浙江省慢性病综合防控示范区 创建工作及成效 Pilot Sites for Comprehensive Control of NCDs in Zhejiang

方乐, 浙江省疾病预防控制中心

Fang Le, Zhejiang Provincial CDC, China





提 纲/Outline



▶浙江省慢性病流行概况

Epidemic status and trends of NCDs in Zhejiang

- ▶浙江省慢性病示范区创建工作与成效
 Pilot Sites for Comprehensive Control of NCDs and its effects in Zhejiang
- ➤浙江省慢性病防控对策思考
 Countermeasures of NCDs prevention and control in Zhejiang

浙江概况 About Zhejiang



- 》浙江省位于中国东南部,陆域面积10.18万平方公里,有11个市、90个县(市、区),常住人口5477万。
- ➤ Zhejiang Province is located on southeast coast of China, which covers a total land are a of 101,800 sq km. There are 90 counties (including districts at the county level) and 11 cities. The total population of the province is 54.77 million.





浙江疾控简介About Zhejiang CDC



- 》 浙江省疾病预防控制中心原名为浙江省卫生防疫站,成立于1953年,于2000年6月更名。
 - Zhejiang CDC, formerly named Zhejiang Provincial Hygienic and Anti-epidemic Station, was founded in 1953 and renamed in July, 2000.



- ▶ 目前有17个处所,其中职能处室6个,业务处所11个;核定编制440名。 There are 17 departments in our center, including 6 administrative departments and 11 technological departments. The authorized size of staff is 440.
- ▶ 目前全单位在岗人员398名,其中,慢病所21人。
 There are 398 staff in our center, including 21 professionals in Department of NCDs.



浙江省慢性病流行概况

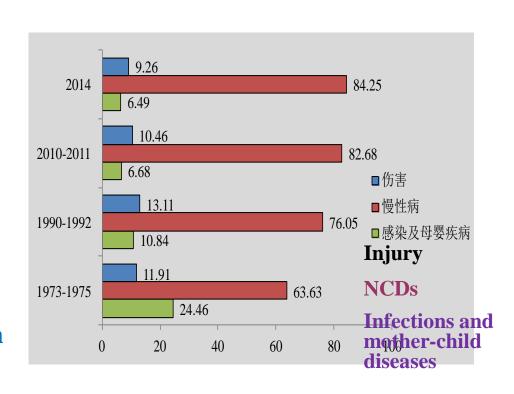


Epidemic status and trends of NCDs in Zhejiang

Changes of cause-of-death composition in Zhejiang (1973-2014)

慢性病已经成为全省居民的 最主要死因,其占总死亡的 比例持续上升,2014年慢性 病死亡的比例 84.25%。

NCDs have become the main cause of death for the residents in the Zhejiang Province, its share of total death continued to rise. The share of NCDs-caused death in 2014 reached to 84.25 %.



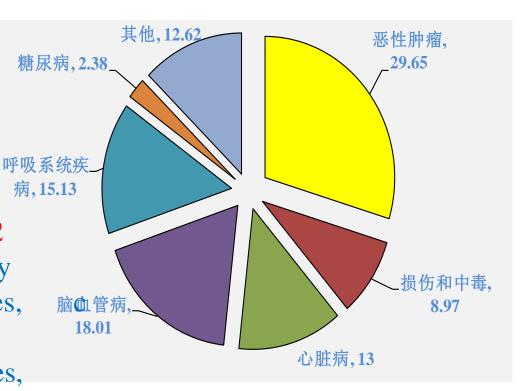
2014年浙江省居民死因构成



Cause-of-death composition of Zhejiang in 2014

2014年全省居民死亡率为 638. 22/10万(城市611. 34/10万, 农村653. 33 /10万),慢性病死 亡率521. 16/10万,其中恶性肿 瘤、脑血管病、呼吸道疾病、 心脏病、糖尿病占总死亡的 78. 18%。

Mortality of residents was 638.22 /100,000 in 2014, NCDs mortality was 521.16/100,000, malignancies, erebro-vascular diseases, respiratory diseases, heart diseases, diabetes accounted for 78.18% of the total death.

