

There are no "buts," "ifs" or "howevers" about this declara-

The government has argued that the main problem with the

purse-strings and not priority in time or order of merit. At the same time, we know that

In sum, the problem is not with the constitutional principle; it is with how the government actually

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Chronic diseases: New challenge for the Ugandan health system

When I was young, many people in Kampala walked or cycled to work. There were a few matatus (taxis) and very few cars. It didn't make us very productive but, we now know, it fended off many of the diseases that are so common across Europe and North America.

In the past 25 years, the population of Kampala has more than doubled. Traffic gridlocks on the roads for much of the day. People laugh at the idea of cycling to work – in any case, it would be far too dangerous.

The growth of African cities is driving the growth of African wealth. But urbanisation and economic development are unfortunately driving the growth of noncommunicable diseases (NCDs). These chronic diseases such as hypertension, cancer and diabetes, are associated with the poor lifestyles many people adopt when they move to the city. The

population is increasingly eating unhealthy, not exercising, smoking tobacco and abusing alcohol. Many are unaware that this type of lifestyle is storing up future health problems for them.

This growth in NCDs is a big issue for Uganda and its health system. Today, 25 per cent of Ugandans die from an NCD, and the proportion is increasing every year. But we are still fighting the battle against many infectious diseases such as malaria, meningitis and HIV, which are still the biggest killers of people in Uganda. Alongside these well-known diseases, we are seeing the emergence of chronic illnesses, which are silent killers – often people don't know they have high blood pressure until they have a stroke or a heart attack. Nearly a quarter of Uganda's adult population has raised blood pressure. More than 75 per cent of these people don't know they have a problem, and are not on a



DISEASES

Anthony Mbonye

medication to control their hypertension.

The Ministry of Health has already established an NCD programme to coordinate efforts around prevention and control. But getting the healthcare resources we need for NCDs is challenging given that infectious diseases are still so prevalent. Government resources are limited, so NCDs will also need to fight for their fair share despite their growing importance.

We are working together with partners and other stakeholders to draft policies and guidelines geared to prevent and control NCDs. The Minister of Health, Dr Jane Aceng, is very supportive of these efforts, as is the President. But we need more partnerships to fight NCDs.

We have just signed a memorandum of understanding with the multinational healthcare company, Novartis, to help us to improve our capacity to diagnose and care for people with NCDs. It will also increase the availability of affordable treatment.

The agreement with Novartis means that Uganda will become the fourth country in Africa to roll out Novartis Access. The programme offers a basket of 15 generic and patented medicines to address cardiovascular diseases, diabetes, respiratory illnesses, and breast cancer. The medicines in the portfolio have been selected based on their medical relevance: They are either included in the WHO Model List of Essential Medicines, or belong to the most frequently prescribed medicines in these disease areas. All 15 treatments in the basket will cost the public sector only \$1 (Shs3,500) per treatment per month.

The government is committed to making these medicines available free of charge to patients in public health facilities. Products will also be available through the Uganda Muslim, Protestant and Catholic Medical Bureaux where patients are expected to pay no more than \$1.60 (about under Shs6,000) per treatment per month. We expect

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to receive the first shipment of treatments at the end of this year. Novartis Access will also support capacity-building activities on the ground toward NCD prevention, diagnosis and treatment.

One of our key strategic priorities is to strengthen a multi-sectoral approach to prevent and control NCDs and their risk factors. We hope our new partnership with Novartis will help to accelerate and scale up the national response to the NCD epidemic in Uganda. But we know we will need many more public-private partnerships to eventually tip the situation.

Prof Mbonye is the acting director general of health services.