

# **NCDs and COVID-19**

## CICAD Virtual Round on Alcohol and COVID-19

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**PAHO**

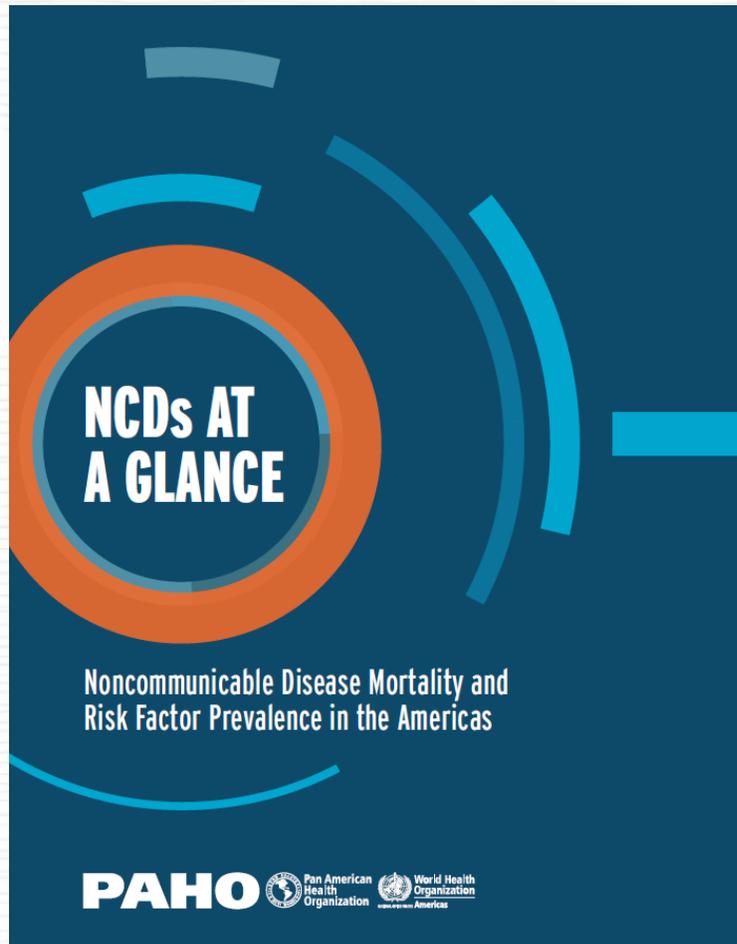
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# OUTLINE

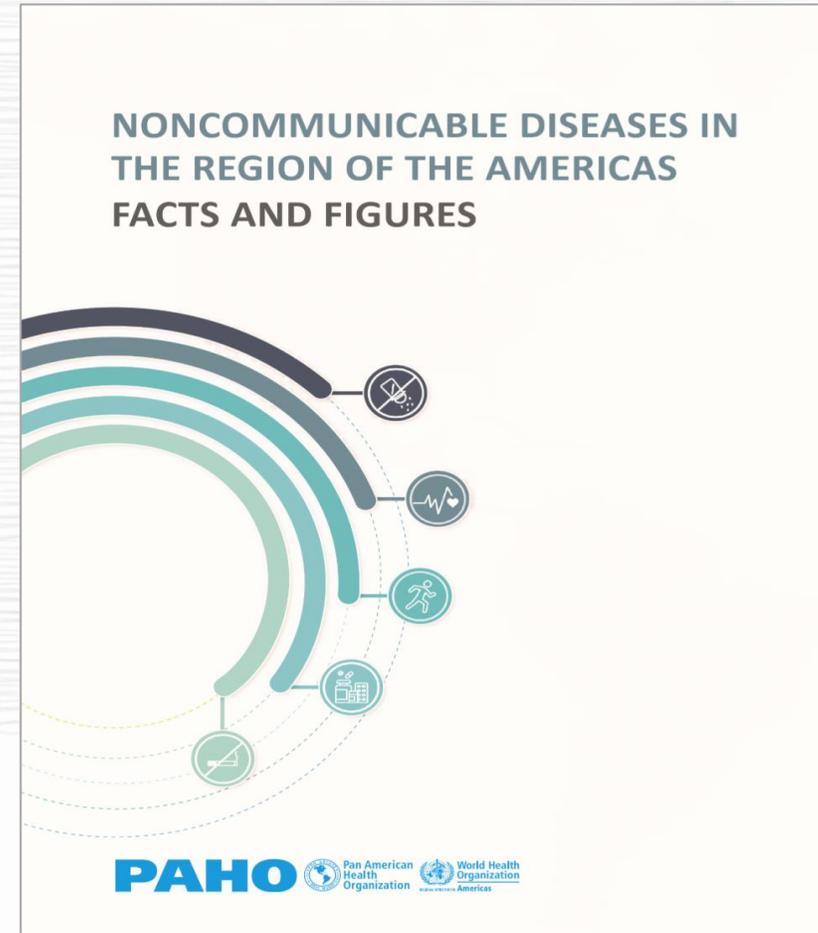


- 1. The burden of NCDs in the Caribbean**
- 2. NCD management goals and solutions**
- 3. COVID-19 Challenges**
- 4. PAHO's Response to NCDs and COVID-19**

