

## Report: U.S. needs to prioritise cardiovascular disease



A new report from the National Academies of Sciences, Engineering and Medicine (NASEM) highlights the need for the United States to prioritise its health resources toward detecting and treating noncommunicable diseases (NCDs), such as cardiovascular disease.

The report was prepared by a committee formed by NASEM and tasked with identifying current global health priorities and making strategic recommendations to the U.S. government and other stakeholders on how best to address these priorities in a manner that would have the most immediate and substantial impact.

In May of this year, the NASEM committee released a set of 14 recommendations that included improving early detection and treatment; mitigating disease risk factors; shifting global health infrastructure to include management of cardiovascular disease; developing global partners and private-public ventures to meet infrastructure and funding challenges; and increasing research and development capacity.

A detailed review of NASEM's global health policy recommendations is published in the 30th November issue of Journal of the American College of Cardiology. In the review article, the authors focus on the cardiovascular disease-related recommendations, providing insights in five key areas:

- 1. Global cardiovascular health
- 2. Screening for early detection and treatment of cardiovascular disease
- 3. Catalysing innovation, including accelerating drug development, addressing research and development capacity and leveraging digital health
- 4. Smart financing strategies
- 5. Global health leadership

"The Committee has highlighted priority areas that demand continued investment and underscored the imperative to change the way the United States approaches global health, to a more proactive and integrated strategy," the authors write. "One targeted area is CVD, as part of general expansion of the global health vision to encompass chronic NCDs. The outcome of investment in global health, now shifting to include NCDs, will be resilient countries with positive health outcomes, robust trade partners, safer travel destinations, and more active collaborators in preventing and controlling global health problems that affect citizen of every country, at every income level."

Should the U.S. choose to prioritise cardiovascular disease and other NCD programmes within its global health strategy, the authors emphasise the country could benefit in the following three ways: "1) the adoption of a universal purpose, 2) economic prosperity and trade benefits, and 3) the safeguarding of U.S. global health investments."

"These NASEM recommendations and this manuscript are among the most important efforts of my career, because if they are adopted by the U.S. government, they have the potential to enact true change for global health," said corresponding author Valentin Fuster, MD, PhD, MACC, from Mt. Sinai Medical Center, NY. "The next step for the committee is to present these recommendations to the U.S. Senate and to President Donald J. Trump."

Source: American College of Cardiology

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Published on : Tue, 5 Dec 2017