

The Partnership to Fight Chronic Disease

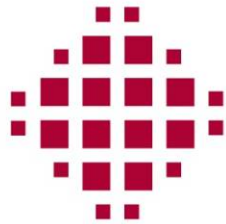
An Overview of the Program and Progress to Date

Presentation for Mental Health America
November 2007



PARTNERSHIP TO FIGHT
CHRONIC DISEASE

The Partnership to Fight Chronic Disease (PFCD) Is:



PARTNERSHIP TO FIGHT
CHRONIC DISEASE

- ✓ Educating Voters, Campaigns, Policy Leaders
- ✓ Mobilizing Grassroots Efforts
- ✓ Challenging Candidates and Policy Leaders

**Focusing Health Care Reform Efforts on the Primary Problem
Affecting Americans Health and the Affordability of Care:
*Rising Rates of Preventable Chronic Disease***

PFCD Represents a Diverse Mix of Distinguished Individuals and Groups with a Commitment to Improving Americans' Health



PARTNERSHIP TO FIGHT
CHRONIC DISEASE

Honorary Chair: Richard Carmona, Former U.S. Surgeon General



Executive Director: Ken Thorpe, Professor and Chair, Rollins School of Public Health, Emory University, Former Deputy Assistant Secretary for HHS

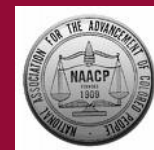
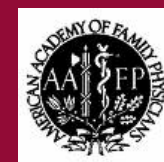
More than 80 partner organizations, including:

- Patient and provider groups
- Civic groups
- Business and labor groups
- Major employers
- Public and private health groups
- Academic institutions

An active, executive level advisory board:

- Working groups focused on*
- Grassroots and Communications
 - Policy

Third advisory board meeting will be held December 2007



The PFCD is raising visibility of the issue, as well as suggesting substantive solutions...

September 25, 2007

PFCD Policy Platform Recommendations

- ✓ Advance sustainable “Next Generation” chronic disease prevention, early intervention, and management models throughout the health care system and public health infrastructure
- ✓ Promote healthy lifestyles and disease prevention and management in every community
- ✓ Encourage and reward continuous advances in clinical practice and research that improve the quality of care for those with prevalent and costly chronic diseases
- ✓ Accelerate improvements in the quality and availability of health information technology (HIT) throughout the health care system
- ✓ Reduce health disparities by focusing on barriers to good health

October 2, 2007



MILKEN INSTITUTE



PARTNERSHIP TO FIGHT
CHRONIC DISEASE

PFCD and the Milken Institute released a groundbreaking study about the economic burden of Chronic Diseases

Address <http://www.chronicdiseaseimpact.com/>

An Unhealthy America: The Economic Burden of Chronic Disease

[Home](#) [EBCD Index](#) [Stats by Disease](#) [Intergenerational Impacts](#) [Risk factors](#) [Methodology](#)

In its groundbreaking study, “An Unhealthy America: The Economic Impact of Chronic Disease,” the Milken Institute details the enormous financial impact of chronic disease on the U.S. economy — costs, but lost worker productivity — today and in the decades ahead. It also describes the huge savings if a serious effort were made to improve Americans’ health. Click on any of the links on this page by that category: [View Full Report](#) [View Executive Summary/Research Findings](#)

United States

Over 162 million cases of seven common chronic diseases — cancers, diabetes, heart disease, hypertension, stroke, mental disorders, and pulmonary conditions — were reported in The United States conditions shorten lives, reduce quality of life, and create considerable burden for caregivers. The following map shows how states compare based on the prevalence of the seven common chronic

Select a State [Download US Fact Sheet](#) [Download All State Fact Sheets\(pdf file\)](#)

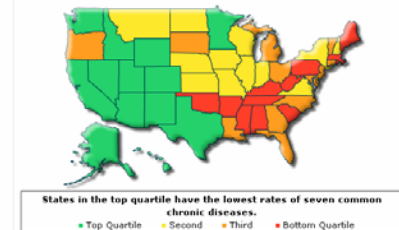
Reported Cases of Common Chronic Diseases 2003

