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The Global Economic Burden of Noncommunicable Diseases

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Abstract

As policy-makers search for ways to reduce poverty and income inequality, and to achieve sustainable income growth, they are being encouraged to focus on an emerging challenge to health, well-being and development: non-communicable diseases (NCDs). After all, 63% of all deaths worldwide currently stem from NCDs – chiefly cardiovascular diseases, cancers, chronic respiratory diseases and diabetes. These deaths are distributed widely among the world's population – from highincome to low-income countries and from young to old (about one-quarter of all NCD deaths occur below the age of 60, amounting to approximately 9 million deaths per year). NCDs have a large impact, undercutting productivity and boosting healthcare outlays. Moreover, the number of people affected by NCDs is expected to rise substantially in the coming decades, reflecting an ageing and increasing global population. With this in mind, the United Nations is holding its first High-Level Meeting on NCDs on 19-20 September 2011 – this is only the second time that a high-level UN meeting is being dedicated to a health topic (the first time being on HIV/ AIDS in 2001). Over the years, much work has been done estimating the human toll of NCDs, but work on estimating the economic toll is far less advanced. In this report, the World Economic Forum and the Harvard School of Public Health try to inform and stimulate further debate by developing new estimates of the global economic burden of NCDs in 2010, and projecting the size of the burden through 2030. Three distinct approaches are used to compute the economic burden: (1) the standard cost of illness

method; (2) macroeconomic simulation and (3) the value of a statistical life. This report includes not only the four major NCDs (the focus of the UN meeting), but also mental illness, which is a major contributor to the burden of disease worldwide. This evaluation takes place in the context of enormous global health spending, serious concerns about already strained public finances and worries about lacklustre economic growth. The report also tries to capture the thinking of the business community about the impact of NCDs on their enterprises. Five key messages emerge: · First, NCDs already pose a substantial economic burden and this burden will evolve into a staggering one over the next two decades. For example, with respect to cardiovascular disease, chronic respiratory disease, cancer, diabetes and mental health, the macroeconomic simulations suggest a cumulative output loss of US$ 47 trillion over the next two decades. This loss represents 75% of global GDP in 2010 (US$ 63 trillion). It also represents enough money to eradicate two dollar-a-day poverty among the 2.5 billion people in that state for more than half a century. · Second, although high-income countries currently bear the biggest economic burden of NCDs, the developing world, especially middle-income countries, is expected to assume an ever larger share as their economies and populations grow. · Third, cardiovascular disease and mental health conditions are the dominant contributors to the global economic burden of NCDs. · Fourth, NCDs are front and centre on business leaders' radar. The World Economic Forum's annual Executive Opinion Survey (EOS), which feeds into its Global Competitiveness Report, shows that about half of all business leaders surveyed worry that at least one NCD will hurt their company's bottom line in the next five years, with similarly high levels of concern in low-, middle- and high-income countries – especially in countries where the quality of healthcare or access to healthcare is perceived to be poor. These NCD-driven concerns are markedly higher than those reported for the communicable diseases of HIV/AIDS, malaria and tuberculosis. · Fifth, the good news is that there appear to be numerous options available to prevent and control NCDs. For example, the WHO has identified a set of interventions they call "Best Buys". There is also considerable scope for the design and implementation of programmes aimed at behaviour change among youth and adolescents, and more costeffective models of care – models that reduce the care-taking burden that falls on untrained family members. Further research on the benefits of such interventions in relation to their costs is much needed. It is our hope that this report informs the resource allocation decisions of the world's economic leaders – top government officials, including finance ministers and their economic advisors – who control large amounts of spending at the national level and have the power to react to the formidable economic threat posed by NCDs.

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