# THE BURDEN OF NCDs

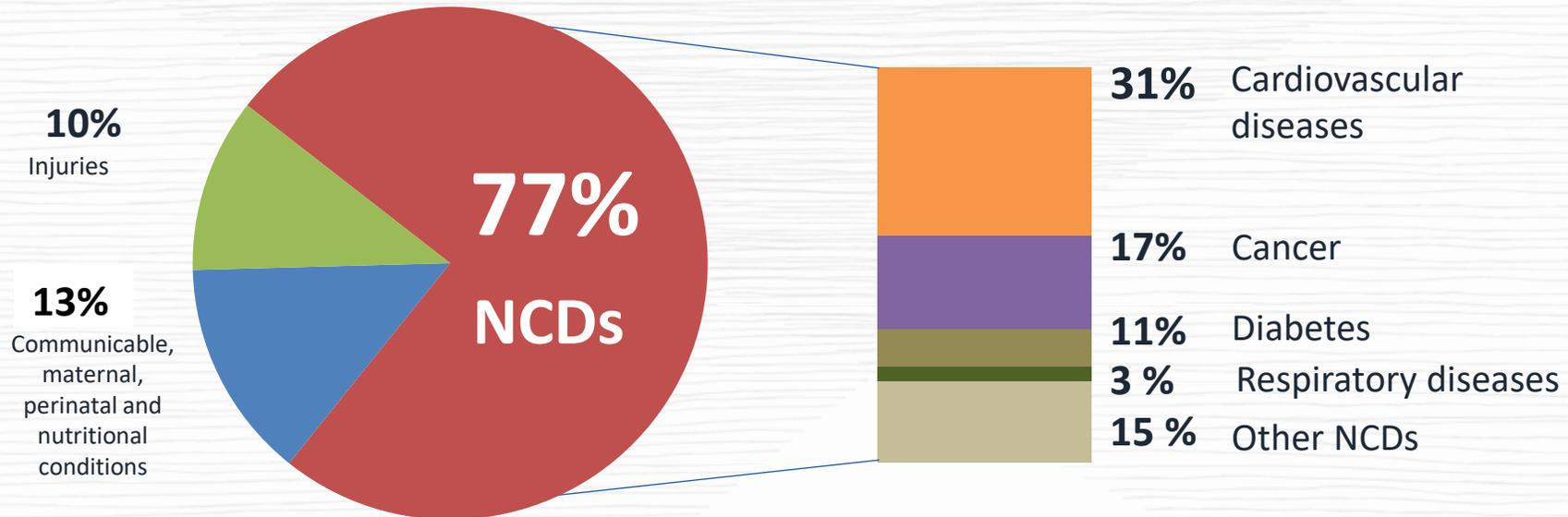


<https://iris.paho.org/handle/10665.2/51696>



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# NCDs in the Non-Latin Caribbean



# COUNTRY RANKING OF NCD MORTALITY RATES

- **9 of the 10** countries with the **highest** NCD mortality rates in the Americas are from the **Caribbean**
- NCD mortality rates **>500/100,000**

