

Right Shift of Disease Pattern

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The current pattern of health problem identifies itself as the transition from the era of communicable diseases towards the era of non-communicable diseases. Identification and effective implementation of preventive measures including essential elements of primary health care could improve the life expectancy but increasingly unhealthy food habit, behaviour and life style along with age-related body dysfunction are contributing to shift the disease pattern towards the right. Thus the health facilities, health planners and trained resources should address this right shift in people's health.

Tobacco and alcoholic beverages have historic identity since ancient time, and the most widely used till now. It reciprocates with the affluence, social hierarchy and feeling of modernized at the cost of long term ill health. These two potential variables always go along the society. Thus the behavioural intervention targeting their recognizable risk factors would improve the health of the people. Commercialized incorporation of tobacco product and alcoholic beverage like in the business meet, social gathering or holiday break is not only an inherent custom but also an issue of insight of the state itself. It has unquestionable reach to each level of life making its control more difficult. Commercial drinks have encroached the minds of our vulnerable population and parents are compelled to buy a risk.

Smoking and alcohol drinking are socially shared and socially transferred risks. It puts adolescents and school children in more vulnerable positions. Therefore the school health programs and adolescent health programs are more relevant to

protect our people from the early period of life.

The common diseases like diarrhoeal disease, respiratory infection, protein-energy malnutrition and bacterial infection have been pushed back and taken lead by hypertension, diabetes, hyperlipidemia, obesity and cancer. There is a differential distribution of disease categories globally but the shifting pattern is demonstrable in both developed and developing countries. Metabolic syndrome, organ failure, cancer and birth defects cost a lot to the society.

Psycho-social and geo-ecological conditions predispose to the hypertension and diabetes, for instance, to lead to the risk of cardiovascular diseases. It costs more if not addressed properly. Sedentary life and dietary habit either by choice or by occupation are contributing further to the non-communicable diseases. Inherited or acquired genetic or birth defects would cost more to the family and society.

Some health conditions are as a result of micro-nutrient deficiency all over the world. NCD-related morbidity and mortality can be prevented from addressing vitamin and mineral deficiency conditions. High prevalence of Iodine, Iron, Zinc and Vitamin A deficiency are the cause of cognitive, vision, growth and immunity impairment as well as early mortality. Folic acid supplementation in early pregnancy has become a routine practice to reduce neural tube defects, Iron and Calcium are established as the pregnancy supplement pills as well. Therefore the Vitamins A, B, C and D as well as the other minerals like Selenium and Fluoride directly related with the disease process. Thus the micro-nutrient supplementation program would

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prevent silently epidemic deficiency diseases.

Industrialization, urbanisation, increasing primary health facilities, ageing and unhealthy behaviour are promoting left to right shift in the disease pattern. Therefore the need of the day is to educate people, health service providers and planners to recognize the shift and work accordingly. Identifying risk factors of non-communicable diseases is the primary step to address the condition.