Burden of Non-Communicable Diseases (Chronic Diseases) in Hong Kong

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Outline

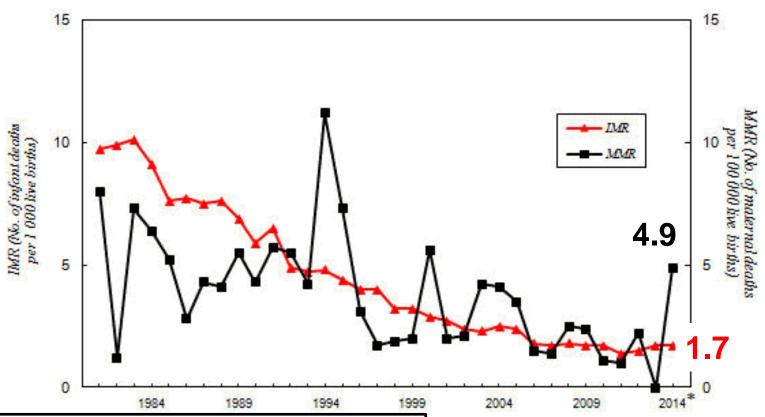
- Our achievements
- Our threats
- Our food choices
- Our opportunities



Our Achievements



Infant Mortality Rate (IMR) and Maternal Mortality Ratio (MMR) in Hong Kong

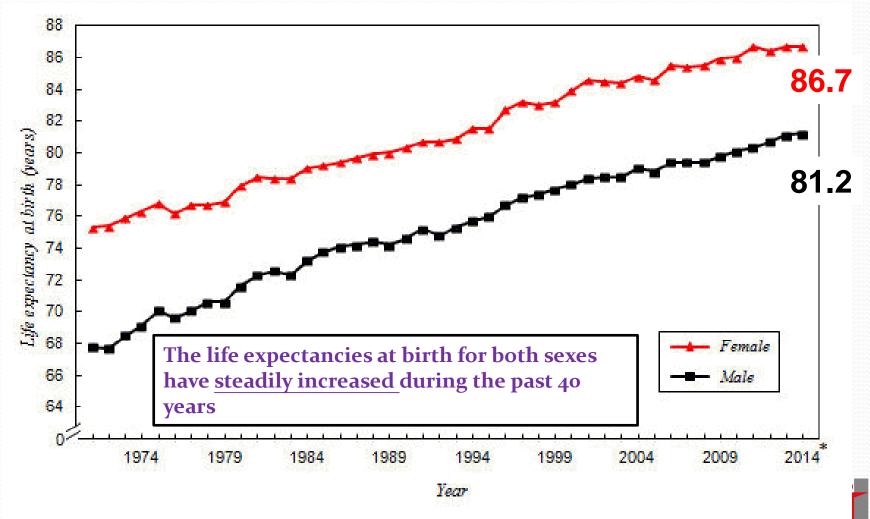


Hong Kong has achieved a falling and extremely enviable trend of IMR and MMR.



^{*}Provisional figures for year 2014
Sources: Department of Health, Census and Statistics Department

Life Expectancy at Birth in Hong Kong

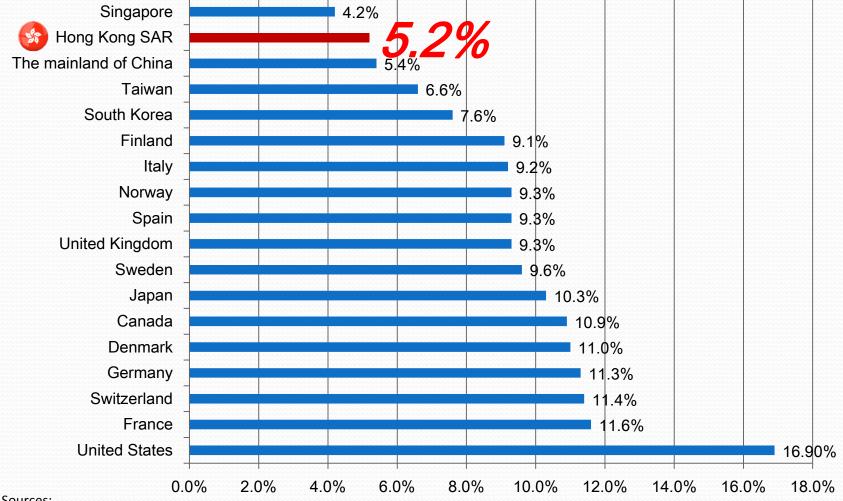


衛生署 Department of Health

*Provisional figures for year 2014 Sources: Department of Health, Census and Statistics Department

GDP of Hong Kong invested on healthcare





Sources:

Unless otherwise specified, all figures are from OECD. Stat website;

Hong Kong SAR figures from Hong Kong's Domestic Health Accounts, 1989/90-2011/12.

