

Health is a political decision

Cardiovascular disease continues to have devastating consequences in the health of the world population. The clinical implication of this health problem is shocking: every 26 seconds, a person has a coronary event, and every minute, someone dies of this event. Nearly 38% of the patients who have a heart attack will die for this reason.

With a figure close to 17 million deaths, this is the major cause of mortality all over the world, in addition to being the third cause of years of healthy life lost in 150 million patients, only exceeded by accidents and mental diseases.

For the year 2020, in the underdeveloped world, it is expected that 71% deaths will occur due to coronary artery disease, 75% due to cerebrovascular disease, and 70% due to diabetes.

A very important fact in epidemiology is that 80% of all deaths occur in mid- and low-income countries. In 1990s, it reached just 64%. This growth in underdeveloped countries is the result of the increasing of poverty rates, among other reasons.

In our country, most of the risk factors are concentrated in lowest-income populations, and in those with low educational levels. Belonging to this most unfavourable sector is in itself a risk factor.

The occurrence of high blood pressure is 28% for low-income individuals, and 19% for high-income individuals. Obesity rate is 21% for people who have not finished elementary school, and 11% for those who have completed high school.

With data from more than 20,000 people in 52 different countries, the INTERHEART Study provided clear evidences about the major risk factors associated with myocardial infarction. These factors are common to all populations, regardless of their race or the continent in which they live.

Inadequate diet, lack of exercise, smoking, and stress are the common scourge for all the regions of the world. This reality demands a great effort from the governments, the society, and the medical community, in order to join strategies to fight against this serious problem. Health is key to economic growth and social development, and a requirement to increase productivity and improve social equity.

Aiming at improving health and quality of life, many companies open gyms in workplaces, offer only healthy food in their canteens, and provide free information about nutrition to their workers and families. Companies also offer professional guidance about stress management, and other health promotion services.

Why are companies interested in making additional expenses to promote well-being? Because it is an investment with a significant return. For each dollar invested in health prevention and promotion programs, companies save between three and eight dollars in health cost reduction, and increase productivity, as a result of low absenteeism from work.

At present, prevention is one of the keys to improve a population's health. By implementing prevention, extraordinary outcomes are achieved at very low cost. In the United States, with only 5% of the federal health budget invested in standard prevention practices, a significant reduction of the prevalence of various cardiovascular risk factors was achieved over the past 30 years. This reduction is attributed to the efforts in promoting health, especially to public education campaigns.

In Argentina, major prevention campaigns have been missing. There are no coherent and sustained public policies in this regard.

In Ramón Carillo's words, "health is a political decision"; this means to understand that health is not an expenditure but an investment. When the State, through its responsible agencies, does not carry out concrete actions to prevent endemic diseases, non-governmental organizations have the moral obligation of provide answers to population problems.

The Argentine Society of Cardiology considers that they must contribute to a healthier life for society. The Argentine Society of Cardiology, together with its community wing, the Argentine Cardiology Foundation, has planned, developed, and implemented an awareness program on coronary risk factors.

The planned set of activities are focused primarily on recognizing the problem; this is indispensable to pass on to the second stage, or to modify or change it.

Through the mass media and with the presence of medical and paramedic professionals in strategic points of the country, we will try to increase awareness in people about the urgent need to know their vascular risk, in order to prevent diseases that cause thousands of victims every year. Many of these favorable tendencies to modifying risk factors that are currently under development, have occurred as a result of growing awareness among people about their benefits. These measures require that the team of physicians specialized in cardiovascular care join this educational task.

The success in health education will depend on the continuity of these social actions, and on the time

dedicated to our patients in our daily medical practice.

We must not forget that to seed education is to harvest health.

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