Millions (As percent of population)
Cancers: 10.6 (3.6%)
Diabetes: 13.7 (4.7%)
Heart Disease: 19.1 (6.6%)
Hypertension: 36.8 (12.6%)
Stroke: 2.4 (0.8%)
Mental Disorders: 30.3 (10.4%)
Pulmonary Conditions: 49.2 (16.9%)
Total Reported Cases: 162.2 (55.8%)

United States Economic Impact

2003
(Annual Costs in billions)
Treatment Expenditures: \$277.0B

Milken Institute Chronic Disease Index



www.chronicdiseaseimpact.com

At the National Level, a Successful May 15 Launch Spurred Media Interest in the Issue and the Group's Mission



Launch Details:

- National and “inside the beltway” press and key political and policy elites attended
- More than **75 representatives** of other key partners in attendance and available to the press
- Roundtable with **Ken Thorpe, Mark McClellan, Billy Tauzin**, and Advisory Board Members

Modern Healthcare



kaisernetwork.org

The Washington Post

Results:

- Print coverage in more than **10 national and trade publications**, including the *Associated Press*, *Congressional Quarterly*, and the *Washington Post*
- Coverage by **12 influential blogs**; including *EyeOn08* and *Chronic Babe*



PFCD is Reaching Key Audiences Through an Integrated Campaign Operating at the National and State Levels



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Earned
Media and
Events

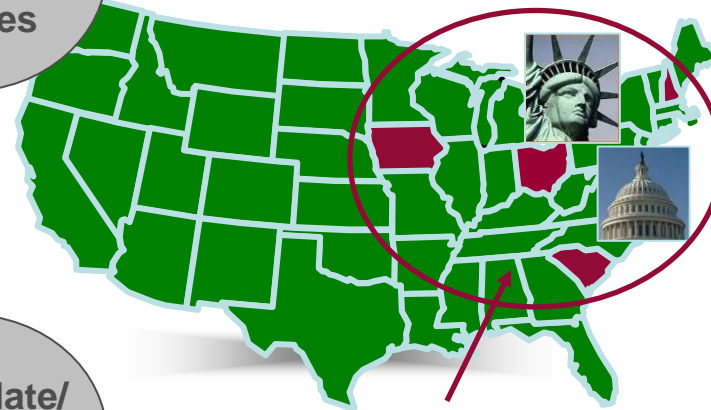
Policy and
Research
Studies

PFCD Tactics Are
Helping Raise
Awareness of
Chronic Disease
Among Target
Audiences

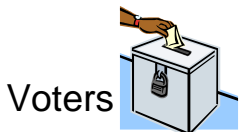
Grassroots
and
Alliance
Building

Candidate/
Policymaker
Outreach

Efforts Are Targeting the
Most Important Areas for
Changing the National
Debate and Influencing
Policymakers



States with key primary
or caucus, and the
largest and most
influential media
markets



