

WHY CHRONIC DISEASE PREVENTION MATTERS

The Human and Economic Toll

Chronic diseases are among the most common and costly of all health concerns worldwide – and the toll is significant in both human and economic terms. Chronic diseases, such as heart disease, cancer, stroke, and diabetes, are constant, prolonged medical conditions that require ongoing care when a cure is not possible.



1 in 2

Americans have at least one chronic disease¹

About half of all adults in the U.S. have at least one chronic disease, and the majority of U.S. health care spending goes to treat these types of conditions.¹ Moreover, the numbers of new cases of heart disease, stroke, and diabetes alone are projected to increase 10 times between 2010 and 2020.²

In Texas, over half of the ten leading causes of death are chronic diseases:³

Heart Disease (the #1 cause of death in Texas)

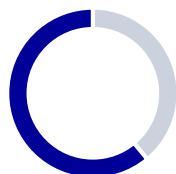
Cancer (#2)

Chronic Lower Respiratory Disease (#3)

Stroke (#4)

Diabetes (#7)

Kidney Disease (#9)



Nearly 2/3

of all deaths in Texas are due to chronic disease⁶

For all but the top two, the mortality rate from chronic disease is higher in Texas than in the U.S. as a whole.³ People who live with a chronic disease every day often require continuous, complex, and costly health care. In one year alone, over \$34 billion in hospital charges in Texas were related to just three chronic diseases: heart disease, cancer, and stroke.⁴



Half of U.S.

deaths can be traced back to tobacco use, poor diet, and physical inactivity⁷

Chronic disease often leads to ongoing functional impairment or disability, and is a prime culprit in *premature* death. In Texas, over 7,000 years of productivity are lost as a result of premature death.⁵

The Policy and Fiscal Opportunity

Almost all chronic diseases have the same three risk factors: tobacco, poor nutrition, and physical inactivity.⁷ These risks can also lead to medical conditions that are common precursors to chronic disease: high blood pressure, high cholesterol, prediabetes, and obesity. All of these risk factors are modifiable, and there lies the opportunity to direct policy and funding decisions that support healthy lifestyles.

Like all Americans, Texans struggle with these risks. Among adults in Texas, 18% are smokers; 83% are not meeting recommendations for a healthy diet; and 27% are physically inactive.⁸ Moreover, almost 1/3 of adult Texans are obese, and almost 1/3 have hypertension.⁸

Though these data are concerning, they are also an unprecedented opportunity for curbing chronic disease. Unlike genetics or age, which are also risk factors but cannot be altered, tobacco, poor nutrition, and physical inactivity are 100% preventable through individual behavior change and public health action.

Chronic disease may never be fully eliminated, but the number of new cases each year can be reduced, and their onset can be delayed. Curbing the chronic disease curve will help prevent premature death and disability, and it will cut health care spending in Texas and worldwide.

¹Centers for Disease Control and Prevention (CDC), National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP). <http://www.cdc.gov/chronicdisease/overview/index.htm> (Accessed May 28, 2014). ²Trust for America's Health (TFAH). A Healthier American 2013. January 2013. Projected increases due to obesity rates continuing unaltered. ³Texas Department of State Health Services System (TDSHS) Health Status of Texas. October 2014. ⁴TDSHS. Long Live Texans. <http://www.longlivetexas.com/index.php/site/the-cost>. (Accessed May 28, 2014). ⁵United Health Foundation. America's Health Rankings: Texas (Accessed May 28, 2014). ⁶TDSHS. Strategic Plan (2013-2017). July 6, 2012. ⁷It is estimated that 50% of all deaths in the U.S. can be traced back to these three causes. Source: Institute for Health Metrics and Evaluation. The State of US Health: Innovations, Insights, and Recommendations from the Global Burden of Disease Study, 2013. ⁸TFAH, Investing in America's Health 2014. May 2014.