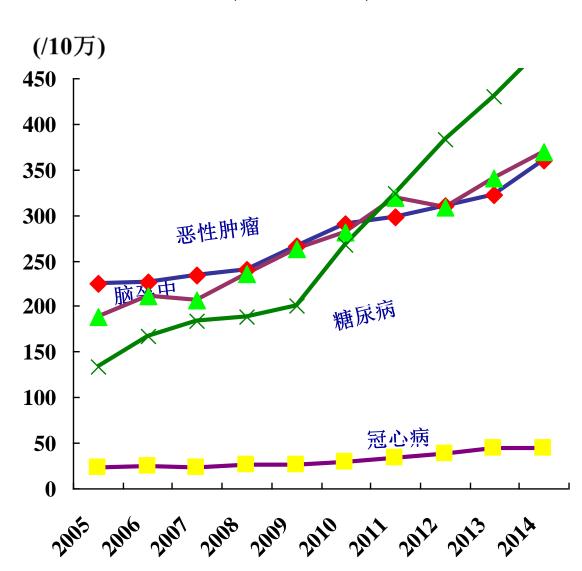


四种主要慢性病<mark>发病率</mark>的变化(2005-2014年) Trend of incidence rate of four main NCDs (2005-2014)



2 0 1 4 年 脑 卒 中、 糖尿病、恶性肿瘤、 冠心病急性事件报告 发病率较2005年分别 上升95.88%、261.38%、60. 09%、93.47%。

In 2014, reported incidences of stroke, diabetes, malignancies and acute coronary events rose by 95.88%, 261.38% and 60.09%, 93.47%, respectively.



Brief Introduction of Pilot Sites for Comprehensive Control of NCDs



▶七大项内容

保障措施、社区诊断、监测、健康教育和健康促进、全民健康生活方式行动、高危人群发现和干预、患者规范化管理。

> Content about this pilot sites (Seven items)

• Supporting measure, community diagnosis, surveillance, health education and promoting, whole population healthy life style action, screen and intervention of risk population, patient management.

浙江省示范区创建工作

Pilot Sites for Comprehensive Control of NCDs in Zhejiang

>Organizational Guarantee

- Making implementation plan of pilot sites for comprehensive control of NCDs in Zhe jiang in 2012. Leading committee and technical committee were founded.
 - Leading committee: leaders from Department of Health, Department of Education, Department of Education, Department of Sports, Department of Civil Affairs, et al.
 - Technical committee: experts from CDC, hospital, prevention centre of NCDs.

