

Non-Communicable Diseases: The Way Forward for Nepalese Perspective

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Non-Communicable Diseases (NCDs) are the leading causes of death globally with cardiovascular diseases (CVDs) accounting for the highest number of deaths followed by cancer, respiratory diseases and diabetes.¹ The impact of NCDs in health has been varied with reduction of the disability-adjusted life years due to various comorbidities.² Additionally, it affects the families, health system and national economies of the country.³ NCD has boomed in all parts of the world and has been prominently seen more in the lower income setup. Meticulous planning at the policy level and effective implementation at the grassroot level is needed for its effective prevention. Coherence between different stakeholders working in the field of NCDs and policy making bodies of different government bodies is of utmost need to see the visible changes. There is a need of transformative health system focused on primordial and primary prevention. The current era is the world of information and technology and there is a pressing need to rethink innovatively to resolve the rising burden of NCDs. Learning from global health teaching, using our own existing medical and public health knowledge, addressing the social determinants of health and reaching the undeserved community should be our top-notch goals. Thinking globally and acting locally should be prioritized. Restructuring South-South Collaboration should be thought off. The debate now should focus on what should be the bull eye for NCD prevention? As the discovery of Oral Rehydration Solution (ORS) changed the management of diarrhoeal disease it is time to rethink and brainstorm regarding Oral Rehydration Solution for NCDs prevention. Since NCDs is a chronic disease and it cannot be changed within an hour-long term strategy should be thought off.

Firstly, as mentioned above there is a need of transformative health system focused on prevention. Government should at least have a 10 years roadmap for transformative health system. Three tiers of health system should be responsible and accountable. Generating evidence through research and policy making should go hand by hand. Recognizing the effort of scientific community is very much pertinent. Secondly, innovative way of task shifting and task sharing should be prioritized. Whenever, any disease erupts and burst and it has to be prevented at grass root level we always think of Female Community Health Volunteers (FCHV). So, how practical it is always to think of FCHV as they are already overburdened with the competing

priorities of Maternal, Child Health and Newborn Care. Different Non-Health sector NCD champions should be created. Recently, we try to create the Non-Health Sector NCD Champions by training the gym-trainers of different gym clubs of Kathmandu Metropolitan City. This is because there are limited people who work on their physique as a means of staying disease-free and healthy. As per the literature, physical activity is one of the strongest means of reducing the burden of NCDs⁴. Similarly, such champions should be created at schools, workplaces, communities and other settings. Thirdly, we should be equally responsible for our own health. Nobody is going to come and save us if our dietary and behavioral habit is poor. So, we should be very much meticulous in choosing the food we eat and plan for our regular physical activity session in whatever way possible.

To summarize, NCDs are the slow poisons which takes our life in a longer run. So, timely screening, early diagnosis and management and changing our lifestyle to prevention is very much critical⁵ for reducing the rising burden of NCDs globally, regionally and in Nepal.

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