WHAT WORKS TO PREVENT CHRONIC DISEASE

Big Actions on Root Causes

Zeroing-in on the root causes of tobacco use, poor nutrition, and physical inactivity is the “Winnable Battle” in preventing chronic disease.⁹ Decades of research and practice have built a solid evidence base of *how* to zero-in on these causes. A review of key national and state compendia¹⁰ reveals a consensus package of what works to prevent chronic disease by pushing the needle on each root cause. These strategies focus at the policy and population level, where the greatest and most equitable impacts can most often be made:



TOBACCO AVOIDANCE

100% smoke-free policies in workplaces, restaurants, schools, and public places

Increasing the unit price of tobacco

Scaled-up referrals to the Quitline

Mass-reach anti-tobacco media campaigns

Tobacco cessation interventions using cell phone technology

Health insurance coverage for tobacco cessation

Full enforcement of the Federal Drug Administration's Tobacco Control Act



HEALTHY EATING

Standards for meals in schools, early child, and out-of-school-time settings

Healthy food options at worksites

Incentived healthy food purchases in nutrition assistance programs (SNAP, TANF)

Breastfeeding-friendly hospitals, worksites, and community locations

Incentives for food stores to locate in urban areas to prevent or eliminate food deserts

Land use planning that supports access to healthy foods, such as community gardens and farmers markets

Reduced sodium, trans-fat, and sugar-sweetened beverage consumption



PHYSICAL ACTIVITY

Active transportation design that supports physical activity, such as walking and biking paths and Complete Streets

Land use planning that supports physical activity, such as trails and parks

Daily physical activity in middle and high school, including a recess policy

Point-of-decision prompts for stairway usage in public places

Mass-reach physical activity media campaigns

Coordinated School Health Programs

On-site physical activity at worksites

Building Bridges to Preventive Care

For people with high chronic disease risk or those with conditions such as obesity, hypertension, or prediabetes, clinical preventive services – those that detect, reduce risk for, and manage early, treatable stages of disease – can be a pivotal turning point away from a life-long chronic condition:

The **U.S. Preventive Services Task Force** recommends screenings for chronic disease and its risk factors across the lifespan, such as blood pressure monitoring in adults to detect hypertension, pap smears in women to detect cervical cancer, and obesity screening in children and teens.¹¹

Chronic Disease Self-Management programs teach people how to control their specific chronic disease in order to prevent complications.¹² For example, people with diabetes are taught how to manage their metabolic rate through diet and exercise, how to take their medications, and how to communicate with their doctor.

Community Health Workers (CHW) are trained community members who connect individuals to the health care system while providing health education and wellness screenings. Texas has a certified CHW program.¹³

Big actions on root causes combined with clinical preventive care creates a continuum of prevention to avoid chronic disease, delay onset or progression, and reduce health care cost.

⁹CDC, Winnable Battles. <http://www.cdc.gov/winnablebattles/index.html> (Accessed May 29, 2014). ¹⁰Sources: (i) CDC, NCCDPHP, The Power of Prevention, 2009; (ii) CDC, Winnable Battles; (iii) Community Preventive Services Task Force, Guide to Community Preventive Services. <http://www.thecommunityguide.org/index.html> (Accessed May 28, 2014). Note: only Recommended interventions were included; (iv) Healthy Living Matters. Community Action Plan. 2014; (v) National Prevention Strategy, U.S. Department of Health and Human Services, Office of the Surgeon General, 2011; (vi) TDSHS System Strategic Plan (2013-2017) and (vii) Long Live Texans. <http://longlivetexas.com/> (Accessed May 29, 2014); (viii) TFAH, A Compendium of Proven Community-Based Prevention Programs, 2013 Edition and (ix) A Healthier America 2013. ¹¹Guide to Clinical Preventive Services, 2012. Agency for Healthcare Research and Quality, Rockville, MD. ¹²Guide to Community Preventive Services. ¹³East Texas Area Health Education Center (AHEC), Community Health Worker Texas. <http://chwtxas.org/>.



Chronic Disease



Food Safety



Emergency Preparedness



Environmental Health



Infectious Disease



Injury



Social, Mental, and Emotional Wellbeing