Taiwan figures from Ministry of Health and Welfare, Taiwan website:

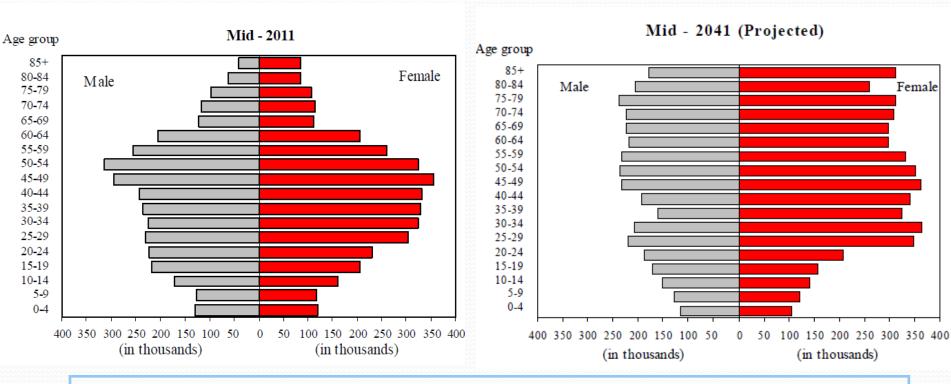
Figures for the mainland of China and Singapore are from National Health Accounts, World Health Organization website.



Our Threats



Hong Kong Population Pyramid



The proportion of population aged 65 and over is projected to rise from 13% in 2011 to 30% in 2041.

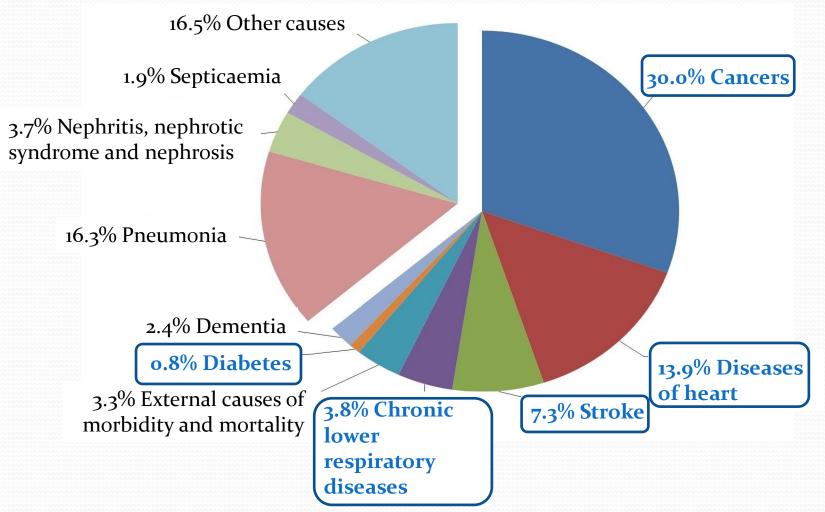


Epidemiological Transition in Mortality - from CDs to NCDs

Proportionate Mortality of CDs and NCDs, 1963 - 2013



Leading Causes of Death in HK (2014)*



*Provisional figures for year 2014 Sources: Department of Health, Census and Statistics Department

'Premature' deaths (2013)

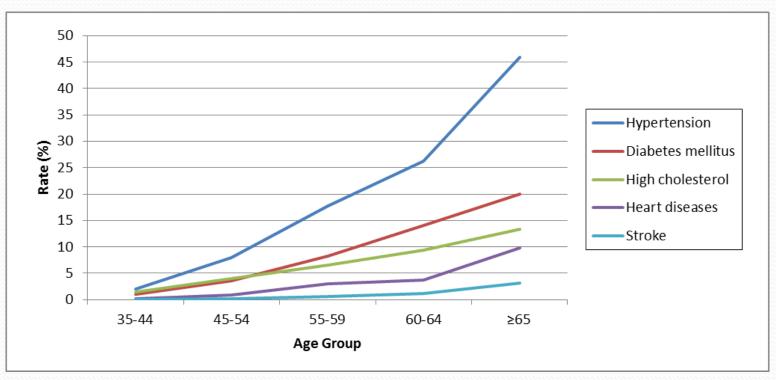
(before the age of 70)

	Number of registered deaths	Proportion of all registered deaths in respective disease/disease groups)	Number of potential years of life lost before the age of 70
Cancers	5 770	42.5%	73 976
Coronary heart disease	929	23.2%	11 427
Stroke	66o	20.3%	8 234
Diabetes	89	24.7%	1 179
Hypertensive diseases	77	11.0%	682

Sources: Department of Health, Census and Statistics Department

Comorbidities Increase with Age

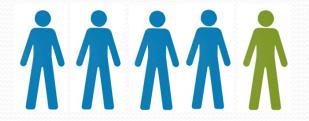
Percentage of persons who had chronic health conditions by type and age, 2011/12



Source: Thematic Household Survey Report No. 50, Census and Statistics Department

By the age of 65 years...