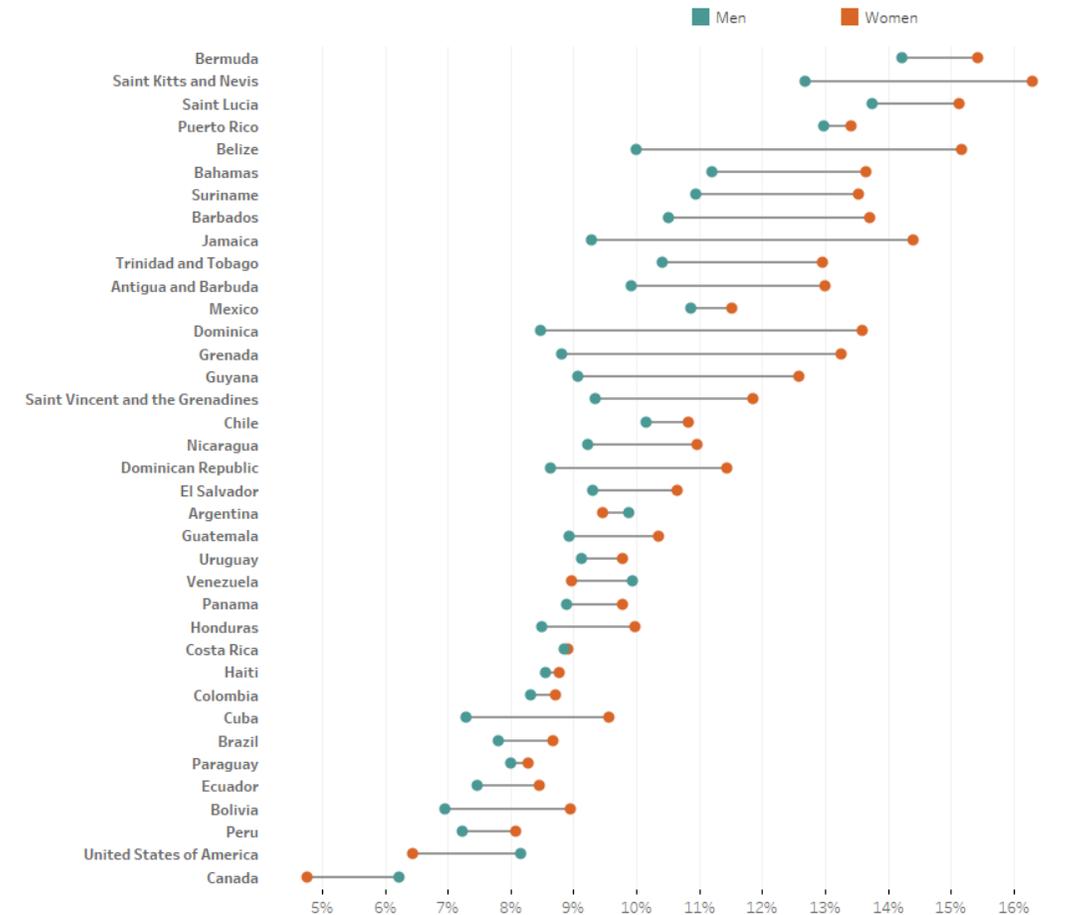


Age-standardized  
NCD death rates  
per 100,000  
population, 2016

Source: PAHO. NCDs at a Glance, 2019. Available from:  
<https://iris.paho.org/handle/10665.2/51696>

# PREVALENCE OF RAISED FASTING BLOOD GLUCOSE

- 8.5% prevalence of **diabetes** in the Americas
- Highest in **Caribbean countries (11.8%)**
- **9 of the 10** countries with the **highest** prevalence in the Americas are from the **Caribbean**
- **Women** are more affected than men

