## Editorial

## Non-Communicable Diseases in Children

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Non-Communicable diseases are now the leading cause of deaths across the world. According to recent statistics, 41 million people are dying each year which accounts for 74% of all deaths. There are 4 major causes contributors to these deaths, CVS (17.9 million), Respiratory (9.3 million), Cancer (4.1 million) and Diabetes (2.0 million) often together called the big 4. Those persons who die because of these and other causes of NCDs before the age of 70 are labelled as premature deaths as they can be potentially avoided. Seventeen million deaths out of these 41 million are premature and 86% of them happen in the LMIC.

The question arises that if all these deaths are taking place primarily in the adult/elderly, why do we need to discuss them in a pediatric forum. The answer to that lies in the fact, that footprints of all these major illnesses are laid during the childhood years, so if we really want to act and reduce the burden of NCDs deaths, the time to address these will be in the pediatric age before they have transformed into some kind of habit which then becomes entrenched and become a personality type.

With constantly evolving urban and sedentary lifestyle has led to reduce physical activity, diet in excess of CHO and fat, increase screen time and use of tobacco to name the few menaces across the globe. The recent obesity trends across the globe has caught up in the LMIC and especially asia pacific region as well.

A common understanding that the risk factors especially related to obesity only influence the affluent class is far from true. A study conducted in Pakistan identified the risk factors across all social strata, citing poor dietary habits and far reduced consumption of fruits and vegetables compared to the recommended intake. Similar findings have been found in National Nutrition Survey. It was also found that contrary to expectations physical activity was less prevalent in both urban and rural children. In addition, the newer challenges and emerging such as use of increase screen usage which is exceedingly used but not limited to adolescent further limits the use of physical activity required across all age children and subsequently as adults.

The impact of NCDs on children is not just limited to their physical health but additionally affects their mental and emotional wellbeing. Children with NCDs may experience social stigma and discrimination, which can lead to psychological distress and affect their social development. Furthermore, the financial burden of managing NCDs can be significant for families, especially low and middle-income countries, where access to healthcare and treatment is generally limited.

In order to address the growing burden of NCDs in children in the Asia Pacific region, a multi-sectoral approach is needed. Governments, healthcare providers, educators, and civil society organizations must work together to raise awareness, promote healthy lifestyles, and provide access to affordable and quality healthcare services.

Education and awareness-raising initiatives can help children and their families understand the importance of a healthy lifestyle and prevent NCDs. Schools can play an important role in promoting physical activity, healthy eating habits, and reducing exposure to environmental risk factors. Healthcare providers can also provide preventive care and early detection of NCDs, as well as affordable and accessible treatment options.

In conclusion, the burden of NCDs among children in the Asia Pacific region is a growing concern that requires urgent action. The impact of NCDs on children can have long-term consequences, affecting their physical, emotional, and financial wellbeing. A multi-sectoral approach is needed to address this issue, involving governments, healthcare providers, educators, and civil society organizations. By working together, we can reduce the burden of NCDs among children and ensure a healthy and prosperous future for all.