1 in 5 had diabetes mellitus



1 in 2 had hypertension

Source: Thematic Household Survey Report No. 50, Census and Statistics Department

Comorbidities Increase with Age

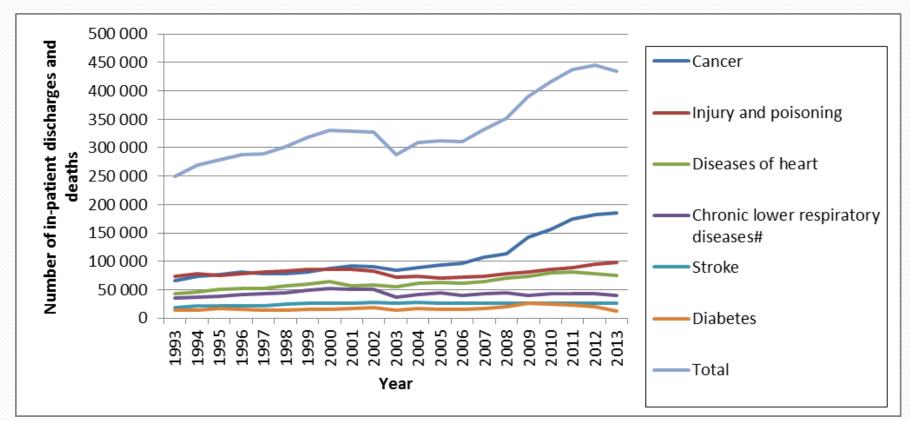
Number of doctor-diagnosed chronic diseases by age group, 2011

Age group	Number of doctor-diagnosed chronic diseases			
	None	One	Two or more	
18-24	89.8%	8.4%	1.8%	
25-34	87.3%	9.2%	3.5%	
35-44	77.8%	16.8%	5.4%	
45-54	66.3%	23.2%	10.5%	
55-64	43.2%	30.8%	26.0%	

Source: Behavioural Risk Factor Survey. Department of Health.

Burden of NCDs to Hospital Service

Number of episodes of in-patient discharges and deaths in all hospitals for major chronic diseases, 1993 to 2013



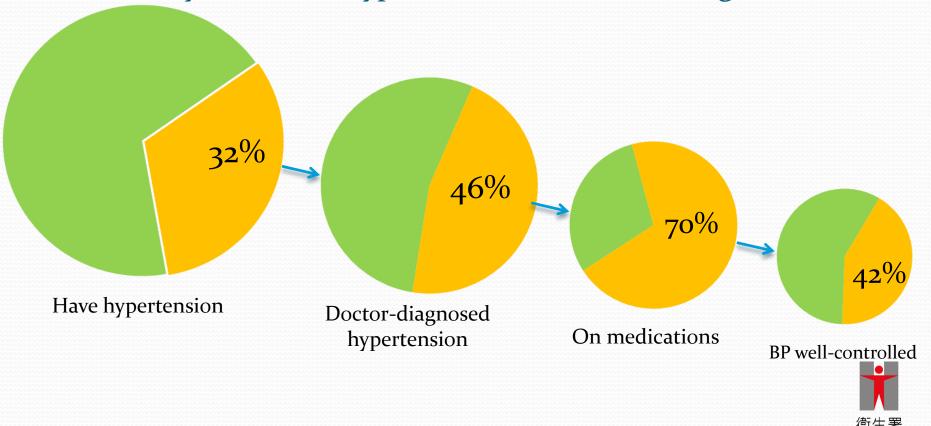
Note: #include ICD-9 code 495: Extrinsic allergic alveolitis for 1993 to 2000.

Sources: Department of Health and Hospital Authority.



Hypertension

The prevalence of doctor-diagnosed hypertension in Hong Kong adult population has increased, but only half of all hypertensive cases were diagnosed



Source: FAMILY Project Cohort Study, School of Public Health, University of Hong Kong

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Hypertension

Comparing with other countries,

Prevalence of hypertension in selected countries

Countries	Year	Age group (years)	Prevalence
England ¹	2013	<u>></u> 16	28.6%
United States ²	2011/12	<u>≥</u> 18	29.1%
Australia ³	2011/12	<u>></u> 18	31.6%
Hong Kong ⁴	2012	<u>></u> 20	32.0%

Sources: (1) Health Survey for England 2013;

- (2) U.S. National Health and Nutrition Examination Survey, 2011–2012;
- (3) Australian Health Survey;
- (4) FAMILY Project Cohort Study



Stroke

The prevalence of stroke in Hong Kong adult population was 0.6%

Proportion of people aged 15 and above with known stroke as told by practitioners of Western medicine, 2009/10 and 2011/12

Year	Prevalence
2009/10	0.6%
2011/12	0.6%

Source: Thematic Household Surveys 2009/10 and 2011/12, Census and Statistics Department

Stroke

Comparing with other countries,

Prevalence of stroke in selected countries

Countries	Year	Age group (years)	Prevalence
England ¹	2011	<u>></u> 16	2.4%
United States ²	2010	<u>></u> 18	2.6%
Australia ³	2009	<u>≥</u> 18	1.8%
Hong Kong ⁴	2011/12	<u>></u> 15	0.6%

Sources: (1) Health Survey for England 2011;

- (2) MMWR 2012, 61(20):379-82;
- (3) Australian Health Survey;
- (4) Thematic Household Survey 2011/12

Coronary Heart Disease

The prevalence of doctor-diagnosed coronary heart disease in Hong Kong adult population was 1.6%

