



Low- and Middle-Income Regions Will Struggle to Reach Target for Reducing Stroke

Written by Wayne Kuznar

Collaborative efforts to reduce the global burden of noncommunicable diseases (NCDs), including stroke, are under way. Global strategies to achieve the World Health Organization (WHO) 25 by 2025 targets, aimed at a 25% reduction in premature mortality from NCDs, were the focus of a symposium.

Ralph L. Sacco, MD, University of Miami, Miami, Florida, USA, presented the global forecasts for stroke, noting the large regional variation, and reviewed the WHO targets as they pertain to stroke. Using 2013 global burden data, the number of deaths from cardiovascular disease and stroke among men and women aged 30 to 69 years in 2025 have been estimated, assuming that current trends in risk factor prevalence continue.

The global cerebrovascular disease estimated that the death count for years 1990 to 2025 for this age group is projected to be 2 357 497 globally in 2025, a 33% increase from 2010 to 2025, with the largest increases expected to occur in Southeast Asia, South Asia, and East Asia. In general, the burden of stroke will continue to be highest in low- to middle-income countries.

Within the framework of the WHO target reductions, control of systolic blood pressure would have the largest impact on achieving a 25% reduction in stroke mortality over this time. High-income regions would hit the target earlier than 2025 by achieving combined risk factor targets for glucose control, reducing systolic blood pressure by 25%, halting the rise in obesity, and lowering the prevalence of smoking by 30%. Hitting all 4 risk factor targets would allow most other regions to achieve the WHO goal for reducing the probability of premature mortality from cardiovascular diseases and stroke by 2025.

Intensified, region-specific strategies are needed to meet the WHO 25 by 2025 goal and targets, concluded Dr Sacco.

Bo Norrving, MD, PhD, Lund University, Lund, Sweden, spoke about global approaches to reduce stroke incidence, iterating key messages of the 2014 WHO Global Status Report on NCDs.

The objectives of the report are to facilitate for countries to set national targets in alignment with global NCD targets, implement priority interventions to attain the national targets, and report on progress. Countries can use the report to determine their NCD status, make a business case for taking action, provide technical justification for prioritizing interventions, set and attain national targets, and learn from and replicate successful initiatives. Case studies in the WHO report exemplify success in achieving risk factor control in different regions of the world, which can be used as inspiration for other countries, said Prof Norrving.

According to the report, all countries need to set national NCD targets and be accountable for attaining them, while establishing structures and processes for multisectoral and intersectoral collaboration. While some countries are making progress in reducing the burden of NCDs, most are not currently on course to attain the NCD targets.

The United Nations is also in the process of defining post-2015 Sustainable Development Goals, as proposed by an open working group. The proposed goals include an NCD target to reduce morbidity and mortality from NCDs by one-third by 2030, through prevention and treatment.

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