Voters

Candidates



Media

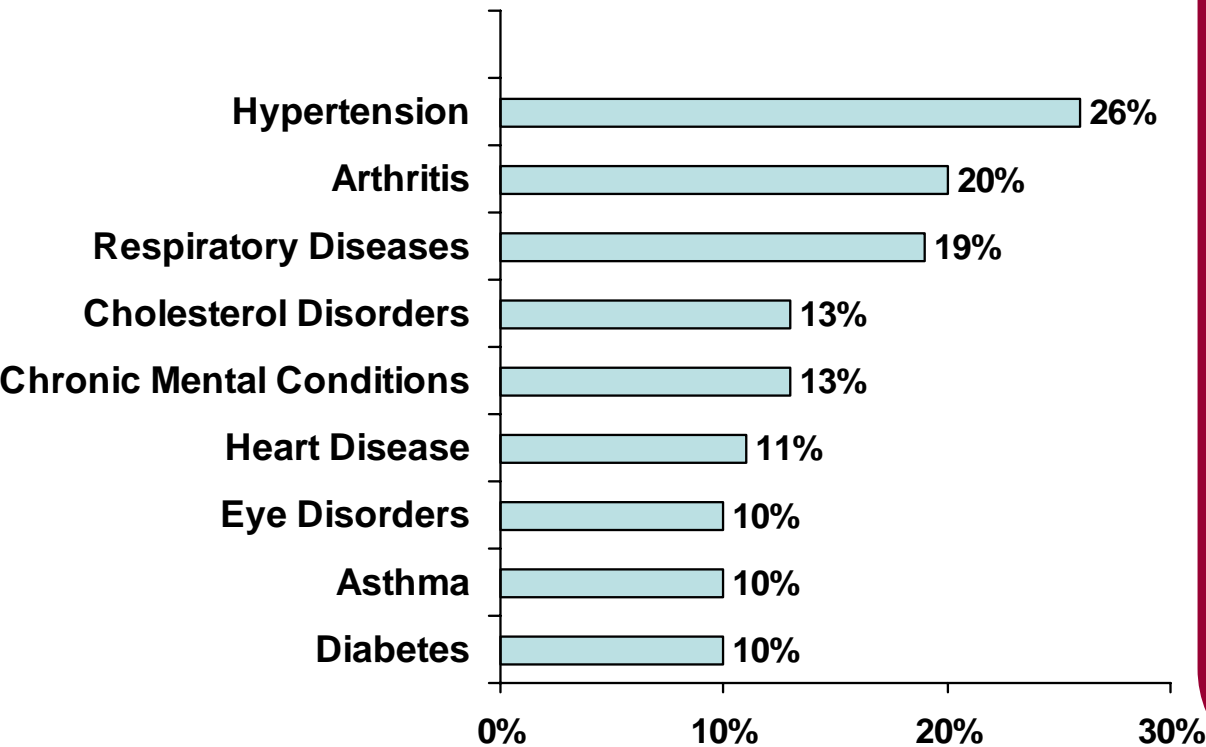


Key
Opinion
Leaders



The Most Common Chronic Conditions in America

Percent of Noninstitutionalized People with a Certain Chronic Disease in 2001



The prevalence of specific conditions varies by age

- Among those over 65, 51% suffer from hypertension.
- Unlike those 65 and over, mental health conditions are a leading chronic condition for adults ages 18 to 64, with 16% being diagnosed with such conditions.
- Among children, respiratory diseases and asthma are the most common chronic disease, with 35% and 25% respectively, being affected.

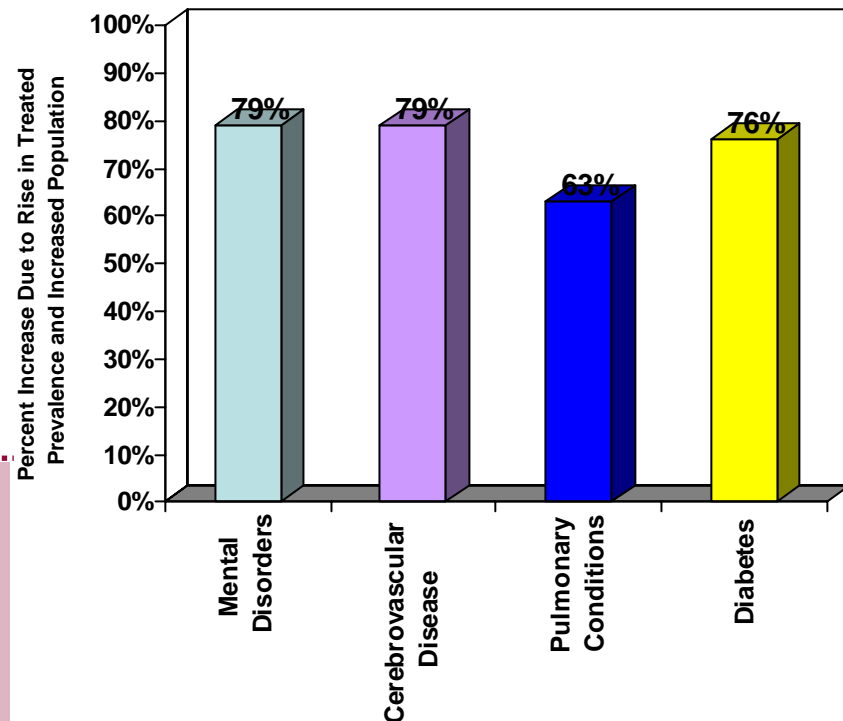
Changes in Disease Prevalence and Population are Driving up Health Care Costs

