



**COVID-19 AND NCDs** 





### PRELIMINARY RESULTS

Assessment of noncommunicable diseases (NCDs) service disruption during the COVID-19 pandemic WHO NCD DEPARTMENT







### **Business as unusual:** How the COVID pandemic and the NCD epidemic have brought about a deadly interplay



Underinvestment in the prevention, early diagnosis, screening, treatment and rehabilitation for NCDs: Health systems unable to meet the health-care needs of people living with and affected by NCDs

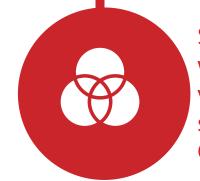
Disruption of services for the prevention and treatment of NCDs:
Long-term upsurge in deaths from NCDs likely

The world is at a critical juncture. The execution of a forward-looking strategy inclusive of NCDs is required to build back better and reach SDG 3.4 on NCDs.

SDG 3.4

2010

The momentum of progress in curbing the NCD epidemic has **stagnated** since 2010



2019 2020

Since the outbreak, people with NCDs are more vulnerable to becoming severely ill or dying from COVID-19

today



2030



The momentum of progress in curbing the **NCD epidemic has** stagnated since 2010. The **COVID-19 pandemic has become an** amplifier for health systems to better respond to NCDs.

WORLD HEALTH STATISTICS

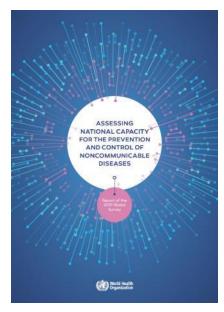
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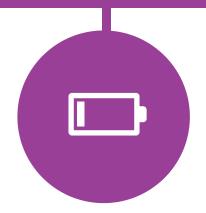
MONITORING HEALTH FOR THE SDGs



- Despite the considerable progress made in 2000-2010 in the prevention and treatment of NCDs, the momentum of change has stagnated since 2010. The annual decline of the risk of dying from a major NCD between the ages of 30 and 70 is slowing.
- SDG target 3.4 on NCDs is **off track**. Currently only 14 countries on track to reach the NCD mortality target by 2030
- Pre-COVID: Substantial reductions in NCD mortality require a strengthened health system to deliver NCD services that improve diagnosis, treatment, rehabilitation and palliation, including hypertension control, and policies that drastically reduce risk factors for NCDs.







There has been a chronic **underinvestment** in the prevention, early diagnosis, screening, treatment and rehabilitation for NCDs.

In 2021, health systems were **unable to fully respond** in the majority of countries to the healthcare needs of people living with or affected by NCDs.



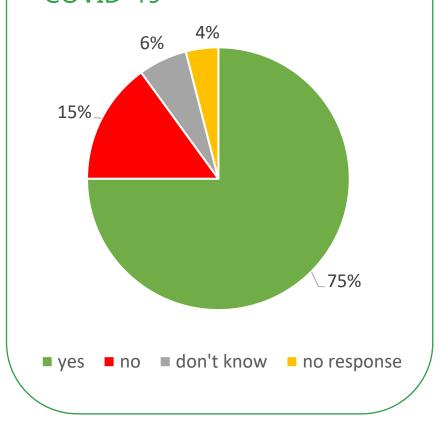
- Only 34% of countries provide drug therapy and counseling services to prevent and treat heart attacks and strokes
- o Only 40% of countries have **palliative care** generally available
- Only 48% of countries have guidelines for the four major NCDs
- Only 62% of countries have early detection programmes for cervical cancer
- Only 62% of countries have radiotherapy services for cancer treatment

# Since the COVID-19 outbreak, people living with NCDs are vulnerable to becoming severely ill or dying from COVID-19



- Belgium: COVID-19 patients with solid cancer had 34% higher risk of 30-day in-hospital mortality than those without cancer.
- India: 30% fewer acute cardiac emergencies reached health facilities in rural areas in March 2020 compared to the previous year.
- Iran: The risk of dying among hospitalized COVID-19 patients with **diabetes** was roughly four times higher than those without diabetes.
- Italy: Among those dying of COVID-19 in hospitals, 68% had **hypertension** and 31% had type 2 **diabetes.**
- Mexico: COVID-19 patients with **chronic kidney disease** were 2.31 times more likely to die compared to patients without. Those with **diabetes, hypertension and COPD** had 69%, 24% and 20% higher risk of death.
- Netherlands: The number of people newly diagnosed with **cancer** dropped by 25% as a result of the lockdown.
- Scotland:COVID-19 caused 78.4% of the 1228 excess deaths among people with diabetes during the first wave of the pandemic (1 March 31 July 2020), compared to average deaths in the same period in 2015-2019.
- Spain: Among patients with severe COVID-19 disease, 43% had existing cardiovascular
   diseases.