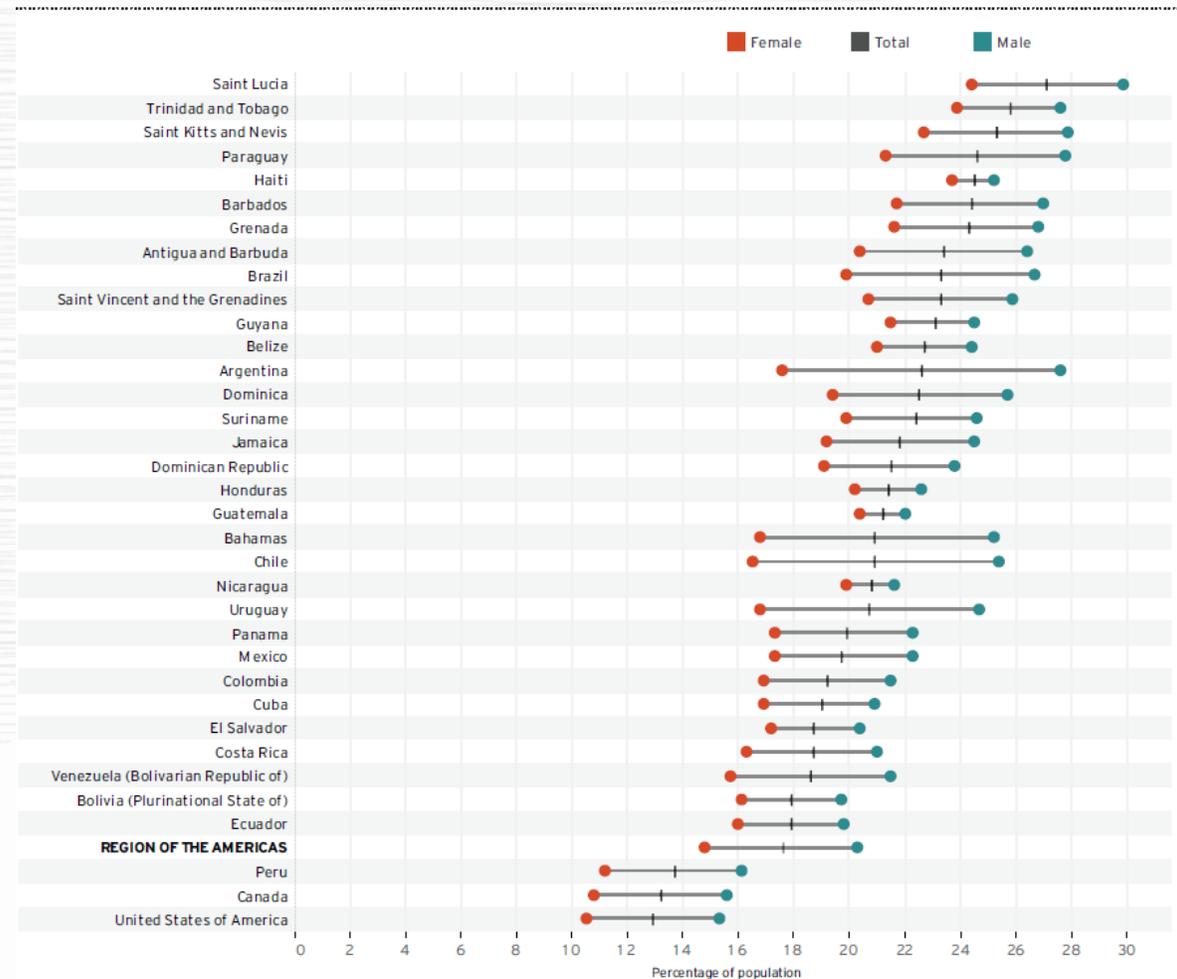


Age-standardized prevalence of raised blood glucose

**Source:** PAHO. NCDs at a Glance, 2019. Available from: <https://iris.paho.org/handle/10665.2/51696>

# PREVALENCE OF RAISED BLOOD PRESSURE

- 17.6% prevalence of **hypertension** in the Americas
- **7 of the 10** countries with the **highest** prevalence in the Americas are from the **Caribbean**



Prevalence (%) of raised blood pressure, 2015

Source: PAHO. NCDs at a Glance, 2019. Available from:  
<https://iris.paho.org/handle/10665.2/51696>

# HEALTH SYSTEMS NEEDED TO CHANGE



- **Weak** and **underfunded** health systems
- **Fragmentation** of care and poor referral mechanisms
- **Gaps** in **capacity** of care
- **Gaps** in **quality** of care
- **Patients unaware** of their disease, not adequately treated and inadequately informed about managing their illness
- **Poor** disease **control** and **outcomes**, though data lacking
- **Avoidable hospitalization** and **increasing costs** of care

PAHO/WHO

# COVID-19 PANDEMIC IN THE AMERICAS AND LINKS TO NCDs (as of 11 June)

**N CASES** 3 485 245

**N deaths** 189 544

**Stay at home** measures are leading to the increase in the risks of NCDs

- Poor diets
- Less physical activity
- Smoking
- Drinking alcohol

**Disruptions in provision of health care services**, closures

**Fear of attending care facilities have resulted in:**

- Reduced elective clinic visits and lower access to renal dialysis,
- Reduced cancer care
- Delays in high priority treatments for patients with NCDs.

*Patients at higher risk of complications and death from diseases which we know how to treat.*

# NCDs and COVID-19



It is also important to safeguard your mental health, especially during times of physical distancing

Older people, and people with pre-existing conditions (such as heart diseases, diabetes, respiratory conditions) appear to be more susceptible to becoming severely ill with the virus.

