



# Implementation and Evaluation of Non-Communicable Diseases along with their Risk Factors

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## DESCRIPTION

Non-Communicable Diseases (NCDs) are also termed “chronic diseases”. Non-Communicable Diseases (NCDs) such as heart disease, stroke, cancer, diabetes and chronic lung disease together account for almost 70% of all deaths worldwide. Almost three-quarters of all NCD deaths, and 82% of the 16 million people who died early or under the age of 70, occur in low- and middle-income countries. The NCD epidemic can have devastating health consequences for individuals, families and communities and can overwhelm the healthcare system. The socio-economic costs associated with non-communicable diseases make the prevention and management of these diseases an important development in the 21<sup>st</sup> century.

The Global Status Report on non-communicable diseases is the second in a three-year series that tracks global advances in the prevention and management of non-communicable diseases. The main message of the Second Global Report on Noncommunicable Diseases is that today the global community has the opportunity to change the course of the NCD epidemic. The World Health Organization (WHO) predicts that if timely measures are not taken to prevent and manage NCDs, the total annual death from NCDs will increase to 55 million by 2030. In India, about 5.8 million people (WHO report, 2015) die each year from non-communicable diseases (heart and lung disease, stroke, cancer, diabetes). This means that one in four Indians is at risk of developing non-communicable disease.

Several factors can increase the number of opportunities to develop NCDs and can be categorized in different ways. In one approach, risk factors are categorized as modifiable or non-modifiable factors that may have mutable or immutable conditions, respectively.

These modifiable risk factors are:

- High blood pressure
- Lack of exercise

- Smoking
- Diabetes
- Hypercholesterolemia
- Overweight

Non-modifiable risk factors are:

- Age
- Ethnic background
- Family history of heart disease.

Non-communicable diseases are out of control. The cause can be avoided. NCDs have become a global epidemic due to the combined effects of modern diets (including substance abuse) and sedentary lifestyles (Robson2013b). Human food production must first and foremost be related to human nutritional needs. A low-energy, drug-free diet rich in biologically available nutrients and exercise is most effective in preventing non-communicable diseases throughout life. The high and low energy densities that characterize modern nutrition must be overcome at the same time. Substance abuse must be socially unacceptable. Nano cellulose and zero-calorie monk fruit extracts can be used to reduce the energy density of processed foods/beverages, and the levels of biologically available nutrients, including cofactors, can be increased by bioactive encapsulation.

Non-Communicable Diseases (NCDs) place a heavy burden on the health and development of the Western Pacific region. Non-communicable diseases are the leading cause of death and disability in the region. The WHO West Pacific Regional Office assists Member States in the prevention and management of NCDs as follows:

- Raise the priorities given to NCDs through international cooperation and advocacy.
- Strengthening national capabilities, governance, multi-sectoral actions and partnerships.
- Reduces major correctable risk factors such as tobacco use, harmful alcohol use, unhealthy diet, and lack of exercise.

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- Develop and implement an effective legal framework.
- Coordinate the healthcare system through people-centric health care and universal health care.
- Promotion of high quality research and development.
- Monitor trends, determinants, and progress in achieving global, regional, and national goals through evidence-based intervention.

Non-communicable diseases are also associated with higher medical costs long and expensive treatment. People can't stop taking medicines for non-communicable diseases feels good.

People often have to take it for the rest of your life to keep the illness away. However Many people stop taking medicine when they feel better or when they run out of money. These illnesses also require close monitoring and regular follow-up by your healthcare provider. Poor people may not be able to attend health centers on a regular basis, as it means loss of wages. High transportation costs to and from medical facilities, low energy consumption Work, lack of money for a healthy diet, and stress are other factors that lead to higher levels of non-communicable disease among the poor.