Prevalence of doctor-diagnosed coronary heart disease in people aged 15 and above preceding the survey by sex, 2003/04

Sex	Prevalence
Male	2.0%
Female	1.2%
Overall	1.6%

Source: Population Health Survey 2003/04, Department of Health

Coronary Heart Disease

Comparing with other countries,

Prevalence of coronary heart disease in selected countries

Countries	Year	Age group (years)	Prevalence
England ¹	2011	<u>></u> 16	4.6%
United States ²	2010	<u>></u> 18	6.0%
Hong Kong ³	2003/04	≥15	1.6%

Sources: (1) Health Survey for England;

(2) MMWR 2011, 60(40):1377-81;

(3) Population Health Survey 2003/04

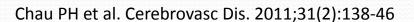
Early Onset of Non-CommunicableDiseases

Table 3. Fitted incidence rates of stroke in Hong Kong by age group, sex and subtype, and IRRs for different periods estimated from Poisson regression

Subtype/	Age	Fitted incidence rates (per 100,000)		2002-2	2002-2004 vs.1999-2001		2005-2007 vs.2002-2004	
sex	group	1999-2001	2002-2004	2005-2007	IRR	95% CI	IRR	95% CI
Hemorrhagic	35-44	11.6	14.7	16.3	1.26	1.15-1.38*	1.11	1.02-1.21*
Male	45-54	36.1	44.0	44.9	1.22	1.15-1.29*	1.02	0.97 - 1.07
	55-64	107.4	112.9	104.1	1.05	1.01-1.10*	0.92	0.88-0.96**
	65 - 74	215.2	234.7	226.7	1.09	1.05-1.13*	0.97	0.93 - 1.00
	75-84	408.8	451.5	442.7	1.10	1.06-1.15*	0.98	0.95 - 1.02
	85+	622.2	686.3	676.7	1.10	1.05-1.16*	0.99	0.94 - 1.03
Female	35-44	5.2	6.2	6.9	1.21	1.10-1.32*	1.10	1.01-1.20*
	45-54	18.0	21.0	21.3	1.17	1.10-1.23*	1.01	0.96 - 1.07
	55-64	47.3	47.6	43.7	1.01	0.96 - 1.06	0.92	0.88-0.96**
	65 - 74	116.9	122.0	117.2	1.04	1.00-1.09*	0.96	0.92-1.00**
	75-84	266.4	281.6	274.6	1.06	1.02-1.10*	0.98	0.94 - 1.01
	85+	479.0	505.7	495.9	1.06	1.01-1.11*	0.98	0.94 - 1.02
Ischemic	35-44	22.1	22.7	23.5	1.02	0.94-1.12	1.04	0.95-1.13
Male	45-54	92.1	91.1	87.0	0.99	0.94 - 1.04	0.95	0.91 - 1.00
	55-64	425.5	363.6	314.0	0.85	0.82-0.89**	0.86	0.83-0.90**
	65 - 74	1,053.7	933.9	844.6	0.89	0.86-0.91**	0.90	0.88 - 0.93**
	75 - 84	1,908.2	1,713.0	1,572.4	0.90	0.87-0.92**	0.92	0.89-0.94**
	85+	2,471.2	2,215.4	2,045.1	0.90	0.86-0.94**	0.92	0.89-0.96**
Female	35-44	13.2	13.0	13.4	0.98	0.90-1.07	1.03	0.95-1.13
	45-54	61.7	58.5	55.5	0.95	0.90-1.00**	0.95	0.90-1.00**
	55-64	252.6	206.6	177.4	0.82	0.79-0.85**	0.86	0.83-0.89**
	65 - 74	770.4	653.6	587.8	0.85	0.82 - 0.87**	0.90	0.87-0.93**
	75-84	1,673.7	1,438.3	1,313.0	0.86	0.84-0.88**	0.91	0.89-0.94**
	85+	2,560.8	2,197.5	2,017.6	0.86	0.83-0.89**	0.92	0.89-0.95**

IRR = Incidence rate ratio; CI = confidence intervals.

IRR significantly greater than 1: *p < 0.05; IRR significantly smaller than 1: **p < 0.05.



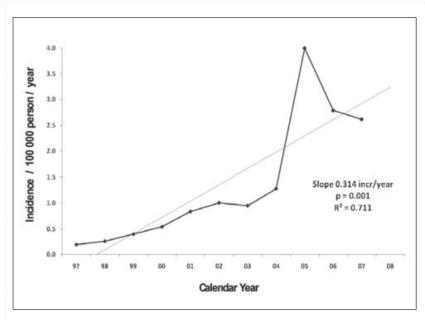


Figure 3 Time trends in incidence of type 2 diabetes for 0-18 year-old in Hong Kong from 1997 to 2007.