75% of Ministries of Health have started to collect data on NCD-related co-morbidities for COVID-19





### **Disruption of services** for the prevention and treatment of NCDs



**What:** WHO conducted the bi-annual NCD Country Capacity Assessment, including a module on **assessment of service delivery for NCDs during the COVID-19 pandemic** among 194 Ministries of Health. The response rate was 100%.

When: Between 1 June 2021 and 5 October 2021.

**Why:** To get a snapshot of the most recent situation (within past three months), following deepening concerns that many people living with NCDs are no longer receiving appropriate treatment or access to medicines during the COVID-19 pandemic.

The findings are presented in the next slides.





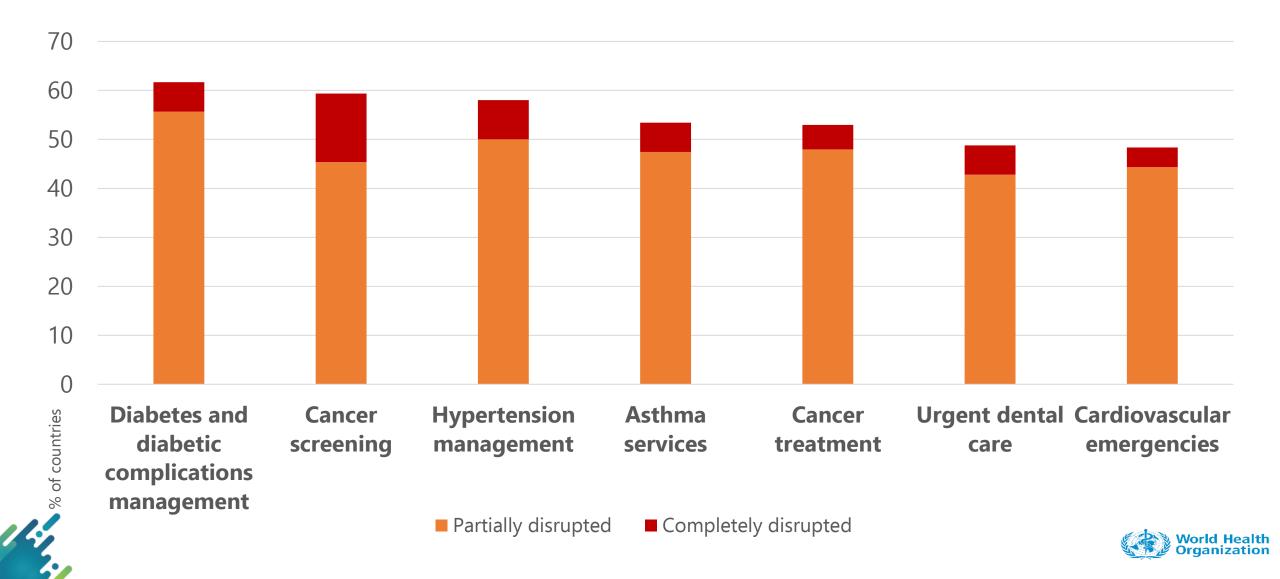


### **COVID-19 AND NCDs**



# 136 countries reported that NCD services were disrupted

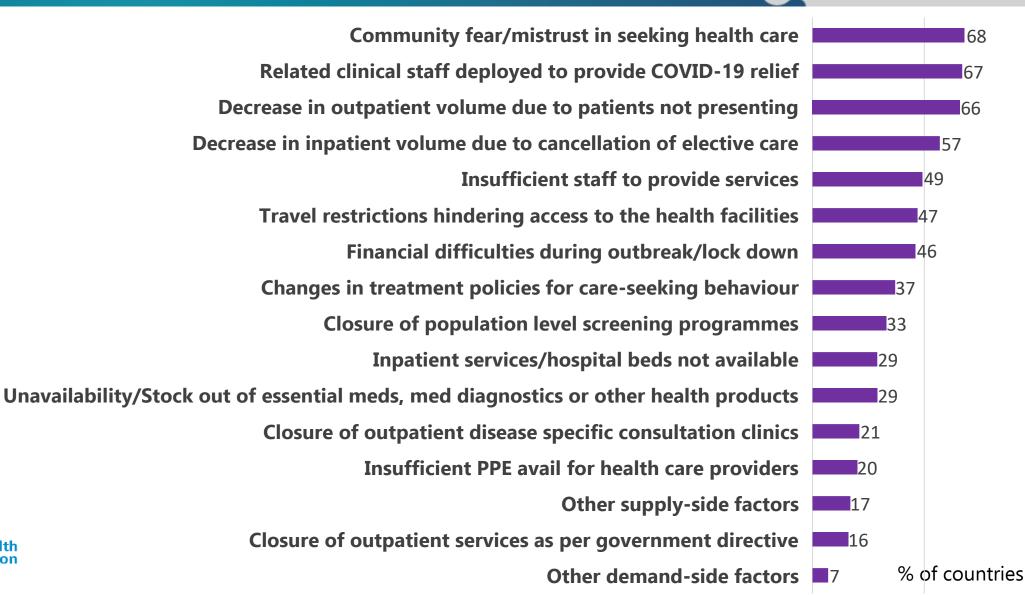




