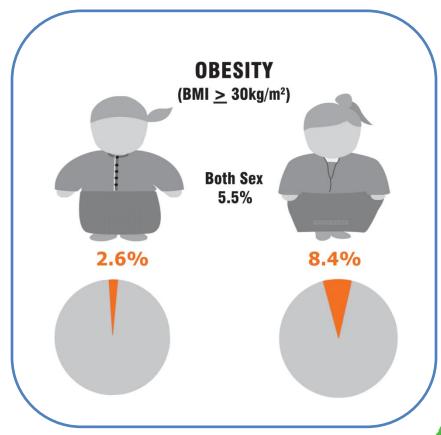
Both Sex

36.7%

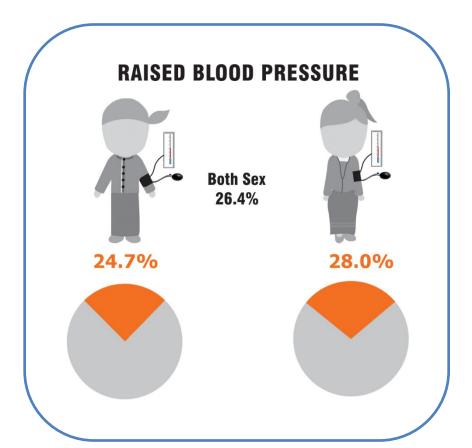


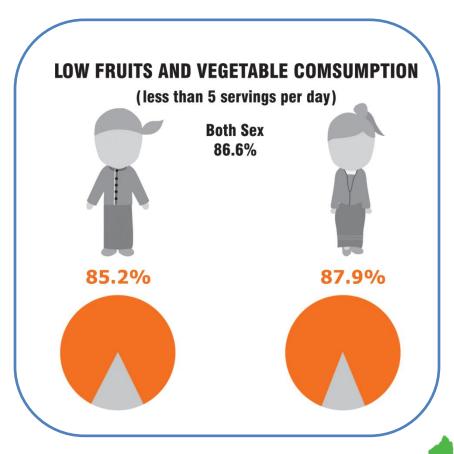




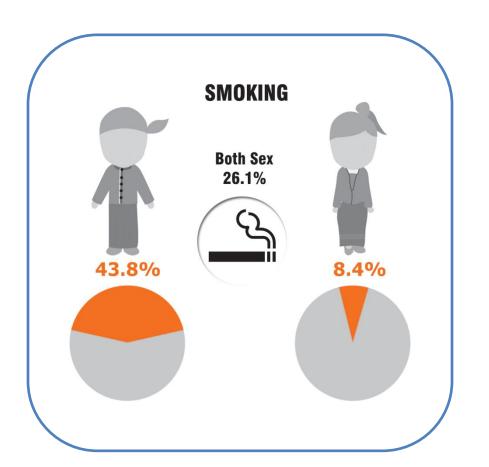


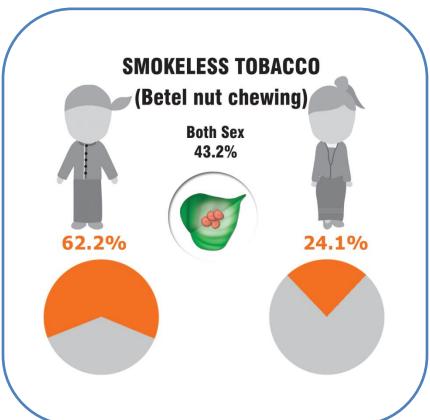




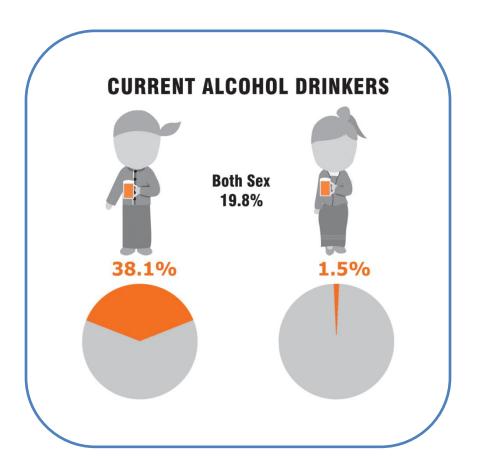