**Information note**

COVID-19 and NCDs

 World Health Organization

COVID-19  
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

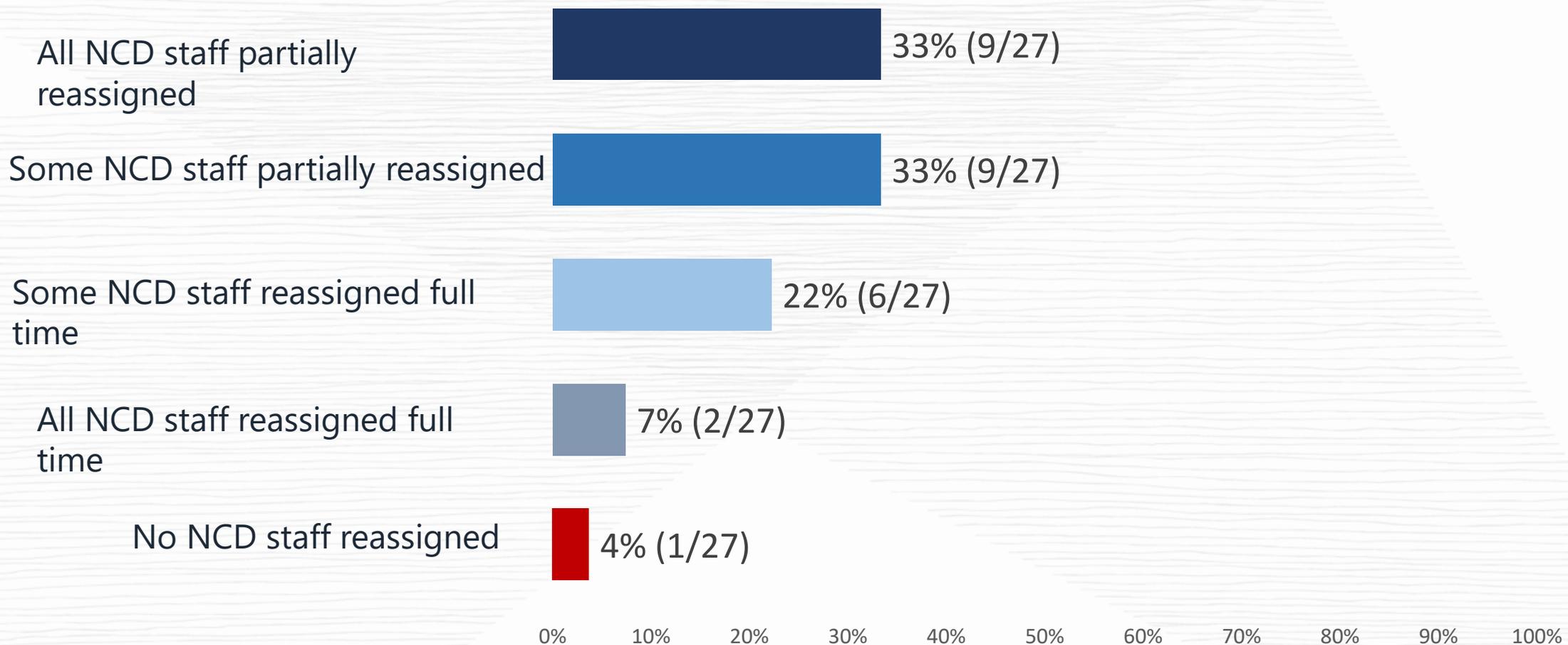
NCDs and mental health  
[www.who.int/ncds](http://www.who.int/ncds)  
[www.who.int/mental\\_health](http://www.who.int/mental_health)

- People with hypertension, diabetes, cancer, chronic kidney disease and chronic respiratory diseases are at **higher risk** of becoming severely ill with COVID-19.
- **More severe cases and a greater risk of death** from COVID-19 occurs in those with NCDs.
- In China, 28% of patients with **cancer** and COVID-19 died (2% death rate overall); LAC has **1.2 million people** with cancer
- Among those with **diabetes**, the risk of death or a severe case of COVID-19 doubles. LAC has **62 million people** with diabetes.
- **Smoking** increases the risk of respiratory diseases and NCDs. **15% of LAC** still smokes

<https://www.who.int/who-documents-detail/covid-19-and-ncds>

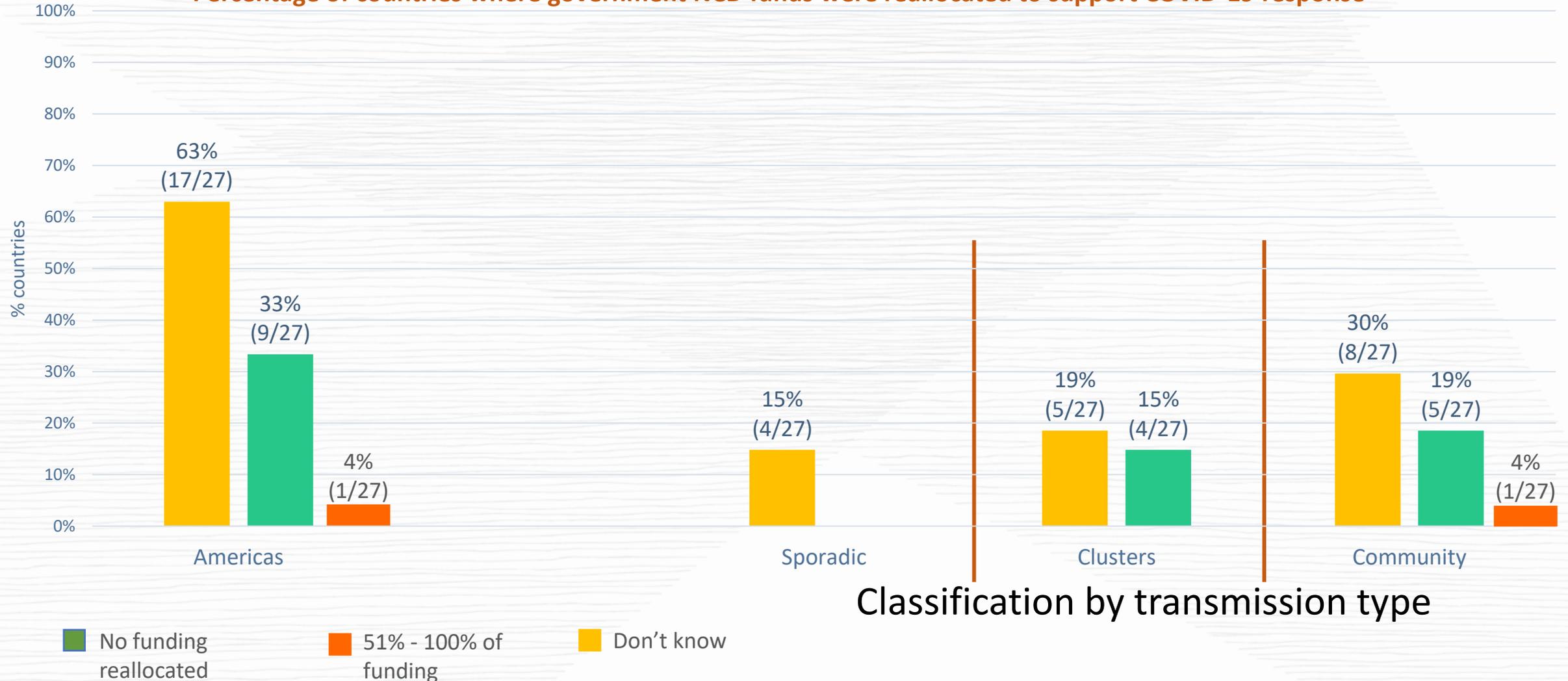
# Health Systems: NCD Staff Reassigned to COVID-19 Response