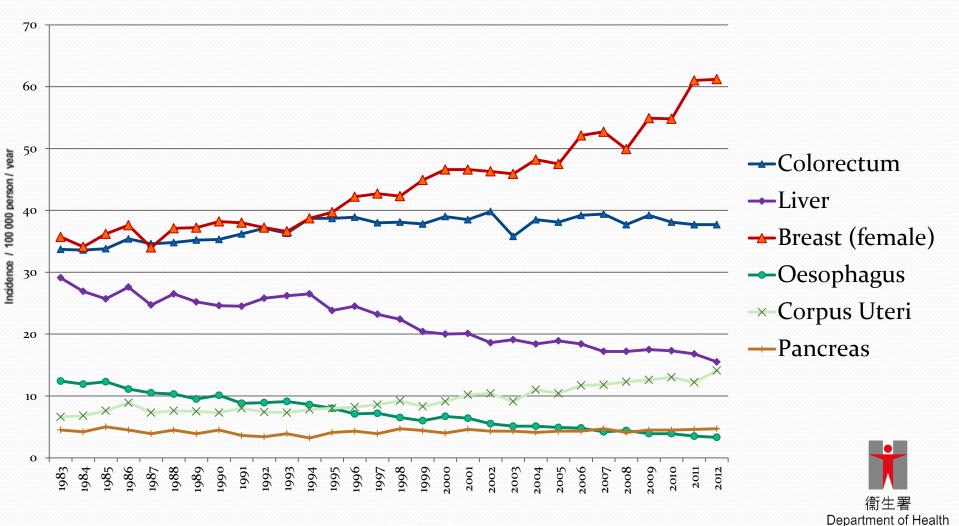
Huen KF et al. HK J Paediatr (new series) 2009;14:252-259

Age-standardised incidence and mortality rates

of the common cancers related to overweight and obesity in 2012

	Incidence	Mortality		
	(per 100 000 standard population)			
Colorectum	37.7	14.4		
Liver	15.5	12.4		
Breast (female)	61.2	9.5		
Corpus uteri	14.1	1.3		
Pancreas	4.7	4.3		
Oesophagus	3.3	2.5		

Age-standardised incidence of the common cancers related to overweight and obesity from 1983 to 2012



Causation Pathways





Biomedical risk factors

- Raised blood pressure
- Overweight and obesity
- Raised blood glucose
- Abnormal lipid profile

NCDs

- Coronary heart diseases
- Stroke
- Cancers
- Diabetes
- Dental Caries

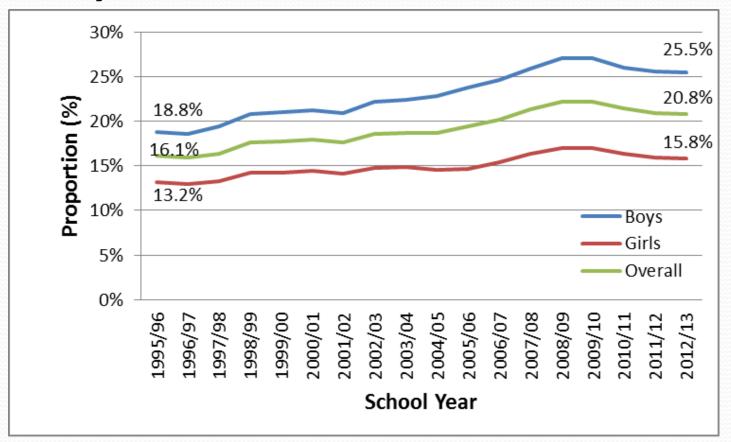






Overweight and Obesity

Primary school students



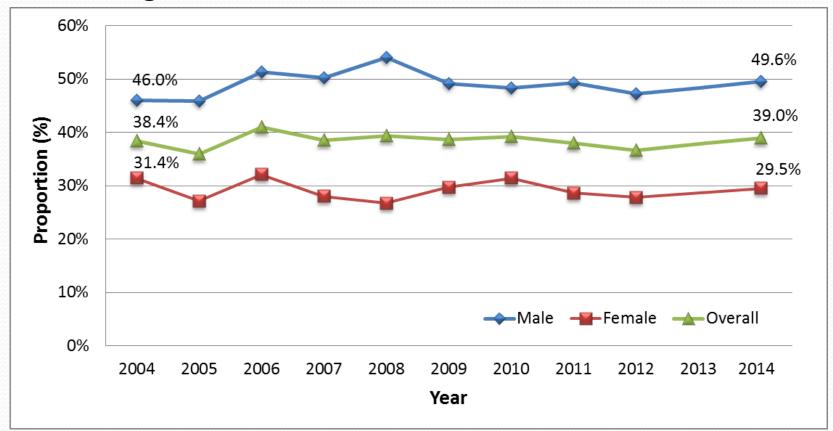
Note: Overweight and obesity is defined as weight exceeding 120% of the median weight for height or BMI ≥ 25 for boys with height > 175cm and for girls with height > 165cm

Source: Student Health Service, Department of Health



Overweight and Obesity

Adults aged 18-64 (BMI ≥ 23)



Source: Behavioural Risk Factor Surveys, Department of Health

Overweight and Obesity

Comparing with other Asian populations

Prevalence of BMI≥25 (crude estimate) in selected countries

Countries	Year	Age (years)	Male	Female	Both sexes
Singapore ¹	2014	18+	39.2%	30.0%	34.6%
Japan ²	2014	18+	30.4%	22.8%	26.5%
Hong Kong ³	2014	18-64	28.4%	14.7%	21.2%