浙江省卫生厅 浙江省教育厅文件。 浙江省体育局

浙卫发〔2012〕69号

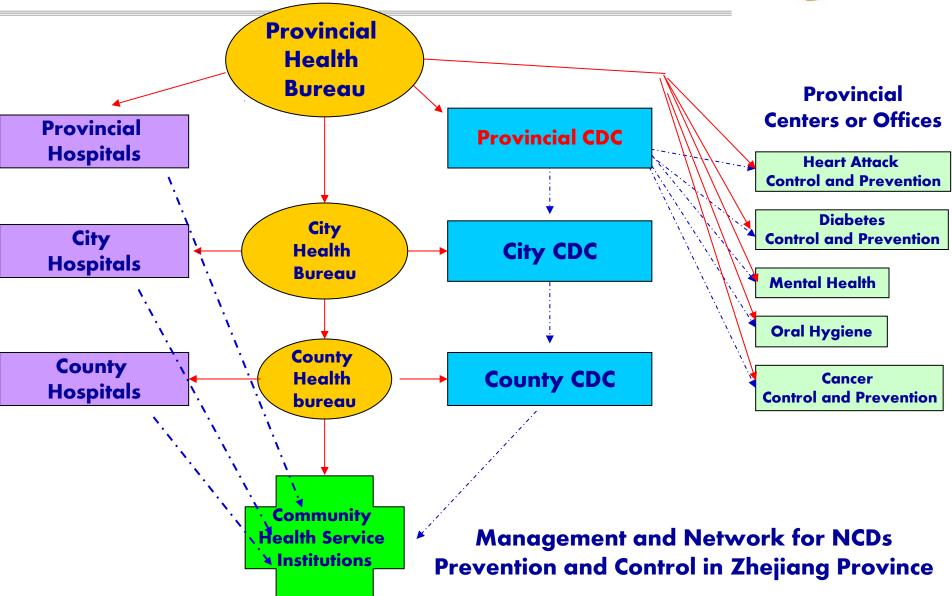
关于印发浙江省慢性非传染性疾病↓ 综合防控示范区创建工作实施方案的通知↓

各市卫生局、教育局、民政局、体育局: 。

为进一步推进我省慢性非传染性疾病综合防控工作,决 定开展浙江省慢性非传染性疾病综合防控示范区创建工作。

Construction of prevention and control system of NCDs in Zhejiang Province





浙江省慢性病防控体系建设

NCDs prevention system establishing in Zhejiang

	governmental health organization∂		Private health organization₽		
₽					
	Num of staff	Num of org $\mathfrak I$	Num of staff₽	Num of orga	
Hospital₽	264406₽	843₽	35985₽	416₽	
Community health org	131893₽	28655₽	33314₽	11829₽	
Public health orge	25994₽	393₽	108₽	5₽	
CDC₽	5523₽	100₽	0↔	043	
Others.	4922₽	169₽	1423₽	16₽	
Total₽	427215:	30060:	70830:1	12266:¹	

数据来源: 2013年浙江省卫生统计年报

Data source: 2013 Zhejiang Health Statistical Annual Report

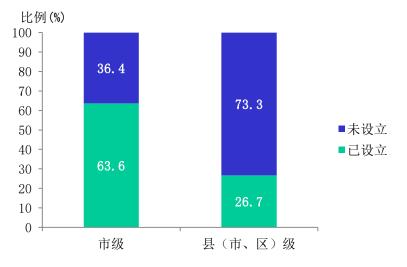
Personnel of NCDs control in CDCs

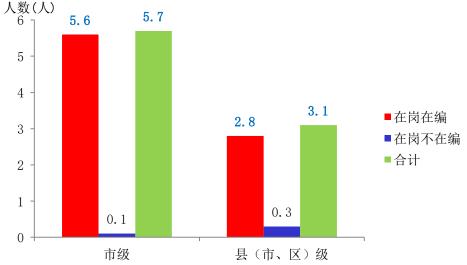


- > There are 21 staffs on-the-job in In NCDs Department in Zhejiang Provincial CDC, including 3 PhD, 13 MD, 5 staffs with senior title.
- > By 2013, CDCs of 7 cities (63.6%), 24 county-level CDCs (26.7%) had established NCDs departments; average staff number was 5.6 at city level and 2.8 at county level.

Establishment of NCDs departments at CDCs of cities and counties

Staffs for NCDs prevention and control at CDCs of cities and counties



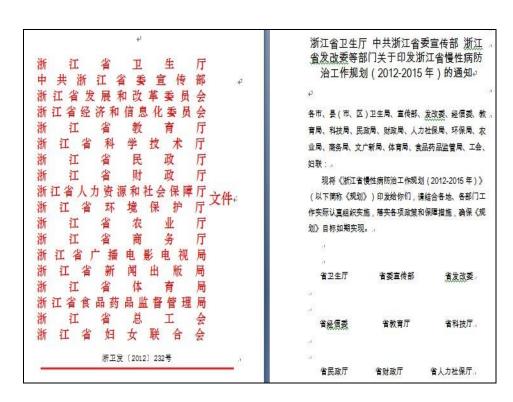


Supporting measure for Pilot sites work



➤ Policy guarantee

• In 2012, 18 departments made NCDs control work plan (year 2012-2015), which sets a goal for pilot sites of comprehensive control of NCDs to cover 30% of 90 counties in Zhejiang.



>Fund guarantee

• Zhejiang Department of Health allocate about 100,000-400,000 RMB for each pilot site county.

Pilot Sites for Comprehensive Control of NCDs in Zhejiang

➤ Capacity Building

- Training and guidance: we compiled a technical manual for pilot site work. We hold more than 4 training program for NCDs control each year.
- Experience expand: we are writing a book with the name "work collection of NCDs pilot w ork in Zhejiang".



Pilot Sites for Comprehensive Control of NCDs in Zhejiang

>Capacity building

- Doctors' community service: more than 1000 doctors at county, city or provincial level hospital will be sent to community health center to work 2 year to guide community doctor.
- Appropriate technology development: we carried out several pilot work of NCDs control, including salt reduction, standard NCDs patient management, et al.





Pilot Sites for Comprehensive Control of NCDs in Zhejiang

>Efforts at provincial level

- NCDs surveillance: we made a lot of efforts to connect hospital healt h information system with our surveillance system to promote efficiency.
- NCDs management: we developed a system for NCDs management, and carried pilot sites for standard patient management in 11cities.
- Whole population healthy life style action: we made our work plan for year 2014-2015, and carried out several projects, such as maintaining healthy weight campaign.