Increase in spending for four of the most costly medical conditions, which are chronic, are largely due to increase in treated prevalence and population growth

Discussion of the magnitude of health care spending growth usually does not take into account changes in disease prevalence and demographic factors behind spending growth

--Kenneth Thorpe, Emory University

Percent Change in Spending Due to Rise in Treated Prevalence and Increased Population, 1987-2000



The Economic Costs of Chronic Diseases due to Losses in Productivity are High

Arthritis - is a major leading cause of missed work days due to chronic pain conditions.¹

- It is estimated to cost \$22 billion in medical care costs and \$82 billion in total costs which include medical care and lost productivity.²

- According to the CDC, work limitations due to arthritis affect more than 4% of the general population and 30% of the population with arthritis.⁵



Diabetes

-cost roughly \$40 billion due to missed work days, premature mortality, and disability according to the American Diabetes Association .⁴



Asthma- is one of the leading causes of missed school days

- In 2003, 12.8 million school days were missed due to asthma among more than four million children who had at least one reported asthma attack in the previous year.”⁶

Cardio Vascular Disease

- cost over \$129 billion in lost productivity in 2001.²

- The economic costs of cardiovascular disease in 2003 were estimated at \$351.8 billion²

Depression

-causes an estimated 10 to 90 missed workdays per year.³

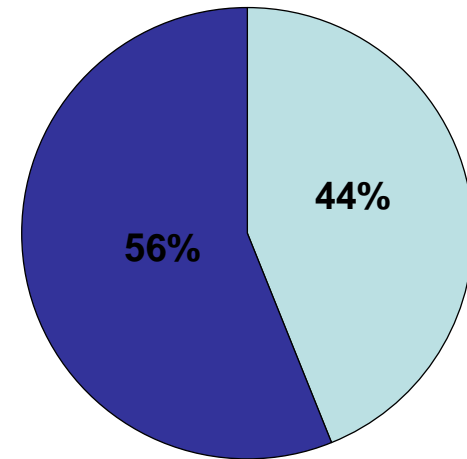


Many Americans Are Not Getting the Care They Need

Only about half of all patients are receiving recommended care for chronic conditions

Percent of Recommended Care Received for Chronic Conditions

Hypertension	64.7%
Congestive Heart Failure	63.9%
Cerebrovascular Disease	59.1%
Depression	57.7%
Asthma	53.7%
Hyperlipidemia	48.6%
Diabetes	45.4%

