

EDITORIAL**The Impact of COVID-19 on Non-Communicable Diseases****Abraham Haileamlak, MD, Professor of Pediatrics and Child Health**Doi:<http://dx.doi.org/10.4314/ejhs.v32i1.1>

Over the past two to three decades, the world observed a significant shift of global burden of disease from communicable diseases to non-communicable diseases (NCDs) (1). In high income countries this is happening due to the aging population. In low- and middle-income countries (LMICs), this is happening because of epidemiologic transition due to urbanization and lifestyle change. Similarly, a steady rise in deaths due to NCDs is evidenced globally (2). LMICs are in triple burden where communicable diseases, undernutrition and NCDs coexist together (3).

Noticing the disease burden shift, in 2011, global leaders met at the UN in New York to set an international agenda on non-communicable diseases (NCDs), which cause three-quarters of global deaths. In 2015, Sustainable Development Goal 3.4 set the ambitious target for countries to reduce their risk of premature mortality from NCDs by a third relative to 2015 levels by 2030 (4). Although NCDs have received plenty of political attention, action has clearly been inadequate. The Lancet NCD Countdown 2030, published on Sept 3, reveals that, among high-income countries, only few high-income countries are on track to meet this target for both men and women if they maintain or surpass their 2010-16 average rates of decline (5).

The emergence of COVID-19 impacted NCDs in various ways. The COVID-19 pandemic contributed for the rise of mental health illnesses (6-8). A modelling study suggests that, worldwide, one in five persons are at an increased risk of severe COVID-19 should they become infected, mostly as a result of underlying NCDs (9). Patients with certain chronic illnesses are more likely to be

affected by Covid-19. More importantly, once they do get infected by the virus, patients with chronic illnesses have a much higher likelihood of having worse clinical outcomes (developing a more severe form of the disease or dying) than an average patient (10). The enormous efforts to deal with COVID-19 have also disrupted the regular care often required by patients with NCDs.

A rapid assessment done 2020 by WHO found that 75% of countries reported interruptions to NCD services. Excess deaths from the disruption caused by COVID-19 might make any gains against the virus a pyrrhic victory (11). The disruption of services has been particularly problematic for those living with NCDs who need regular or long-term care.

However, to build back better health systems during and after the crisis, governments need to commit and ensure that people living with NCDs do not experience disruptions to essential health services. Countries need to tackle the impacts of NCDs in their national COVID-19 response and preparedness plans to develop strengthened health systems with integrated NCD care for future health emergencies. NCD prevention and management is the insurance policy to improve population health and mitigate the impact of any future crisis (11). Evidence also points out to 'business as usual' disease management model, although with greater supervision. However, given the ongoing Covid-19 vulnerabilities among people with NCDs, prioritizing them for the vaccination process should also figure high on the agenda on health authorities (10).

The current issue of the Ethiopian Journal of Health Sciences, the first regular issue for the year 2022, contains an editorial, sixteen original articles, two review articles, six case reports and a letter to the editor focusing on various topics. Four articles in this issue deals with NCD while five are dealing with Corona Virus Disease 2019.

I invite readers to read through these articles and appreciate or utilize the contents. I also urge readers to forward comments and suggestions to the editor or the corresponding authors.

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