Sources: (1) and (2) WHO Global Health Observatory Data Repository;

(3) Behavioural Risk Factor Survey 2014

How much exercise we need to burn the calories intake from unhealthy (energy dense) food

	Unhealthy (energy dense) food	Calories intake (Kcal)	Exercise that needed to burn
D.	3 pieces of marshmallow	69	Strolling for 21 mins
	1 small pack of chips	135	Swimming for 23 mins
2	1 can of soft drinks	135	Cycling for 27 mins
	4 pieces of cream sandwich biscuits	2 34	Stair climbing for 23 mins

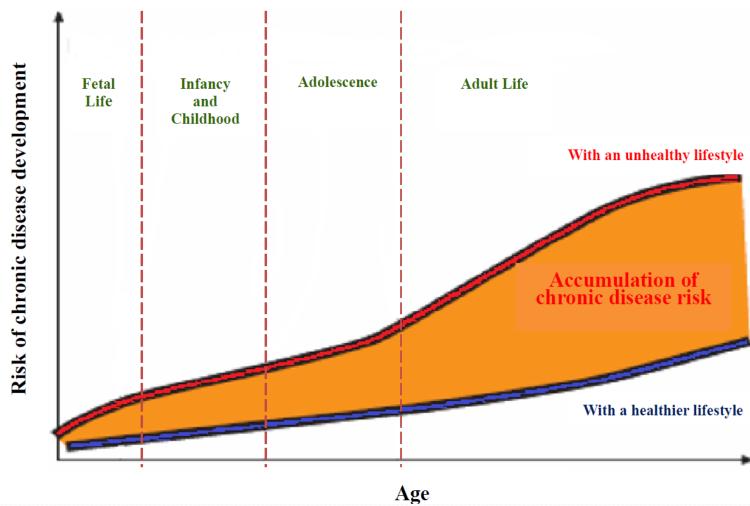
Source: (1) Centre of Food Safety

(2) USDA food database

(3) Know Your Physical Activity Level Booklet, Leisure & Cultural Service Department



Chronic Disease Risk Accumulation



Source: World Health Organization, 2002.



Our food choices – how are we treating our children, ourselves and our future?

Food Issues @ different age groups





Breastfeeding vs Infant Formula
80% took formula milk only among the 0-6 month group





Nearly 50% of the 18-24 months drank too much milk, mainly formula



A Survey of Infant and Young Child Feeding in Hong Kong: Diet and Nutrient Intake, 2012. Department of Health. 衛生署 A Survey of Infant and Young Child Feeding in Hong Kong: Milk Consumption, 2012. Department of Health. Department of Health. 33

Some pre-primary institutions...





Used monosodium glutamate (MSG), chicken powder, salty seasonings or other ready-made sauces



Used processed or canned meat



Source: Arrangement of Dietary Practice and Physical Activity in Pre- Primary Institutions, 2013. Department of Health.

Beverage Provision for Students



Used full-cream or sweetened dairy products

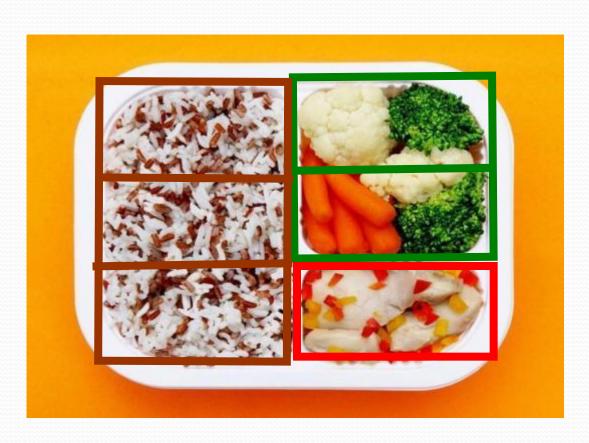


Provided instant drinks (other than milk powder)

Source: Arrangement of Dietary Practice and Physical Activity in Pre- Primary Institutions, 2013. Department of Health.

Primary School – Ideal Lunch





Grains:Vegs:Meat = 3:2:1

76% lunch did not meet 3:2:1

Fries

Small amount veggies



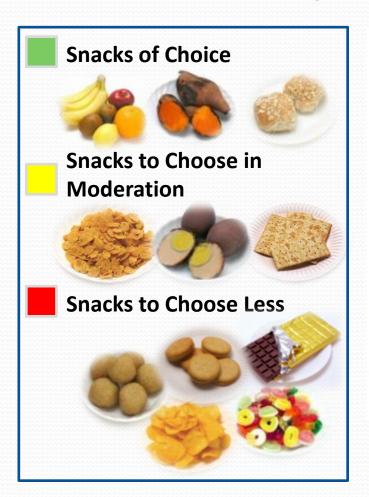


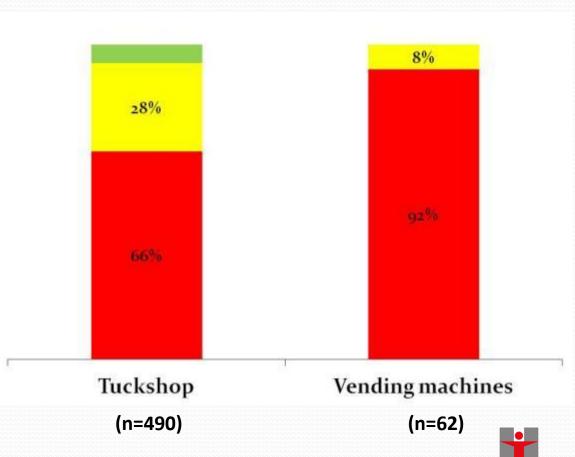


Salty fried rice Fried nuggets No veggies Processed meat
Cake (high in sugar)
Small amount veggies