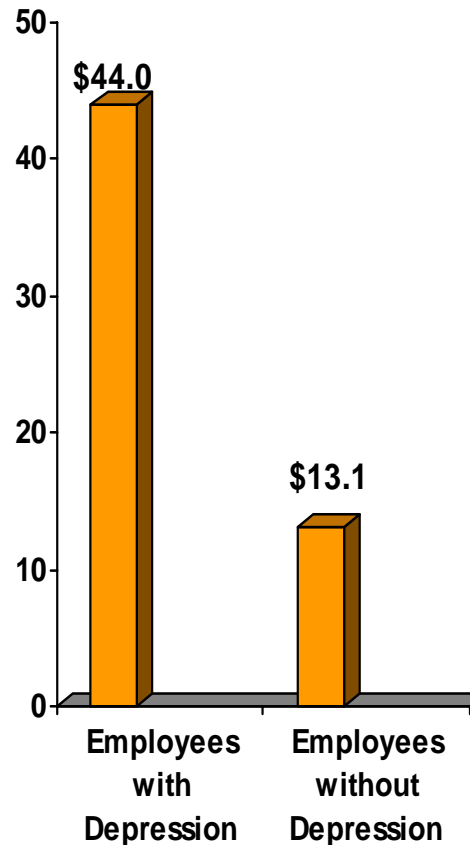


■ Not receiving recommended care for chronic conditions
■ Receiving recommended care for chronic conditions

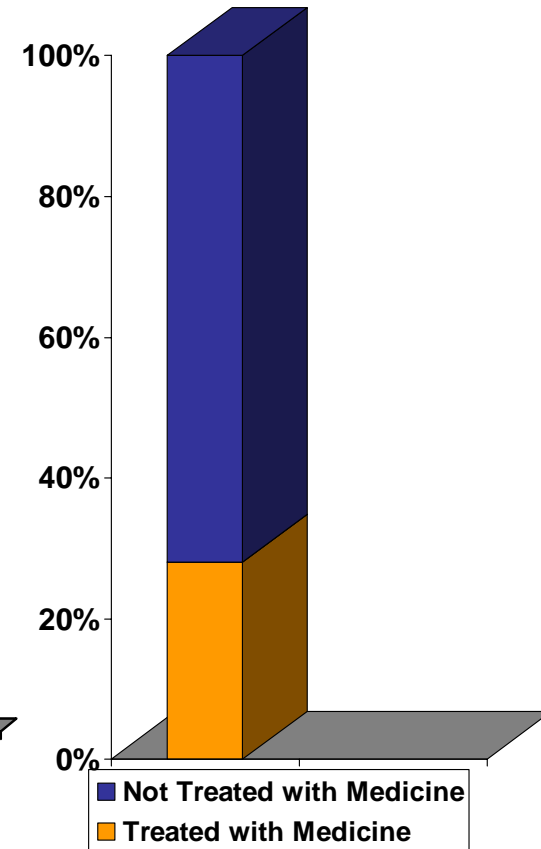
Depression Remains Severely Undertreated Costing Employers Billions

- According to a 2002 National Committee for Quality Assurance report, major depressive disorder is “the leading cause of disability in the United States” and “if every American with depression received care from a health plan or provider performing at the 90th percentile level, employers would recoup as many as 8.8 million absentee days per year.”
- Employees with depression were more expensive than those without depression because of productivity loss, yet less than one-third of depressed workers were receiving treatment for their disorder

Annual Cost of Lost Productive Time (Billions of Dollars)



Share of Workers with Depression Receiving and Note Receiving Recommended Treatment



Institute of Medicine: Characteristics of a Healthy Workforce Today*

Healthy

- Demonstrating optimal health status as defined by positive health behaviors; minimal modifiable risk factors; and minimal illnesses, diseases, and injuries;

Productive

- Functioning to produce the maximum contribution to achievement of personal goals and the organizational mission;

Ready

- Possessing an ability to respond to changing demands given the increasing pace and unpredictable nature of work; and,

Resilient

- Adjusting to setbacks, increased demands, or unusual challenges by bouncing back to optimal “well-being” and performance without incurring severe functional decrement.