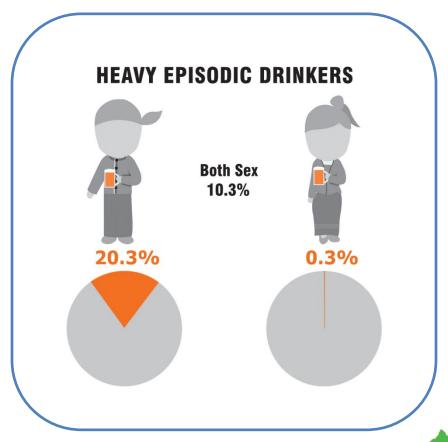






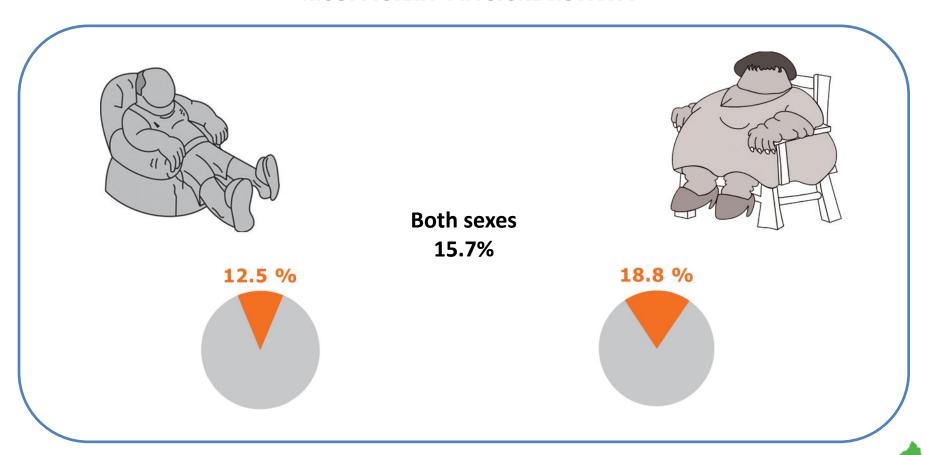








INSUFFICIENT PHYSICAL ACTIVITY

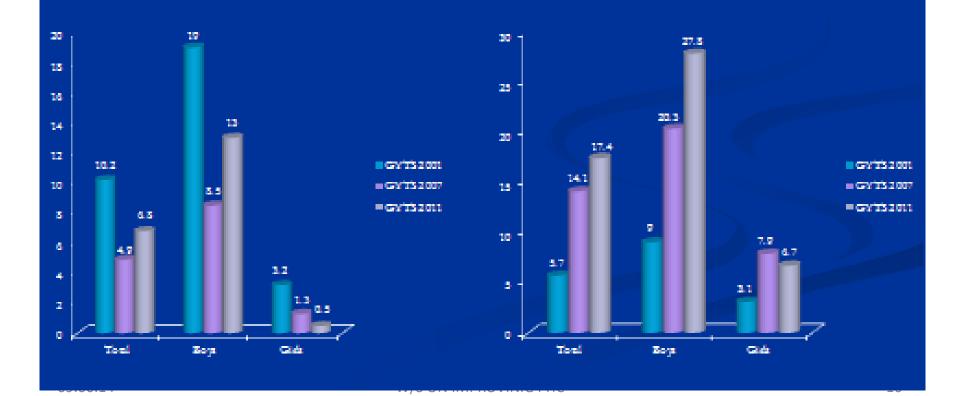




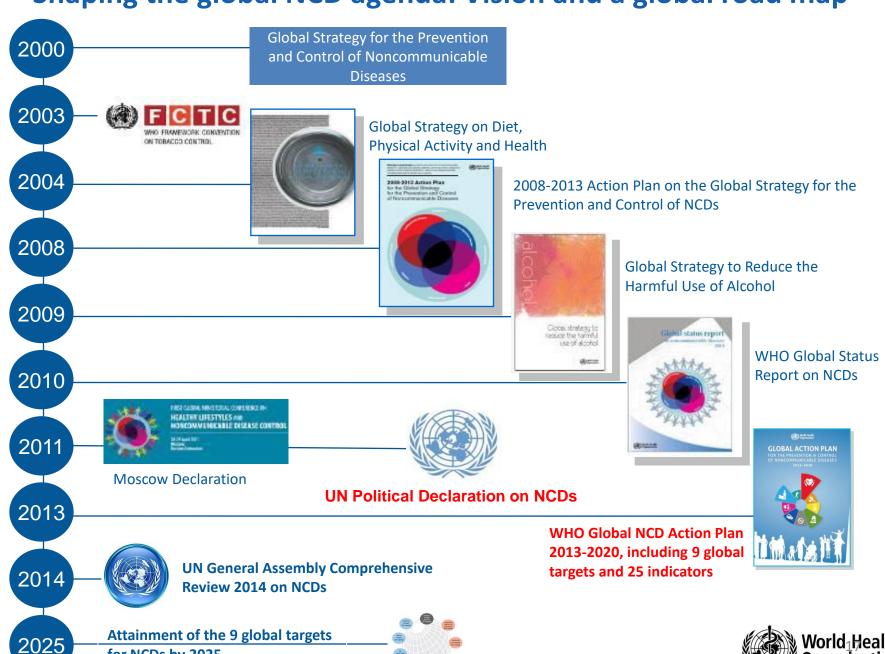
Prevalence of tobacco use among school youths

