Countries can do more to prevent harmful alcohol use

An estimated 3.3 million deaths in 2012 were due to the harmful use of alcohol, according to a new WHO report.

Europe is the region with the highest consumption of alcohol per capita and some of its countries have particularly high consumption rates, according to the Global status report on alcohol and health 2014.

While consumption levels have been largely stable over the last five years in Europe, Africa and the Americas, increases have been reported in south-east Asia and the western Pacific.

The report, which was released last month, provides country profiles for alcohol consumption in WHO’s Member States. It reviews progress in their alcohol policy development since they endorsed the Global strategy to reduce the harmful use of alcohol in 2010 and, more recently, set themselves the voluntary target of a 10% reduction in the harmful use of alcohol by 2025.

The report highlights the need for countries to develop policies to reduce harmful use of alcohol – 66 WHO Member States had already done this by the end of 2012 – and to step up national awareness-raising activities (nearly 140 countries reported at least one such activity in the past three years).

It also emphasizes the importance of the health services that are needed to deliver prevention and treatment interventions that are focused on the harmful use of alcohol, and, in particular, the need to step up prevention, treatment and care for patients with alcohol-use disorders and their families.

“More needs to be done to protect populations from the negative health consequences of alcohol consumption,” said Dr Oleg Chestnov, WHO Assistant Director-General for Noncommunicable Diseases and Mental Health. “The report clearly shows that there is no room for complacency when it comes to reducing the harmful use of alcohol.”

http://www.who.int/substance_abuse/publications/global_alcohol_report

Antimicrobial resistance at “alarming levels”

WHO urged countries to step up their surveillance of antimicrobial resistance in a new report released last month. The report, entitled Antimicrobial resistance: global report on surveillance 2014, seeks to provide the most accurate picture possible of the scale of the problem and current state of surveillance around the world.

“The report makes a clear case that resistance to common bacteria has reached alarming levels in many parts of the world indicating that many of the available treatment options for common infections in some settings are becoming ineffective,” writes Dr Keiji Fukuda, Assistant Director-General of Health Security at WHO, in the foreword.

“Surveillance of antibacterial resistance generally is neither coordinated nor harmonized, compromising the ability to assess and monitor the situation,” he writes.

According to the report, which focuses mainly on antibacterial resistance in common pathogens, there are many gaps in our knowledge about pathogens of major public health importance in many areas of health.

Although multidrug-resistant tuberculosis is a growing concern, it is largely under-reported, compromising control efforts, the global report finds. Resistance to antimalarial medicines based on artemisinin has been identified in a few countries. The report warns that further spread or emergence in other regions of artemisinin-resistant strains could jeopardize important recent gains in malaria control.

Meanwhile, increasing levels of transmitted anti-HIV drug resistance have been detected among patients starting antiretroviral treatment.

Last month the World Health Assembly considered a resolution calling for more coordinated action to address the threat due to the rise in antimicrobial resistance.

http://www.who.int/drug_resistance/documents/surveillance_report

WHO calls for coordinated response to polio upsurge

WHO declared last month that the international spread of polio constituted a Public Health Emergency of International Concern or PHEIC. This child is receiving the polio vaccine in Pakistan, one of the countries that pose a major risk to this spread. WHO has called for a coordinated response to the recent upsurge in cases.

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Urban air quality mostly below WHO standard

Air quality levels in most cities that monitor outdoor air pollution are below WHO health standards for safety, putting millions of people at risk of stroke, heart disease, respiratory disease and other health problems.

WHO’s urban air quality database covers 1600 cities across 91 countries, having added 500 cities since 2011. It shows that only 12% of 1.3 billion people covered by the database live in cities where air quality for one key indicator – that of small and fine particulate pollution – complies with WHO guideline levels.

In most cities, where there is enough data to compare the situation today with previous years, air pollution is getting worse. Many factors contribute to this increase, including reliance on fossil fuels, such as coal-fired power plants, an increase in the use of private motor vehicles, inefficient use of energy in buildings and the use of biomass for cooking and heating.

Cities can, however, improve air quality by taking measures such as banning the use of coal for heating buildings, promoting the use of renewable or “clean” fuels for electricity production, and improving the energy efficiency of vehicles and buildings. In cities in developed countries and emerging economies that have adopted such measures, air quality is generally better, the database shows.

“Effective policies and strategies are well understood, but they need to be implemented at sufficient scale. Cities such as Copenhagen and Bogotá, for example, have improved air quality by promoting ‘active transport’ and prioritizing dedicated networks of urban public transport, walking and cycling,” said Dr Maria Neira, WHO Director for Public Health, Environmental and Social Determinants of Health.

http://www.who.int/phe/health_topics/outdoorair/databases/cities

New report draws attention to adolescent health

A new WHO report calls on countries to pay more attention to the health of people aged 10 to 19 years and provides an overview of the sometimes fragile state of adolescent health around the world, as well as the policies that are needed.

According to Health for the world’s adolescents: a second chance in the second decade, depression is the main cause of illness and disability for this age group.

The web-based report, which was released last month, also estimates that worldwide 1.3 million adolescents died in 2012 and that the top three causes of death were: road traffic injuries, HIV/AIDS and suicide.

In addition to publishing updated estimates for mortality and disability-adjusted life years (DALYs) in this age group, the report provides a new synthesis of data on health-related behaviours based on surveys conducted in schools.

It presents new analyses of national health policies, including those on mental health, and the extent to which they pay attention to adolescents. It also looks at how countries can ensure that this key period of life is given adequate attention as they focus on universal coverage of health services.

“The world has not paid enough attention to the health of adolescents,” said Dr Flavia Bustreo, Assistant Director-General for Family, Women and Children’s Health at WHO. “We hope this report will focus high-level attention on the health needs of 10 to 19-year-olds and serve as a springboard for accelerated action on adolescent health.”

Drawing on a wealth of published evidence as well as consultations with 10 to 19-year-olds around the world, the report brings together, for the first time, all the WHO guidance on the full spectrum of health issues affecting adolescents, including: tobacco, alcohol and drug use, HIV, injuries, mental health, nutrition, sexual and reproductive health, and violence.

The report recommends key actions that countries can take to respond to adolescents’ physical and mental health needs.

“This is an important resource for countries in terms of: service provision, the collection and analysis of strategic information, and the policies and interventions that can be implemented through collaboration with other sectors,” Bustreo said.

http://www.who.int/maternal_child_adolescent/topics/adolescence/second-decade/

WHO releases latest health statistics report

Life expectancy has increased since 1990, according to World Health Statistics 2014.

Based on global averages, a girl born in 2012 can expect to live to around 73 years, and a boy to the age of 68. This is six years longer than the average global life expectancy for a child born in 1990.

WHO released its annual updates on health statistics from WHO’s Member States last month.

http://www.who.int/gho/publications/world_health_statistics

Looking ahead

14 June – World Blood Donor Day
28 July – World Hepatitis Day
27–29 August – WHO Conference on Health and Climate, Geneva
23 September – UN Climate Conference at the UN General Assembly, New York