Health Risks and Behaviors

Health Risk Measure

High Risk Criteria

Alcohol

More than 14 drinks/week

Blood Pressure

Systolic >139 mmHg or Diastolic >89 mmHg

Body Weight

BMI \geq 27.5

Cholesterol

Greater than 239 mg/dl

Existing Medical Problem

Heart, Cancer, Diabetes, Stroke

HDL

Less than 35 mg/dl

Illness Days

>5 days last year

Life Satisfaction

Partly or not satisfied

Perception of Health

Fair or poor

Physical Activity

Less than one time/week

Safety Belt Usage

Using safety belt less than 100% of time

Smoking

Current smoker

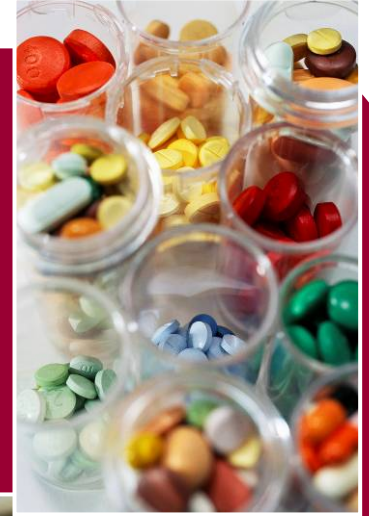
Stress

High

Health Risks Travel in Groups And Stress-related The Most Common

Health Measure	Cluster 1: Risk taking (N=6688)	Cluster 2: Low Risk (N=3164)	Cluster 3: Biometrics (N=3100)	Cluster 4: Psychological (N=3927)
Smoking	31%	0%	16%	27%
Alcohol	10%	0%	3%	5%
Physical activity	28%	0 %	19%	26%
Safety belt usage	36%	0 %	22%	31%
Body mass index	27%	25 %	38%	27%
Systolic blood pressure	9%	0 %	81%	23%
Diastolic blood pressure	5%	0 %	61%	20%
Cholesterol	19%	19 %	27%	22%
HDL cholesterol	34%	10 %	33%	24%
Self-perceived health	13%	0 %	9%	28%
Life satisfaction	4%	0 %	2%	73%
Stress	9%	0 %	2%	76%
Illness days	21%	0 %	12%	26%

Top 10 Prescription Drug Categories*: Health Behavior and “Stress-related”?



Asthmatic drugs
Anti-inflammatories
Osteoporosis and related drugs
Pain medications and narcotics
Anti-seizure
Cholesterol-lowering
Anti-ulcer
Antidepressants
High blood pressure
Diabetic drugs

Top 20 Depression-, Stress- and Sleep-related Prescription Drugs*

LEXAPRO

ZOLOFT

FLUOXETINE HCL

ALPRAZOLAM

EFFEXOR XR

WELLBUTRIN XL

AMBIEN

PAROXETINE HCL

CITALOPRAM HBR

LORAZEPAM

TRAZODONE HCL

ADDERALL XR

CONCERTA

AMITRIPTYLINE HCL

CYMBALTA

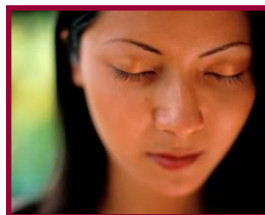
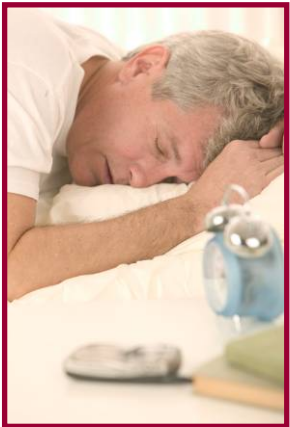
BUPROPION HCL

DIAZEPAM

AMBIEN CR

LUNESTA

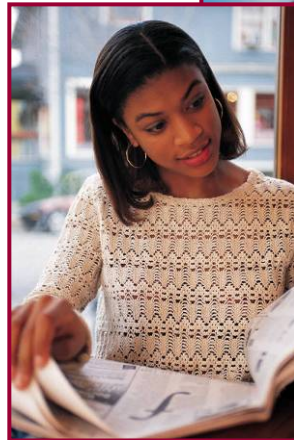
SERTRALINE HCL



Do You Have “Hurry Sickness”?