37

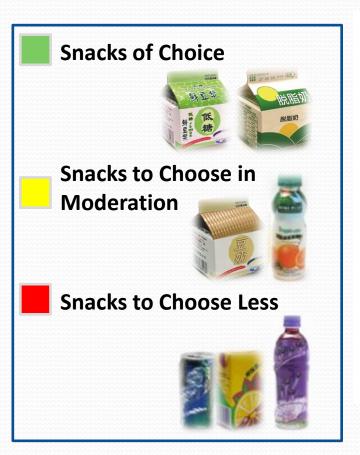
Food items provided in tuckshops and vending machines at primary schools

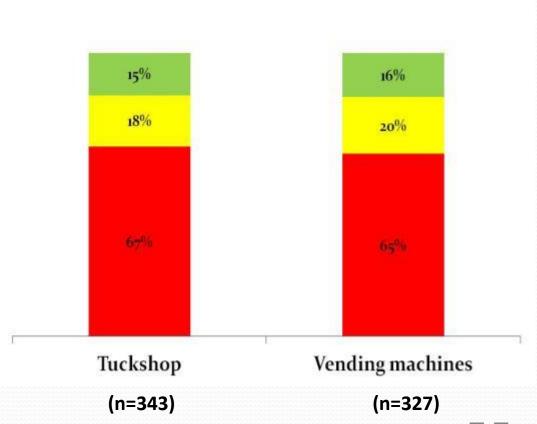




Department of Health

Beverages provided in tuckshops and vending machines at primary schools







Dietary Practices among Primary School Students

 90% snack items taken by students are high fat, high salt or high sugar



Source: Baseline Assessment of Promoting Healthy Eating in Primary Schools: Supplementary Report on Snacks, 2006. Department of Health.



Common high-fat food items @ restaurants





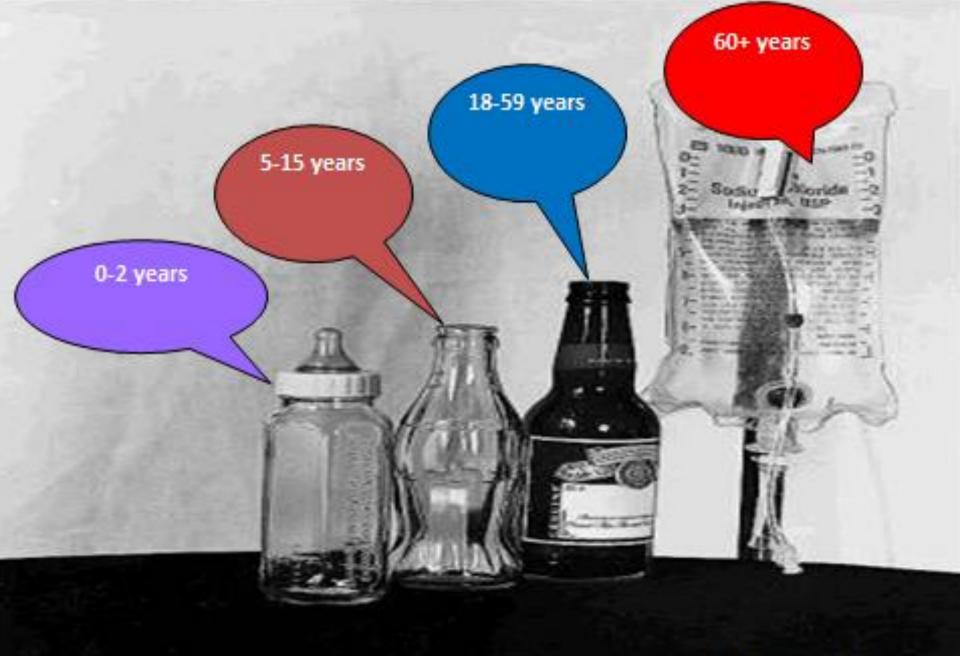
Recommended Daily Intake for adults: 2000kcal, 60g fat, 2000mg Na⁺







Source of photo: Internet Nutritional Info.: CFS, HKSAR Govt.