Current cigarette smokers

Current use of other tobacco products



Shaping the global NCD agenda: Vision and a global road map



for NCDs by 2025



Global Monitoring Framework

9 targets for 2025

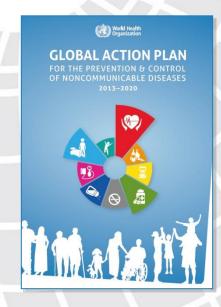


Premature mortality from NCDs 25% reduction

Essential NCD medicines and technologies 80% coverage







Drug therapy and counseling 50% coverage

Diabetes/ obesity 0% increase



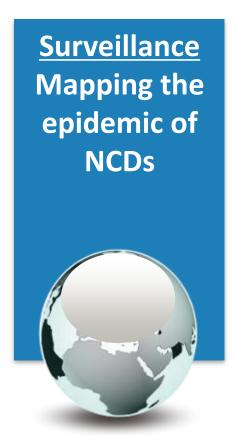
Raised blood pressure 25% reduction



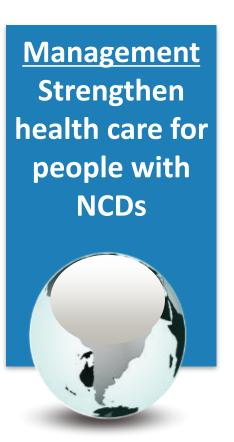


National Systems Response

Global Strategy for prevention and control of noncommunicable diseases—Three pillars







Strategic action areas for the prevention & control of NCDs in Global/Regional Action Plan (2013-2020)

Action area 1
Advocacy,
Partnership
and
Leadership

Action area 2
Health
Promotion and
Risk Reduction

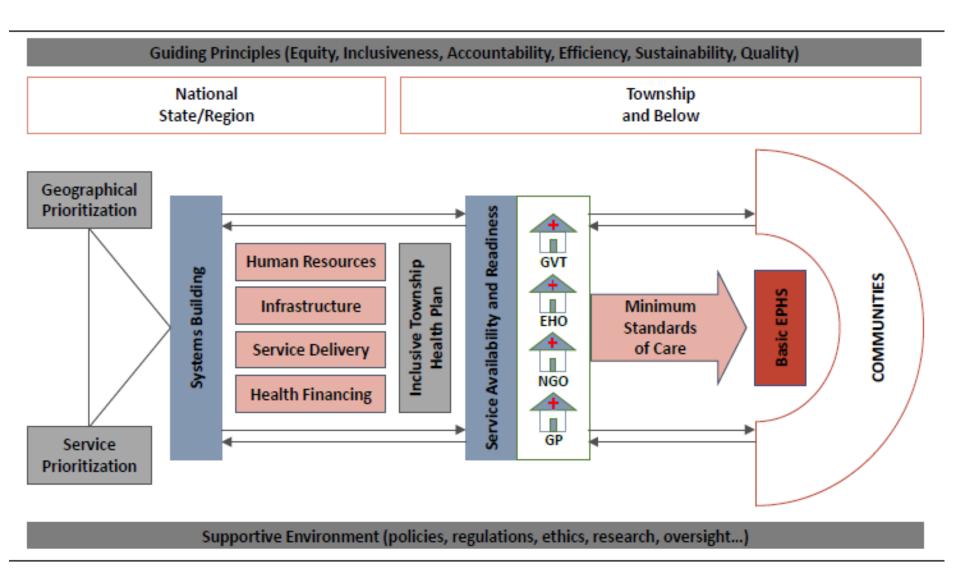
Action area 3
Health System
Strengthening for
Early detection
and
Management
of NCDs