Percentage of countries where the NCD staff were reassigned/deployed to help with the COVID-19 response



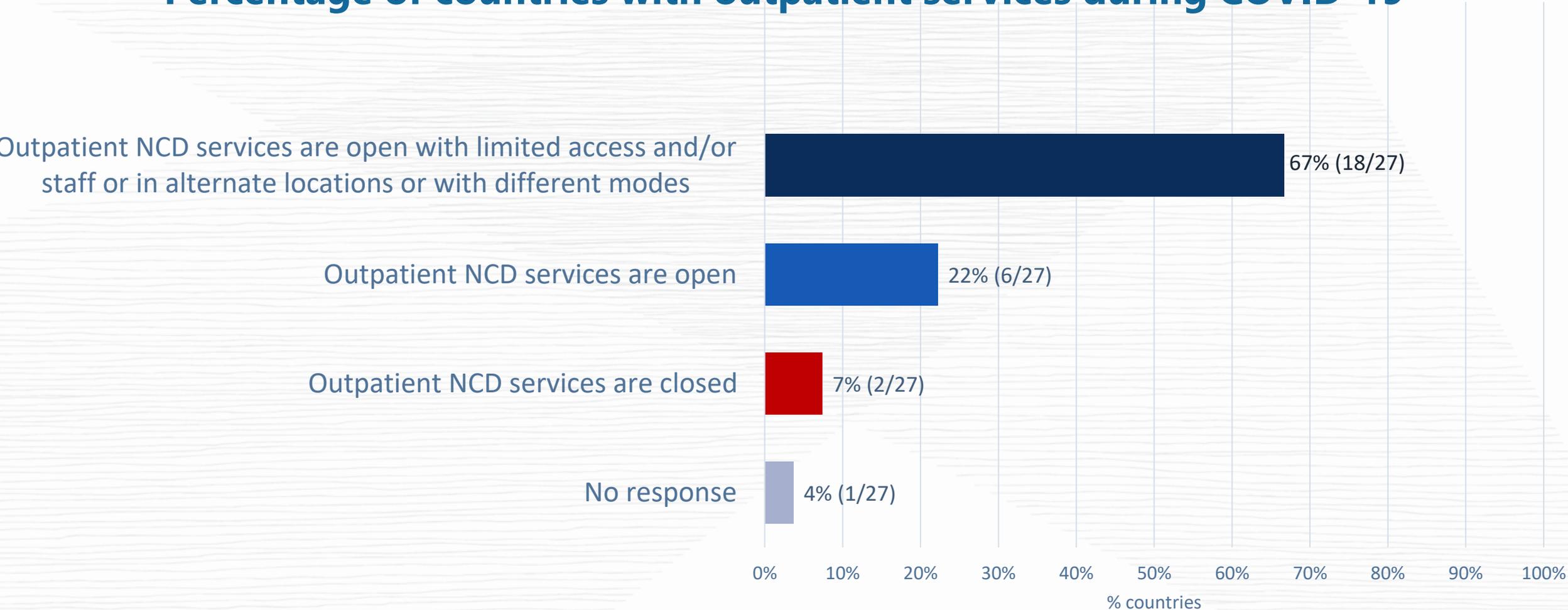
# NCD Funding Reallocated to COVID-19

Percentage of countries where government NCD funds were reallocated to support COVID-19 response