>Performance indicator

 We included above work in the performance indicator for each city-level CDC.

浙江省疾病预防控制中心文件。

浙疾发〔2014〕69号。

浙江省疾病预防控制中心关于。 印发《浙江省 2014 年度市级疾病。 预防控制业务工作评估方案》的通知。

NCDs surveillance and management information system building





Effects of pilot sites in zhejiang



- ➤ To improve multi-departments cooperative mechanism of NCDs control
- ➤ More and more pilot sites are approved
- > Effects of NCDs control are improved
 - NCDs management: hypertension and diabetes
 - Other work

More and more pilot sites are approved

By 2014, totally 22 national pilot sites of comprehensive NCDs control and 30 provincial pilot sites are approved.

浙江省慢性病示范区创建概况(截止 2014 年底) ₽

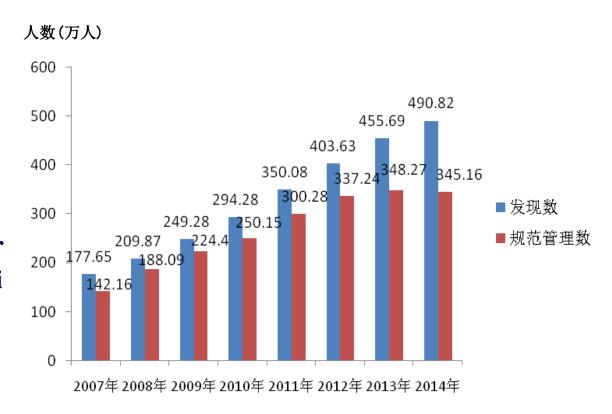
地市₽	县区数	示范区 个数₽	2011 年₽	2012 年₽	2013 年₽	2014 年↩	未创建县区₽
杭州₽	13₽	9 (6) ₽	下城、拱墅⊄	江干、西湖、 <mark>上城</mark> ↩	富阻₽	滨江、萧山、余杭₽	4: 临安、淳安、建德、桐庐
宁波↩	114	9 (8) ₽	江东、鄞州4	北仑、海 <mark>曙</mark> 、 镇海₽	慈溪、宁海、余姚	奉化₽	2: 江北、象山↩
温州₽	11₽	11 (0) 0	ę3	43	<mark>洞头、瓯海</mark> ₽	鹿城、龙湾、永嘉、 平阳、文成、乐清、 苍南、泰顺、瑞安↩	O+2
湖州₽	5₽	4 (0) ₽	÷	ą.	Į.	德清、南浔、吴兴、 长兴₽	1: 安吉₽
嘉兴₽	7↩	6 (4) ₽	海宁₽	桐乡₽	<u>嘉善、南湖</u> ↩	海盐、秀洲₽	1: 平湖↩
绍兴₽	6₽	1 (1) 0	٩	٩	诸暨₽	.	5:绍兴、嵊州、上虞、新昌、 越城↩
舟山↩	4↔	3 (1) ₽	ţ.	42	<u>定海</u> ₽	嵊泗、普陀₽	1: 岱山↩
金华₽	9€	3 (1) ₽	٩	42	<u>东阳</u> ℯ	义乌、永康↩	6:金东、 <mark>婺</mark> 城、兰溪、武义、 浦江、磐安√
衡州₽	6₽	1 (0) 0	ą.	4	<mark>开化</mark> ₽	4	5: <u>攤</u> 江、龙游、江山、常山、 柯城↩
台州₽	9¢ ⁷	4 (1) 🕫	Ţ	47	温峻₽	临海、三门、玉环₽	5: 椒江、黄岩、路桥、天台、 仙居√
丽水₽	9€	1 (0) ₽	ą.	٩	ą.	莲都↩	8: 青田、缙云、遂昌、松阳、 云和、庆元、景宁、龙泉<
合计₽	90₽	52 (22) ↔	5 (5) ₽	7 (6) ₽	13 (0) ₽	27 (11) ₽	38₽

Improved hypertension management



- Hypertension patient discovery: 4.9 million patients are discovered in 2014, more than 1.7 million in 2007.
- Standard management patient number: rose fr om 1.4 million to 3.4 million in 2014.