Source: WHO

Our opportunities

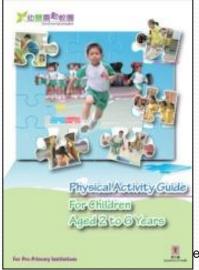
Life-course approach

Population-based strategies

StartSmart@school.hk

- 幼營喜動校園 StartSmart@school.hk
- Preprimary education almost universal and are ideal settings for intervention
- Work with teachers, food preparation staff and parents
- Create a supportive learning and living environment for developing good habits of healthy eating and physical activity
- Development of nutrition and physical activity guidelines







StartSmart@school.hk

- Launched in January 2012
- Jointly with the Education Bureau, the Leisure and Cultural Services Department & others
- Empower teachers & carers
 - Practical resource kits
 - Training sessions
 - Online resources
- Mass media campaign
- > 55% schools have participated











EatSmart@school.hk

- Rising childhood obesity rate
- A new initiative in 2005-06
 Policy Address
 - Promote healthy eating habit among school children to protect the public from lifestyle diseases
- Launched in the school year 2006/07
- Target schools, parents and food suppliers



EatSmart@school.hk

- EatSmart School Accreditation Scheme (ESAS)
 - Joint venture of Education and Health Departments in 2009/10
 - Formulate school policy on healthy eating
 - Engage and build teachers' and parents' capacity
 - Eliminate "red" food items from schools
 - Stop food marketing in schools

To Become an Ideal EatSmart School by Formulating and Implementing the Healthy Eating Policy

Carry out education and publicity

Provide healthy lunch
Provide healthy snacks

Implement school administrative measures

- WHO special award in Oct 2012
- By 31 Jan 2015
 - 231 schools enrolled
 - 104 obtained accreditation status





Health@work.hk 健康在職先導計

interventions



- Completed a 15-month pilot project between 2010 and 2011
- 19 organisations with positive outcome



Suitability

Applicability



Organisational policy interventions

Sustainability

Partnership

THE
SECOND
PHASE

Lifestyle and personal health skills

Supportive environmental measures

Main Focus



Healthy eating



Physical activity



Smoking cessation



Alcohol use



Baby friendly workplace

Main areas

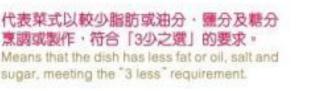
A 3-pronged approach



EatSmart@restaurant.hk

- Survey (2007)
 - ~30% and ~52% of local adults eat out for breakfast and lunch respectively >5x/week
 - Most considered the food items unhealthy
- Launched in 2008
- Work with the catering business and dietetic profession
- ~650 EatSmart restaurants offer at least 5 "More Fruit and Vegetables" and/or "3 Less" Dishes on a regular basis per day





Means that either fruit and vegetables are the ingredients of the dish, or they occupy at as much the amount of meet



EatSmart@restaurant.hk

- BRANDING
 - Delicious
 - Trendy
 - TV / Radio publicity
 - Thematic website
 - Offline publications
 - Printed advertorials
 - Cooking demonstrations











EatSmart@restaurant.hk

- BUILD DEMAND
 - Community programme
 - Collaborating with Healthy cities and community NGOs







- GENERATE SUPPLY
 - Free training
 - Free resources
 - Free publicity
 - Promote image



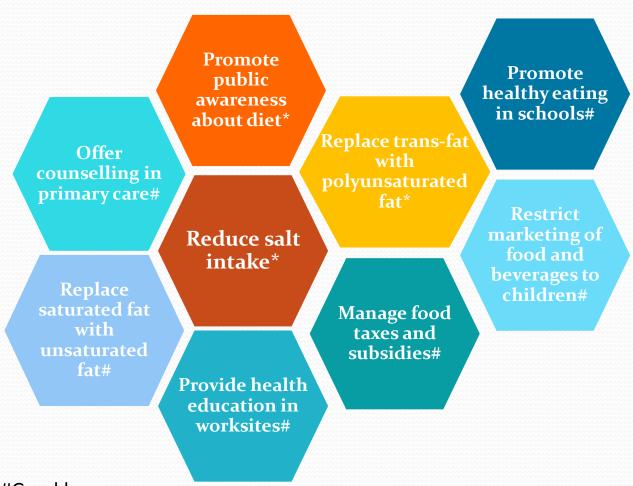




Our opportunities

Life-course approach
Population-based strategies

Population-wide Interventions to Tackle Unhealthy Diet



*Best buys #Good buys

Source: WHO Global status report on noncommunicable diseases 2010



Regulation on Nutrition Labelling (NL)

- Nutrition Labelling Schemes
 - for general prepackaged food (enforced since 2010)
 - Mandatory labelling of "1+7": Energy + 7 nutrients (Protein, CHO, Fat, Sat Fat, Trans fat, Sugars and Sodium)
 - Criteria for making nutrition claims
 - for formula and foods for infants and young children (to be enforced in Dec 2015 / June 2016)
 - Infant formula: mandatory labelling of "1+29" (and nutritional composition)
 - Follow-up formula: mandatory labelling of "1+25"
 - Infant and young children food: mandatory labelling of "1+4"
 - nutrition and health claim: under public consultation

Promotion of NL and Healthy Diet

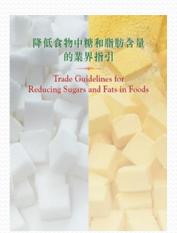
- To consumer
 - Public
 - Schools

To food trade













The End

Thank you