Noncommunicable diseases (NCDs), including stroke and heart attacks, the largest causes of mortality worldwide, are now firmly on the global agenda through the United Nations 2030 Sustainable Development Agenda. There are several important initiatives underway to address the burden of stroke worldwide and to contribute to the Sustainable Development Goals (SDGs) of reducing premature mortality from NCDs by one third by 2030 (SDG 3.4).

In May 2017, the 70th World Health Assembly sets out the preparation for the third high-level meeting of the United Nations General Assembly on the prevention and control of NCDs, to be held at the United Nations in September 2018. The resolution on this item urged member states to continue to implement related resolutions and commitments. The Assembly also endorsed an updated Appendix 3 of the WHO Global Action Plan on NCDs—a set of cost-effective and other recommended interventions to prevent and control NCDs. Interventions to prevent and treat strokes include drug therapies (including hypertension and glycemic control) to prevent strokes, treatment of acute ischemic stroke with intravenous thrombolytic therapy, anticoagulation for nonvalvular atrial fibrillation, low-dose acetylsalicylic acid for nonhemorrhagic stroke, and care of acute stroke and rehabilitation at stroke units.

To strengthen and scale-up the prevention of heart attacks and strokes, the WHO, the Centres for Disease Control and Prevention USA, the World Stroke Organization, and the World Heart Federation and partners have developed the Global Hearts Initiative—which comprises the MPower package for tobacco control in line with the WHO Framework Convention on Tobacco Control, the SHAKE package for salt reduction, and the HEARTS technical package to strengthen management of CVD in primary health care. Together, the evidence-based interventions recommended by these packages, when implemented in countries, can significantly reduce premature mortality from strokes.

The major burden of stroke appears in low- and middle-income countries. To this end, the World Stroke Organization with the participation of WHO has established the Lancet Neurology Commission for Stroke in Low- and Middle-Income Countries. The commission will map the availability of stroke services and will develop strategies and guidance to complement other efforts in this area. A steering committee with representatives from all regions has been formed, and the selection of worldwide commissioners has commenced. The Lancet Neurology stroke commission plan to release a first report in autumn of 2018, but the project is planned to be a long-term endeavor.

The International Classification of Diseases is the foundation for the identification of health trends and statistics globally and the international standard for reporting diseases and health conditions. It is the diagnostic classification standard for all clinical and research purposes. In the International Classification of Diseases 11 Revision, Cerebrovascular Diseases appear as a single block under Diseases of the Nervous System.

Governmental organizations and nonstate actors have important roles to assist countries in achieving the SDG target 3.4. To achieve this target, there is an urgent need to act. The WHO Global Conference on NCDs pursuing policy coherence to achieve SDG target 3.4 on NCDs, in Montevideo, Uruguay, October 18 to 20, 2017, highlighted the critical links between reducing premature deaths from NCDs promoting mental health and well-being and enhancing policy coherence across areas that impact the governance, prevention, management, and surveillance of NCDs.

Achieving universal health coverage is an ambitious goal, but it is one that can and must be achieved to create a healthier and more equitable world. This will require a health in all policies approach that also addresses the social, economic, commercial, and political determinants of health. The Director General of the WHO, Dr Tedros Adhanom Ghebreyesus, announced: “The right of every individual to basic health services will be my top priority.”

All countries will need to strengthen investments in health systems to expand service provision to reach SDG 3 health targets, but even the poorest can reach some level of universality. Substantial capacity building is needed at country level to strengthen the prevention and management of heart attacks...
and strokes. World Stroke Organization and other partners are actively supporting this area. In view of anticipated resource constraints, each country will need to prioritize equitably, plan strategically, and cost realistically its own path toward SDG 3 and universal health coverage.

Disclosures

None.

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