### Main causes of NCD service disruption: 70% of countries reporting disruptions



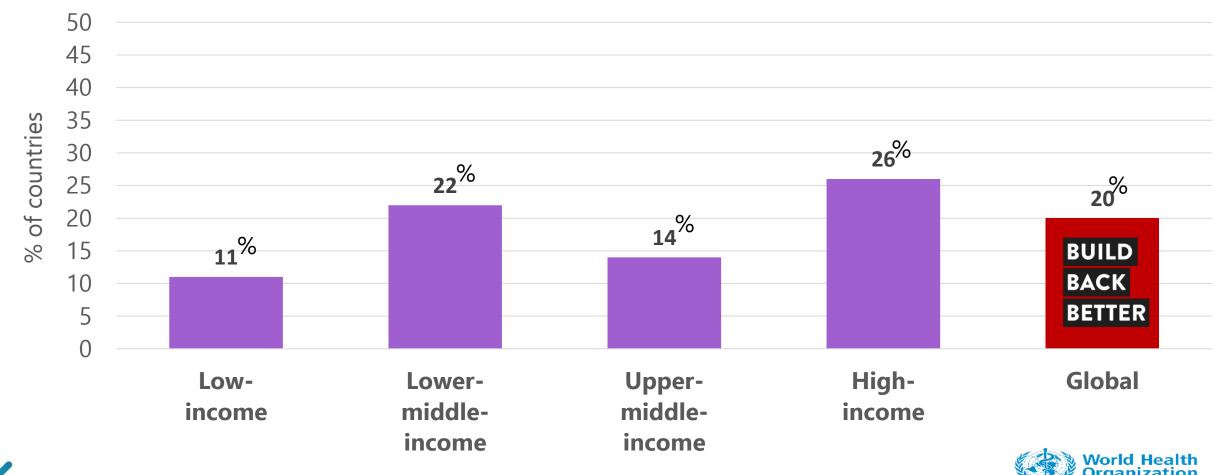






## 20% of countries allocated additional funding from government budgets for NCDs for the COVID-19 response

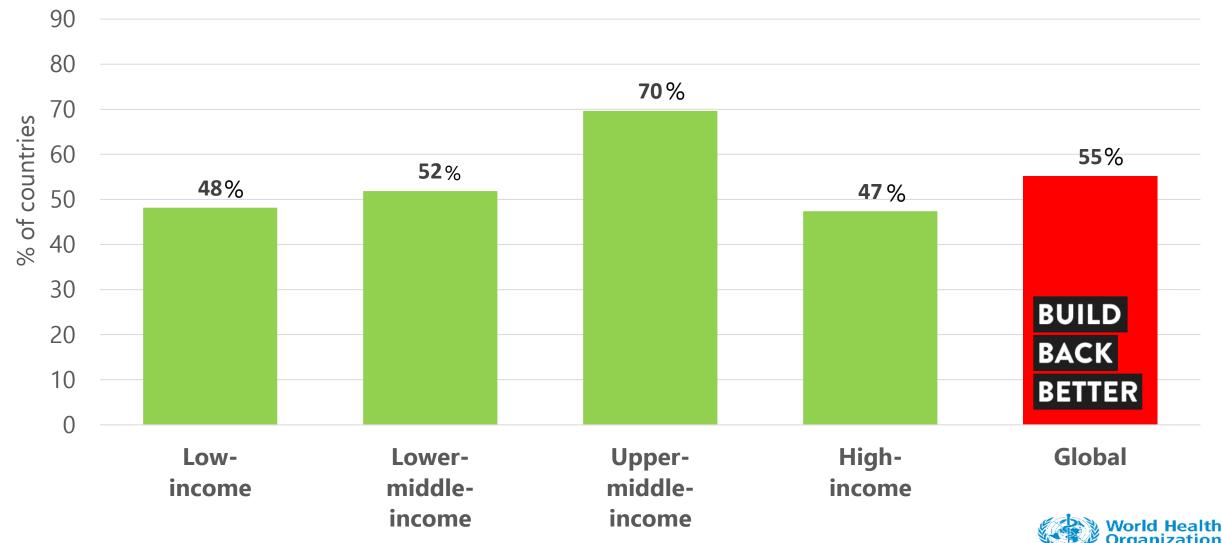






### 55% of countries have included the continuity of NCD services in national COVID-19 plans

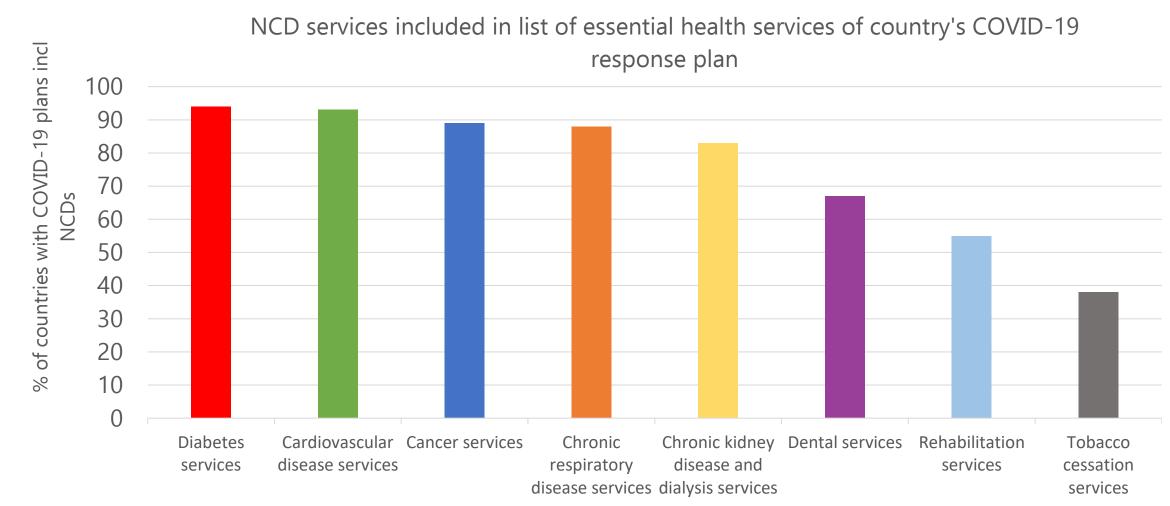






# Most counties which have included NCD services in national COVID-19 plan, have prioritized services for the four major NCDs