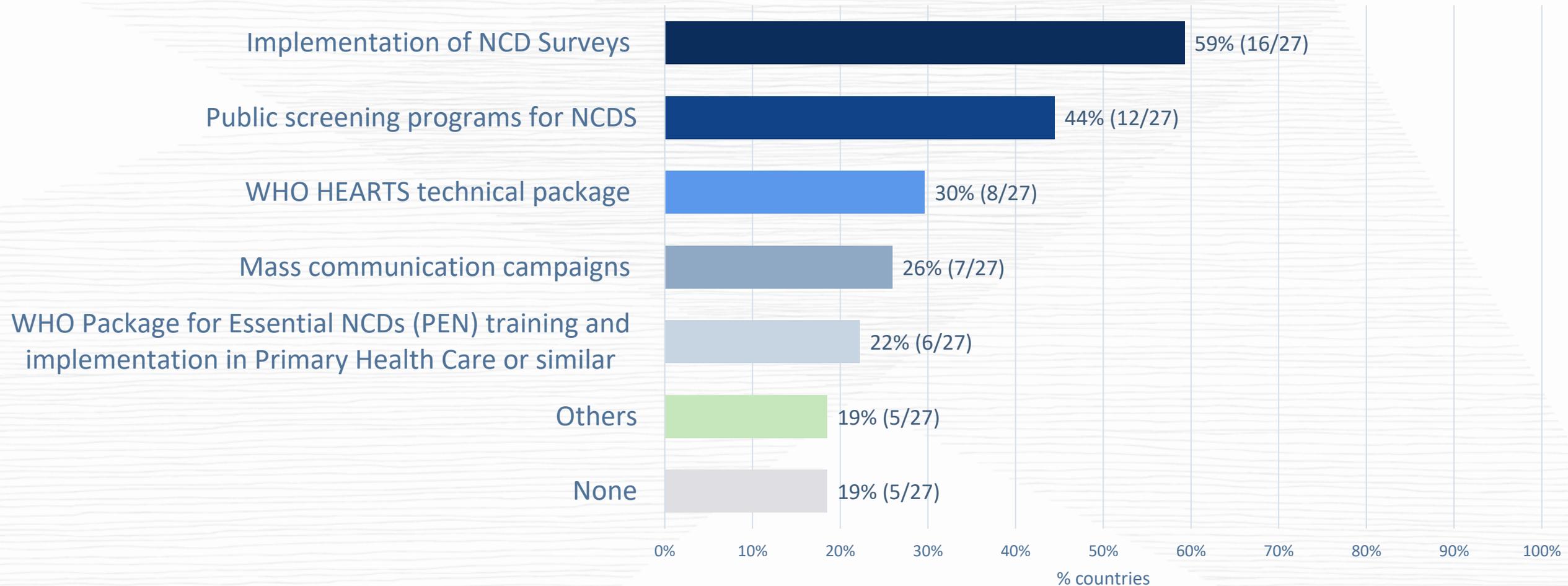


# Essential NCD Services Disrupted

## Percentage of countries with outpatient services during COVID-19



# NCD Activities Postponed Due to COVID-19



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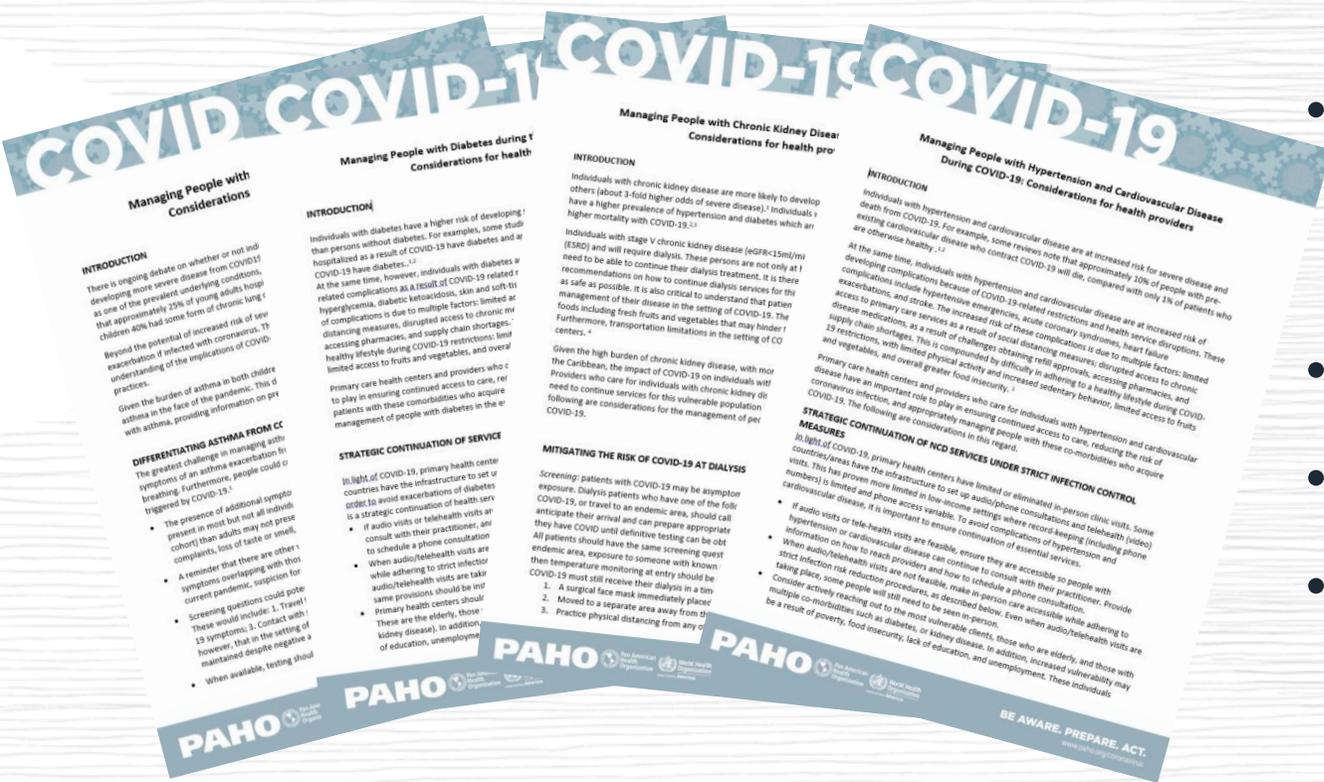
# WHAT IS NEEDED and WHAT PAHO IS DOING

- ✓ Prevention and management of NCDs and Risk Factors need to part of the response to COVID-19
- ✓ Timely access to health care and essential medicines for NCDs are needed to prevent severe cases of COVID-19
- ✓ Maintain and strengthen policies to control risk factors

## PAHO

- Technical guidance on maintaining NCD services during COVID-19
- Support policies to reduce smoking, alcohol, and unhealthy diets
- Communication materials and social media messages to raise awareness among people living with NCDs, health workers and the public

# HEALTH PROVIDER NCD FACTSHEETS



- People with living with an NCD are more likely to become seriously ill from COVID-19 and to die from the disease
- Reducing health risks
- Continuity of care during COVID-19
- Addressing mental health needs

# NCD FACTSHEETS FOR THE PUBLIC



Bringing your hands to your mouth can transfer the virus into your body

**Smoking can increase your chances of getting COVID-19**

Sharing tobacco products such as waterpipes can transmit the virus between people

#coronavirus #COVID19

You may be more susceptible to a severe case of COVID-19 if you have a **noncommunicable disease** or pre-existing condition such as:

- High blood pressure
- Diabetes
- Heart disease
- Heart attack or stroke
- Chronic respiratory disease