Sense of time urgency in all we do

Disease of modern living



- “Hurry up and get that workout over!!”
- Enabled and encouraged by technology

Media constantly feeding us “stress-producing messages”

Dr. Andrew Weil – “Try a ‘news fast’”

***Jiritsu Shinkei Shicho Sho**...
Or Symptom-based Diagnoses in the United States**

- **“Autonomic nervous system disorder” diagnosis in Japan**
- **Irritability, insomnia, stiff shoulders, headaches, eye fatigue, digestive disturbances, cold sweaty palms**
- **No similar diagnosis in US***

15 Stress Healing Prescriptions*

Learn to manage hostility and anger

Be optimistic

Learn to manage time wisely

Cultivate a healthy sense of humor

Practice conscious awareness in your daily life

Meditate

Breathe your stress away

Muscle relaxation exercises

Try hypnosis

Experience healing touch

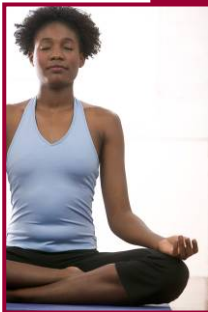
Consider biofeedback

Get regular exercise

Eat right for psychospiritual health

Maintain your “healing web”

Discard negative attitudes and beliefs



*The Okinawa Program: Learn the Secrets to Healthy Longevity, Three Rivers Press, 2001.