Action area 4
Surveillance,
M&E and
Research

"Best buys" for NCD prevention and control

Prevention Reducing the	Risk factor / disease	"Best buy" Interventions		
Management Strengthen health care for people with NCDs	Tobacco use	 Raise taxes on tobacco Protect people from tobacco smoke Warn about the dangers of tobacco Enforce bans on tobacco advertising Raise taxes on alcohol Restrict access to retailed alcohol Enforce bans on alcohol advertising 		
	Harmful use of alcohol			
	Unhealthy diet and physical inactivity	 Reduce salt intake in food Replace trans fat with polyunsaturated fat Promote public awareness about diet and physical activit 		
	Cardiovascular disease and diabetes	Provide counselling and multi-drug therapy for people with medium-high risk of developing heart attacks and strokes Treat heart attacks with aspirin		
	Cancer	- Hepatitis B immunization to prevent liver cancer - Screening and treatment of pre-cancerous lesions to prevent cervical cancer		

Framework of NHP 2017-2021



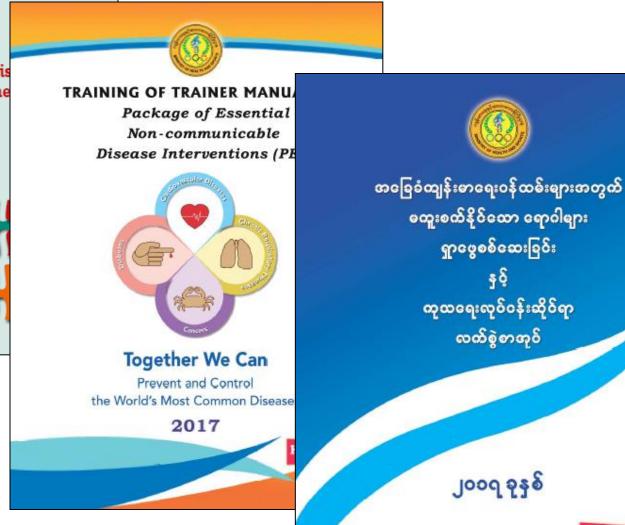


Tools for Primary care providers for reducing NCDs burden

Implementation tools

Package of Essential Noncommunicable (PEN) dis interventions for primary he in low-resource settings





What are the roles of SMOs in reducing burden of major NCDs and exposure to common risk factors?

Roles of SMOs

- Leader
- Role model
- Educator and trainer for BHS and CHWs
- Clinician Health literacy promotion
 - Screening and early detection of major NCDs
 - Treatment and referral
- Researcher

		Modifiable causative risk factors					
		Tobacco use	Unhealthy diets	Physical inactivity	Harmful use of alcohol		
Noncommunicable diseases	Heart disease and stroke	✓	√	√	✓		
	Diabetes			√	✓		
	Cancer		√	✓	✓		
	Chronic lung disease	√					

Reducing Tobacco-related harms





The Control of Smoking and Consumption of Tobacco Products Law



Six Policies to Reverse the Tobacco Epidemic (MPOWER)

- Monitor tobacco use and prevention policies
- Protect people from tobacco smoke
- Offer help to quit tobacco
- Warn about the dangers of tobacco
- Enforce bans on tobacco advertising, promotion and sponsorship
- Raise taxes on tobacco

As a Role model.....

- Health professionals are the role models in the clinical and community settings.
- Should refrain from tobacco or quit tobacco as examples.
- Should set hospitals, health facilities and workplaces tobacco free.

As a Clinician

- Address tobacco dependence as part of your standard care practice.
- Questions about tobacco use should be included when monitoring vital signs.
- Ask and note about tobacco use at every counter with a patient.

3 minutes intervention for tobacco cessation: 4 As

- ASK about tobacco use
- ADVICE to quit tobacco
- ASSIST them to quit
- ARRANGE them for quitting

4 Rs

- Relevance— describe the relevance of quitting tobacco and health
- Risk- describe the risk of tobacco use
- Reward-describe the rewards of quitting tobacco
- Repetition- repeat again and again till suceeded.

Tobacco-Free Hospitals and Health Facilities

- Hospitals and health facilities must have written policies to be Tobacco-Free (smoking as well as smokeless).
- Need to put up sign-board/ notices clearly stating that smoking as well as chewing tobacco is strongly prohibited in this compound.

Monitor and supervise to ensure health facilities are tobacco-

free.