- Cancer

PAHO #coronavirus #COVID19

- Information on increased COVID-19 risk
- Tips to reduce risk for COVID-19
- Advice on managing the condition during COVID-19.

# DOMESTIC VIOLENCE DURING COVID-19

## PUBLIC INFORMATION AND GUIDANCE TO HEALTH CARE PROVIDERS



- **Increase** in domestic violence during COVID-19 confinement has been reported
- Stress, alcohol and drug use, disruption of social networks, and decreased service access exacerbate the problem
- Advice on what can be done by: government, health providers, community, women

# CONCLUSIONS

- While all countries continue to adapt and preserve their health services to provide continuous care for persons living with NCDs, **disruptions will likely** have an impact on outcomes for these vulnerable populations.
- Increased efforts are needed to ensure that NCDs are included in the **national COVID-19 response plans**
- **Surveillance systems** must include data collection on NCD-related comorbidities in COVID-19 patients;
- Infrastructure and methods for **telemedicine**, virtual consultations, and other strategies need to be put in place to **continue NCD service delivery** during outbreaks and other health emergencies.
- Technical and communication needs of health program managers during this pandemic will inform our technical cooperation to **build back better** after the pandemic and hopefully reduce the impact of future outbreaks.

# CHECK OUT PAHO'S COVID-19 INFORMATION

[www.paho.org/en/topics/coronavirus-infections](http://www.paho.org/en/topics/coronavirus-infections)

THANK YOU!

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