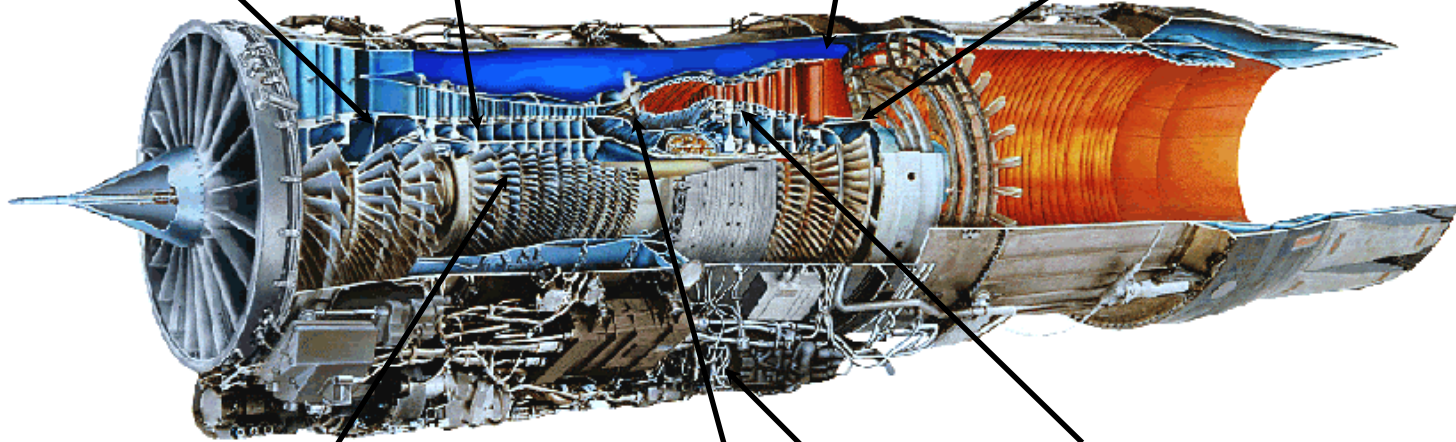
F100 Engine Performance Threats

4th Stage
Compressor Blade

3rd / 4th LPT Disk / Blade

3rd Fan Disk / Blade

#5 Bearing Compartment

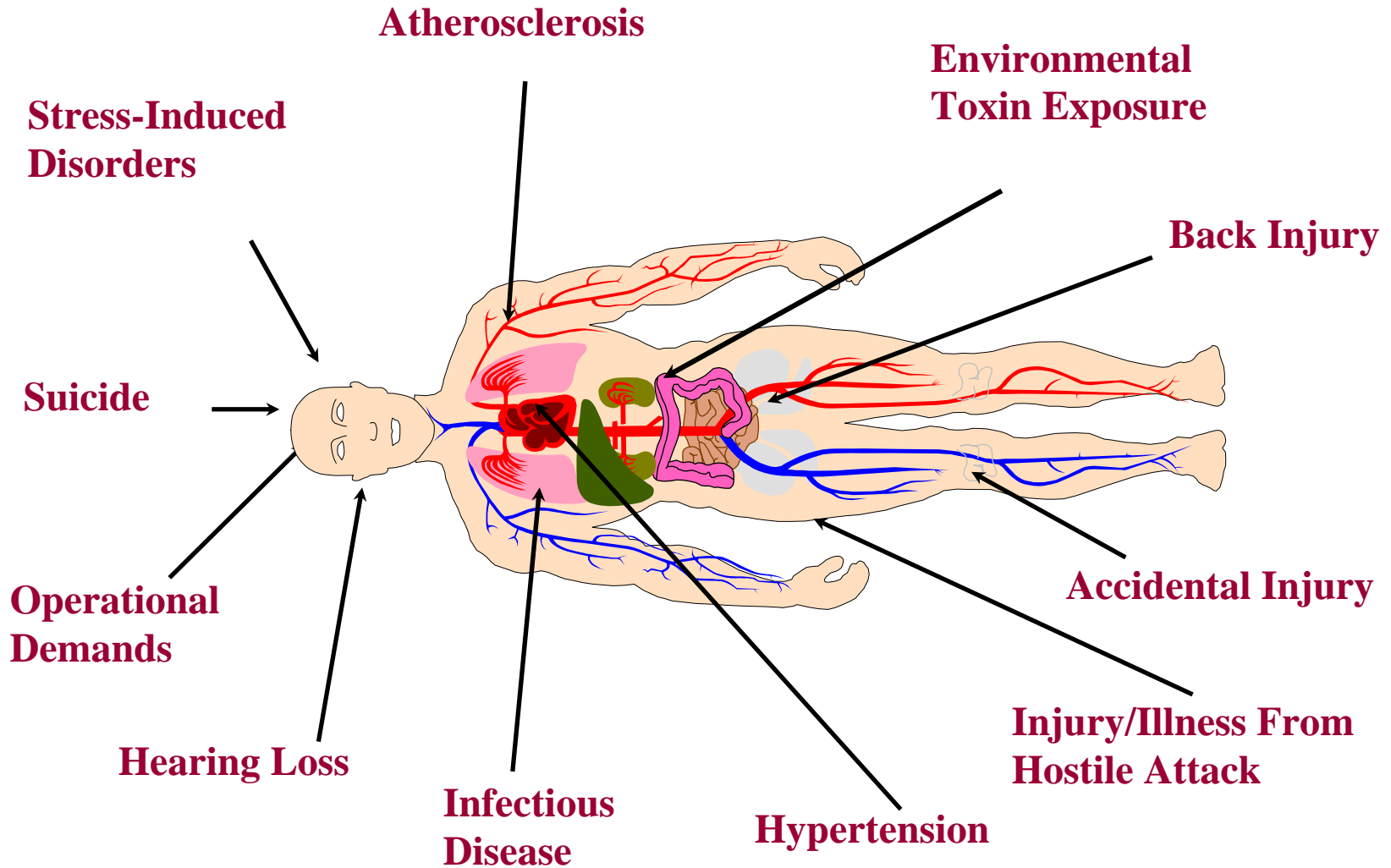


Compressor Stalls

HPT Distress

Fuel Manifold Pigtails/Flex Hoses/Nozzles

Human System Performance Threats



For more information about the PFCD visit our Web site:
www.fightchronicdisease.org



Or contact:

- Victoria Davis at vdavis@apcoworldwide.com, (212) 300-1812; or
- Beth Roberts at broberts@apcoworldwide.com, (202) 478-3810