



Cardiovascular Health and Cancer Prevention



To improve the health and security of all U.S. citizens—and to ensure sustainable thriving of the world population—the United States must maintain its leadership in global health through forward-looking policies, a long-term vision, and continued investment. Where should U.S. investments and attention be focused? The report *Global Health and the Future Role of the United States* highlights four priority global health challenges and identifies four opportunities to do business differently.

Why are Cardiovascular Health and Cancer Prevention a Priority?

Though often portrayed as high-income health challenges, noncommunicable diseases (NCDs) disproportionately affect the poor in low- and middle-income countries (LMICs). Cardiovascular diseases (CVDs) and cancers, the two leading causes of death worldwide, resulted in 18 million deaths and 8.8 million deaths in 2015, respectively. Eighty percent of CVD deaths and close to two-thirds of cancer deaths occurred in LMICs. These diseases also impose significant economic burdens: CVDs and cancers are projected to cost the world \$1 trillion and \$8.3 trillion, respectively, by 2030.

What are some promising approaches?

- Scaling up coverage of just four WHO “best buy” interventions projected a reduction in NCD mortality by 25 percent, and an average benefit–cost ratio of 8:1, with annual benefits of more than **\$63 billion**.
- Integration provides untapped potential. Cervical cancer, for example, is **4 to 5 times** more common in women who are HIV positive, and HIV/AIDS has also been linked to an increased risk of CVD.
- Private companies can fold programs into their business model. Novartis launched an initiative in rural India in 2007 offering affordable medicines. It became profitable 31 months after initiation, and its sales have increased **25-fold** since launching.

What's the Big Picture?

Partially due to successes in reducing the burden of infectious diseases, many low- and middle-income countries (LMICs) are experiencing a rise in the burden of noncommunicable diseases (NCDs), especially cardiovascular disease and cancer. These diseases pose an enormous epidemiological and economic burden on the global community, particularly LMICs. Though evidence-based strategies exist, they are difficult to implement in LMICs due to ill-fitting health infrastructure and policy safeguards. All countries are hindered from effecting change as NCDs lack a strong branding identity and are not prioritized on political agendas. Given the wide-scale implications of the global NCD burden, they should be seen as a strategic interest to the United States, driven by universal purpose and potential benefits through improving economies.



CASE STUDY FROM THE REPORT HIV/AIDS-HYPERTENSION INTEGRATED CARE IN CAMBODIA

Cambodia struggles with a rising burden of chronic diseases, with 12 to 15 percent of the population being hypertensive. To address this, the Cambodian Ministry of Health and Médecins Sans Frontières established clinics to integrate chronic care (for hypertension and diabetes) with HIV/AIDS care in Takeo and Siem Reap. This not only resulted in an increased inflow of patients—indicating a desire for integrated services—but it also improved patients' health. Through the combined services, hypertensive patients were able to reach healthy blood pressure targets of 160/90 mm Hg, signifying the feasibility of providing integrated services and the adaptability of medical staff to assume a multidisciplinary role.

Key U.S.
Agencies and
Programs

U.S. Agency for International Development (USAID)

U.S. Centers for Disease Control and Prevention (CDC)

U.S. Department of State (State)

RECOMMENDED ACTIONS

Promote Cardiovascular Health and Cancer Prevention

Why?

U.S. global health programs have established strong networks and knowledge bases in countries following decades of effort through infectious disease and maternal and child health platforms—opportunities exist for leveraging these assets to address NCDs.

In light of the effects that NCDs have on productivity, they are becoming a priority to the private sector: 20 different corporations have formed an alliance—Access Accelerated—to improve NCD prevention, care, and treatment. Many companies are already investing their own resources into addressing NCDs in LMICs.

How?

USAID, State, and CDC should provide seed funding through their country offices to facilitate the mobilization and involvement of the private sector in addressing CVD and cancer at the national level. These efforts should be closely aligned and integrated with existing national and community-level services.

Priority strategies should include:

- **Target and manage risk factors**
- **Detect and treat hypertension early**
- **Detect and treat early cervical cancer; and**
- **Immunize for vaccine-preventable cancers (specifically HPV and hepatitis B)**

OTHER BRIEFS IN THIS SERIES

The report highlights four priority global health challenges and four key opportunities to do business differently.

PRIORITIZING GLOBAL HEALTH CHALLENGES



Women's and
Children's Health



HIV/AIDS,
Tuberculosis, and
Malaria



Global Health
Security

DOING BUSINESS DIFFERENTLY



Medical Product
Development



Digital Health
Infrastructure



Financing



Global Health
Leadership

SPOTLIGHT ON: Cardiovascular Health and Cancer Prevention and Financing

Many private companies are already investing their own resources in combating non-communicable diseases. Leveraging this interest by matching financial resources and developing public-private partnerships focused on high-impact interventions can help countries achieve health goals.

To read the full report and other related resources, including all of the briefs in this series, please visit nationalacademies.org/USGlobalHealth.