UHC in China: Lessons Learned in Chronic Disease Prevention and Care

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Oct 31, 2012
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1. Epidemic of Chronic Disease – A Critical Threat in China
• Over the past decade, the average of annually newly added chronic diseases is nearly 10 million.
  – The number of hypertension and diabetes cases increased by 2 times
  – The number of heart disease and cancer cases increased nearly 1 times
• Prevalence rate of chronic diseases has reached 20% and the number of death accounted for 83% in 2008.
• At present, there are about 230 million people suffering from coronary heart disease, stroke, heart failure, hypertension and other cardiovascular disease in China.

• There are nearly 3 million people who died from cardiovascular disease each year.

• Between 1980 and 2008, the number of patients with cardio-cerebrovascular disease discharged from hospital rose by an annual average of 8.28%.
  – The number of discharged patients with diagnosed CHD was 150,300 in 1980 and 2,409,300 in 2008;
  – The number of discharged patients with diagnosed stroke was only 10,000 in 1980 and 2,004,400 in 2008.
The number of chronic non-communicable diseases cases (CVDs, COPDs, DM, and lung cancer) among Chinese people over 40 will double or even triple over the next two decades.

The rapid growth in the number of chronic NCD cases will mainly occur in the next 10 years.

About half of China’s disease burden from chronic NCDs occurs in people under 65.

Stroke has the largest health and well-being impact on individuals.
2. Current Situation of Chinese Disease Control System
China has built a relatively perfect communicable diseases prevention and control system

Diseases Prevention and Control System

- Ministry of Health
- Provincial and municipal Health department
- Health bureau of city and county (district)
- Community health center
- Village or town health center
- Chinese Diseases Control Center
- Provincial and municipal Diseases Control Center
- Diseases Control Center of city and county (district)
- First-class Hospitals
- Second-class Hospitals

CDC at all levels and medical institutions via Internet directly report infectious disease situation, CDC and health administrative department can via Internet for real-time query, analysis epidemic.
Comparison of prevalent features and coping strategy of the two diseases

|                               | Communicable Diseases                                           | Chronic Non-Communicable Diseases                             |
|                               |                                                                 |                                                                |
| **Major pathogenic factor**   | Pathogenic microorganism                                       | Behavior & habit of life                                      |
| **Sick state**                | Symptoms and signs are roughly same                           | Symptoms and signs vary from person to person                 |
| **Pathological changes**      | No obvious individual difference                               | obvious individual difference                                 |
| **Coping strategy**           | Building immunologic barrier                                  | Strengthening health education                                |
|                               | Improving living situation                                    | Changing lifestyle                                            |
|                               | Enhancing knowledge related                                   | Early check、early prevention                                  |
|                               | Mainly focus on groups                                        | groups + individual                                           |
• Medical institutions especially hospitals should be major sectors for chronic disease prevention & control

• But most of the hospitals in China are doing treatment rather than screening risk factors and prevention nowadays
Chinese Chronic Disease Prevention & Control System Needs to Be Established

• The working mechanism of government-led, multi-sectoral cooperation, and the whole society to participate in has not yet been established

• Chronic disease prevention & control network construction is at the stage of exploration
3. The Practice of Establishment of Chinese Chronic Disease Prevention and Control System
Chronic diseases prevention & control is a system engineering

**Content and Relevant Departments**

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<td>Collecting, analyzing and using information</td>
<td>Establishing database of high-risk persons</td>
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15 ministries developed 12th five-year chronic disease prevention planning

Ministry of Health
National Development and Reform Commission
Ministry of Education
Ministry of Science and Technology
Ministry of Finance
......
The founding of The China Federation for Health Promotion

• **Member units**
  - The initiative units include more than 20 societies such as the Chinese Preventive Medicine Association, the Chinese Society of Education, All-China Sports Federation, China Radio and TV Association and China Women’s Development Foundation etc.
Issue the Standards of stroke prevention and treatment

Experts drafted and issued the “Ischemic stroke screening, prevention and control guidance standards (for Trial Implementation)”, which was promulgated to the whole nation as a major technical document of the project.

In order to standardize and regulate the construction of the stroke screening, prevention and control designated hospital, Stroke Screening, Prevention and Control Project Office organized experts to draft the “Access Criteria and Performance Assessment Requirements of Stroke Screening, Prevention and Control Designated Hospital of the Ministry of Health”.

Contents include:

Hospital leadership attention, Collaboration of all relevant departments, Technical training, Health education; Establishment of the standardized system and medical service process; Screening, prevention, control and follow-up of patients; Scientific research; Establishment of the stroke screening, prevention and control network system which include primary health care institutions, etc.
中华人民共和国卫生部

附件1

卫生部脑卒中筛查与防治工程委员会名单

主任：
陈竺 卫生部部长

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马晓伟 卫生部副部长
尹力 卫生部副部长
王陇德 中国工程院院士、中华预防医学会会长

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杜兆谅 卫生部保健局常务副局长
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刘登峰 卫生部科教司副司长

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主任：王陇德(兼)
副主任：王 羽(兼)
秘书处：焦雅辉 卫生部医政司医疗管理处处长

(信息公开形式：主动公开)
Stroke prevention and control system structure

- Publicity & Training agencies
- Health administrative departments (medical, diseases control branch...)
- Diseases controlling institution

Designated hospitals (nation, province, municipal, county)

- Stroke screening clinic
- Stroke unit ward

(screening and estimating the pathogenesis risk of stroke, targeted interventions)

- Information database
- Community health centers
- Health clinics in towns and counties
Set Up Designated Hospitals

99 province-city and prefecture level hospitals have been named “project designated hospital”

Concrete actions of changing medical agencies’ “value treatment and despise prevention”
"Project" has been listed as important one of the special contents of national health reform.

- In 2011-2012, 6 provinces and cities carried out a pilot project with 40 million Yuan support from the central government, screening stroke high-risk groups among 800,000 people whose age are 40 years old and above.
- In 2012-2013, the project will expand to 16 provinces and cities with 72 million Yuan support from central government, screening stroke high-risk groups among 1,440,000 people whose age are 40 years old and above.
- In 2012, central government allocated 26.9 million Yuan for the training of specialized personnel.
- It will be extended nationwide in 2013-2014.
- Each designated hospital would complete stroke high-risk population screening and prevention at least 3000-5000 cases among outpatient and inpatient annually.
The Advantages of Setting These Projects

• To improve the equity of health service

• To implement upstream control of risk factors

• To increase input-output effectiveness
Promote Appropriate Techniques

Ultrasonic technique training
CEA Training
Stroke Awareness
The establishment of database of stroke information

Uniform CRF for screening has been used and national information collection platform has been established

http://124.17.96.81/userinfo/login.aspx
• The Project of Stroke Screening, Prevention and Control has developed as an important public health intervention project with broad social influence in China.
Near-time Target of the Stroke Prevention and Control

- During the twelfth “5 year plan”, a national network of prevention and control would be established
  - The cooperation of CDCs and 300 province-and-city-level designated hospitals and related communities, villages and towns
- Screen for adults over 40 years old and establish one million prospective interventional cohorts, including sample of stroke high risk population both from communities and designated hospitals
- By the end of the twelfth “5 year plan”, to accomplish the goal of an incidence increase lower than 5% and a 10% reduction of mortality
• The practice and exploration of establishment of stroke prevention and control system is expected to provide useful experience for other major chronic diseases’ prevention and control such as chronic obstructive pulmonary disease, osteoporosis, mental disorder and tumor etc.
Thanks for your attention!