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The future



"Unless current trends are halted or reversed, over a billion people will die from cardiovascular disease in the first half of the 21st century. The large majority will be in developing countries and much of the life years will be lost in middle age. This would be an enormous tragedy, given that research in the last half of the 20th century showed that cardiovascular disease was largely preventable."

Anthony Rodgers, Clinical Trials Research Unit, University of Auckland, New Zealand, 2004

"I never think of the future – it comes soon enough."  
Albert Einstein (1879–1955)

Unlike Einstein, we have to think of the future, and plan now, to reduce the numbers of deaths from coronary heart disease and stroke.

Predictions are by their nature speculative. Nevertheless, this much is certain: the global epidemic of cardiovascular disease is not only increasing, but also shifting from developed to developing nations.

Action can work. There are currently about 800 million people with high blood pressure worldwide. Studies now indicate that in North America, Western Europe, and the Asia-Pacific region, each 10 mmHg lowering of systolic blood pressure is associated with a decrease in risk of stroke of approximately one-third, in people aged 60 to 79 years. Globally, if diastolic blood pressure (DBP) can be reduced by 2%, and by 7% in those with DBP over 95 mmHg, a million deaths a year from coronary heart disease and stroke could be averted by 2020 in Asia alone.

No matter what advances there are in high-technology medicine, the fundamental message is that any major reduction in deaths and disability from CVD will come from prevention, not cure. This must involve robust reduction of risk factors.



*DALYs*  
Disability-adjusted life years combine years of potential life lost due to premature death with years of productive life lost due to disability.