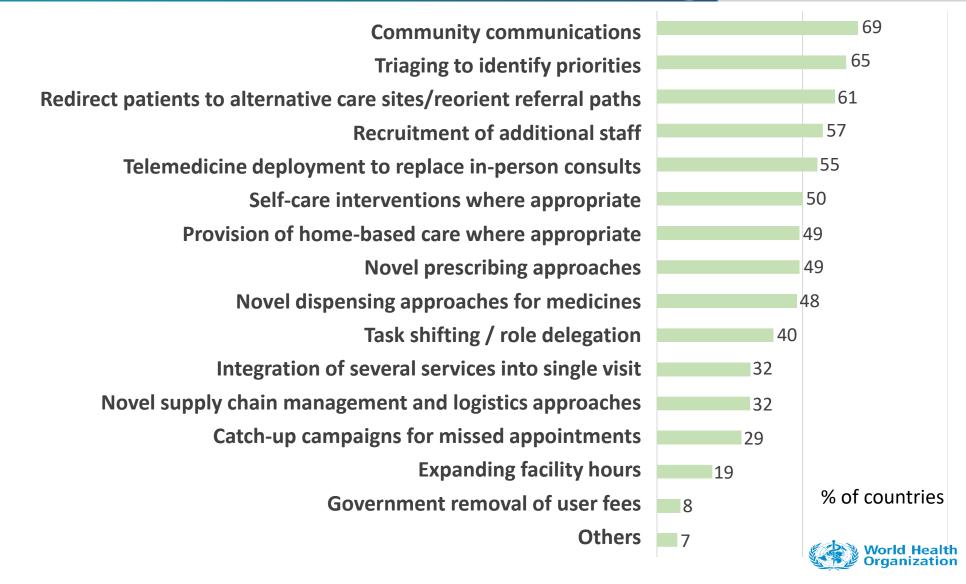




# Community communications and triaging are the mitigation strategies most often used to overcome disruptions









#### **Ask 1:** Guidance on how to provide continuity for NCD programmes:

- How to include NCDs in public health emergencies protocols?
- How to develop national NCDs tool kits for use in emergencies?
- How to provide ambulatory essential NCD services during lockdown?
- How to provide medical care for NCDs through telemedicine and digital solutions?
- Technical, including digital, tools to promote self-care for those with NCDs who can't access services.
- How to prioritize which services to restart and when?
- Updated guidance on management of NCDs reflecting the stage of the pandemic.









#### **Ask 2:** Guidance on managing COVID and NCDs comorbidity:

- Guidelines on COVID vaccination protocols for those with NCD comorbidities
- How to provide appropriate treatment for COVID patients with NCD comorbidities?
- How to protect people living with NCDs? (e.g. clinical guidelines, drug interactions)?
- Algorithms for managing patients with chronic NCDs in a pandemic and limited access to medical care
- Guidance on how to prioritize NCDs after the COVID pandemic has been managed.







#### **Ask 3: Better data**

- How to collect and report comparable data on comorbidities?
- How to develop projection models to make the impact of the COVID-19 pandemic on NCDs visible?
- How to assess rehabilitation and palliative care services during COVID-19 response?
- Development of digital tools to record patient management and enable remote service provision
- Development of tools to calculate YLL and YLD related to NCDs during COVID pandemic.







#### **Ask 4: Country support**

- Provide training (especially online training) for policy makers on how to include NCDs into national COVID-19 plans
- Provide training for WHO Country Offices and UN Country Teams on how to include NCDs into national COVID-19 plans
- Provide technical assistance to adapt HEARTS and WHO-PEN packages to the COVID-19 context
- Provide clinical definitions and indicators for COVID and NCD comorbidity













### The world is at a critical juncture.

The execution of a forward-looking strategy inclusive of NCDs is required to **build back better.** 



#### **Today:**

- Strengthen national governance to include NCDs in national COVID-19 plans.
- Issue specific and practical guidance on the continuity of essential health and community services for NCDs
- Monitor the access to and continuity of essential health services for NCDs
- Provide guidance for the development and use for digital health solutions for NCD self-care and the provision of medical care at home

#### **Build back better tomorrow:**

- Build **bridges** between national humanitarian emergency plans and NCDs responses
- Include the prevention, early diagnosis, screening and appropriate treatment of NCDs in essential PHC services and UHC benefit packages
- Address the historic underinvestment in NCDs, **call for new international funding patterns**, a reset of global initiatives, and build new partnerships for NCDs.
- Implement **WHO guidance on resuming health services** and activities for health and wellbeing
- Develop systematic approaches to digital health care solutions for NCDs





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