2007—2014年全省高血压患者发现与规范管理情况



数据来源: 2007~2014年《浙江省社区慢性病综合防治工作统计报表》

Improved diabetes management

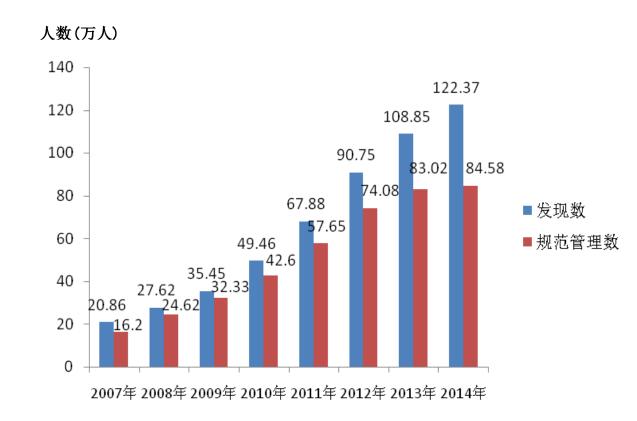


 Diabetes patient discovery: Totally
 1.2 million patients are found in 2014, more than 0.2

million in 2007.

• Standard patient management: 845,000 patients are managed in 2014, more than 160.000 patients in 2007.

2007—2014年全省糖尿病患者发现与规范管理情况



NCDs control efforts in Zhejiang



- ➤ Management of hypertension and diabetes: in 2014, standardized management rate and control rate of hypertension were 73.65 % and 61.55 % respectively, and the rates for diabetes were 73.1 1 % and 57.53% respectively;
- ➤ Management of high-risk group: the numbers of registered and being managed risk people with hypertension were 1.5 million and 1.3 million, the numbers for diabetes were 1 million and 930 000;
- > Healthy lifestyle for all: 90 counties, 100% coverage;
- ➤ **NCDs monitoring:** by 2009, entire coverage for monitoring the cause of death and NCDs was formed for the whole Province.

浙江省慢性病防控现状与小结(1)

Current situation and summary of NCDs control in Zhejiang

- ▶ 慢性病防控现状/Current situation of NCDs control work
 - □慢性病"三率": 高死亡、高发病、高患病; 发病和患病率 持续攀升, 死亡率近几年则基本维持平稳;
 - <u>"3 rates" of NCDs</u>: high mortality, incidence and prevalence; the incidence and prevalence keep rising, mortality is basically flat recent years;
 - □ **行为危险因素**:流行率仍处于高水平(其中:吸烟、饮酒率略有下降,体育锻炼维持不变);
 - <u>Behavioral risk factors</u>: prevalence was still high (smoking and drinking rates decline slightly and physical exercise rate remains unchanged);
 - □ **慢性病其他影响因素**:人口老龄化加剧;防控体系仍不足以满足慢性病防控需要。
 - Other influence factors of NCDs: aging; the prevention and control system is still not enough to meet the need of NCDs control work, etc.
- ▶ 小结: 需继续推进慢病防控工作,以减缓慢性病攀升趋势。
 - Summary: the NCDs control work still needs to be pushed forward to decrease the rising trend of NCDs.

浙江省慢性病防控现状与小结(2)

Current situation and summary of NCDs control in Zhejiang

- ▶ 政策倡导(医改、健康浙江、健康城市)
 Government promotion (medical reform, healthy Zhejiang and healthy city)
- ▶ 加强防控体系建设 (整合、培训、指导、考核)
 Strengthen the construction of prevention and control system (integration, training, guidance and evaluation)
- ▶ 推进全民健康生活方式行动(烟、酒、膳食、运动) Push healthy lifestyle action for all (cigarette, wine, diet and exercise)
- ➤ 落实基本公共卫生服务项目,提高慢性病发现率、知晓率、管理率、控制率
 Implement the basic public health services, increase the discovery, awareness,
 - management the basic public health services, increase the discovery, awareness management and control rates
- ▶ 大力开展危险因素干预(血压、血糖、超重/肥胖、血脂)
 Carry out extensive risk factors intervention (blood pressure, blood sugar, overweight/obesity and blood lipids)
- ➤ 加强慢性病监测,把握重点,有效干预,及时评价 Strengthen the NCDs monitoring, grasp the key point, intervene effectively and evaluate timely

