

## NCDappendix3

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**From:** Morven Roberts <m.roberts@gacd.org>  
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**To:** NCDappendix3  
**Subject:** [EXT] Comments on Updates to Appendix 3

WHO Secretariat

The GACD Secretariat strongly welcomes the proposed update to Appendix 3 of the WHO Global Action Plan for the prevention and Control of NCDs 2013-2020 now extended to 2030.

The importance of remaining up to date with latest evidence is essential and we welcome key changes as set out in section 11. This is a very strong first draft and GACD consider there is much greater clarity in the proposed updated version of the appendix which articulates both the stated high level objectives and a detailed list of interventions several of which have undergone a cost effectiveness analysis.

GACD agree that an economic analysis although important for decision makers is only one of the parameters that should be taken into account. We welcome the recognition that non-economic considerations as explored in implementation research such as acceptability, sustainability, scalability, equity, ethics are also vital to the successful implementation and impact of any intervention. We are also pleased to note therefore the continued highlight of Objective 5 in recognition of the importance of supporting national research agendas.

It is noted that the updated Appendix 3 will **complement** other technical products being developed including a menu of cost-effectiveness intervention for mental health and a list of recommended interventions to address the health impact of air pollution. It is somewhat unfortunate that these remain distinct documents as there may be much common ground – eg for example in stated objectives 1, 2 and 4 with regard to NCDs and Mental Health. Perhaps at minimum cross referral may be helpful.

In reading the update it was interesting to note that **detection** of hypertension and diabetes including gestational diabetes no longer appears specifically amongst the intervention list but it was not fully clear where it may now be embedded this may be explained in the individual disease annexes.

Thank you for the opportunity to comment on this draft

Morven

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