

ANNEXES

Annex I

List of “best buys” and other recommended interventions for prevention and control of NCD based on WHO guidance

Guide to interpreting these tables:

The WHO-CHOICE analysis assessed and categorised 88 interventions (published in peer reviewed journal with demonstrated and quantifiable effect size) based on their feasibility and cost-effectiveness ratio (expressed as International dollars (I\$) per disability adjusted life year (DALY)) of \leq I\$ 100 per DALY averted in low- and lower middle-income countries (LMICs); cost-effectiveness ratio $>$ I\$ 100 per DALY averted; and those for which WHO-CHOICE analysis could not be conducted. The absence of WHO-CHOICE analysis does not necessarily mean that an intervention is not cost-effective, affordable or feasible – rather, there were methodological or capacity reasons for which the WHO-CHOICE analysis could not be completed at the current time. The subsequent tables show three categories of interventions:-

“Best buys”

are those interventions considered the most cost-effective and feasible for implementation, with an average cost effectiveness ratio \leq I\$100/DALY averted in LMICs

“Effective interventions”

are interventions with an average cost-effectiveness ratio $>$ I\$100/DALY averted in LMICs

“Other recommended interventions”

are interventions that have been shown to be effective but for which no cost-effective analysis was conducted

Risk factor: Unhealthy diet

Recommended interventions based on WHO-CHOICE analysis

Best buys

- Reduce salt intake through the reformulation of food products
- Reduce salt intake through the establishment of a supportive environment in public institutions such as hospitals, schools, workplaces and nursing homes
- Reduce salt intake through a behaviour change communication and mass media campaign
- Reduce salt intake through the implementation of front-of-pack labelling

Effective interventions

- Eliminate industrial trans fats through the development of legislation to ban their use in the food chain
- Reduce sugar consumption through effective taxation on sugar-sweetened beverages

Other recommended interventions

- Promote and support exclusive breastfeeding for the first 6 months, including promotion of breastfeeding
- Implement subsidies to increase the intake of fruit and vegetables
- Replace trans fats and saturated fats with unsaturated fats through reformulation, labelling, fiscal policies or agricultural policies
- Limit portion and package sizes
- Implement nutrition education and counselling in different settings (e.g. in preschools, schools, workplaces and hospitals) to increase the intake of fruit and vegetables
- Implement nutrition labelling to reduce total energy intake, sugars, sodium and fats
- Implement mass media campaigns on healthy diet to reduce the intake of total fat, saturated fats, sugars and salt, and promote the intake of fruit and vegetables

Risk factor: Physical inactivity

Recommended interventions based on WHO-CHOICE analysis

Best buys

- Implement community wide public education and awareness campaigns for physical activity

Effective interventions

- Provide physical activity counselling and referral as part of routine primary healthcare services

Other recommended interventions

- Ensure that macro-level urban design supports active transport strategies
- Implement whole-of-school programme that includes quality physical education, availability of adequate facilities and programmes
- Provide convenient and safe access to quality public open space and adequate infrastructure to support walking and cycling
- Implement multi-component workplace physical activity programmes
- Promotion of physical activity through organised sport groups and clubs, programmes and events



Risk factor: Harmful use of alcohol

Recommended interventions based on WHO-CHOICE analysis

Best buys	Increase excise taxes on alcoholic beverages
	Enact and enforce bans or comprehensive restrictions on exposure to alcohol advertising
	Enact and enforce restrictions on the physical availability of retailed alcohol
Effective interventions	Enforcing drink driving laws (breath-testing)
	Offer brief advice for hazardous drinking
Other recommended interventions	Carry out regular reviews of prices in relation to level of inflation and income
	Establish minimum prices for alcohol where applicable
	Enact and enforce an appropriate minimum age for purchase or consumption of alcoholic beverages and reduce density of retail outlets
	Restrict or ban promotions of alcoholic beverages in connection with sponsorships and activities targeting young people
	Provide prevention, treatment and care for alcohol use disorders and comorbid conditions in health and social services
	Provide consumer information about, and label, alcoholic beverages to indicate, the harm related to alcohol

Risk factor: Tobacco use

Recommended interventions based on WHO-CHOICE analysis

Best buys	Increase excise taxes and prices on tobacco products
	Implement plain/standardised packaging and/or large graphic health warnings on all tobacco products
	Enact and enforce comprehensive bans on tobacco advertising, promotion and sponsorship
	Eliminate exposure to second-hand tobacco smoke in all indoor workplaces, public places, public transport
	Implement effective mass media campaigns that educate the public about the harms of smoking/tobacco use and second-hand smoke
Effective interventions	Provide cost-covered, effective and population-wide support (including brief advice, toll-free quit line services) for tobacco cessation services to all those who want to quit
Other recommended interventions	Implement measures to minimise illicit trade in tobacco products
	Ban cross-border advertising, including using modern means of communication
	Provide mobile phone based tobacco cessation services

Disease: Cardiovascular diseases and diabetes

Recommended interventions based on WHO-CHOICE analysis

Best buys	Drug therapy and counselling for people with high risk ($\geq 30\%$) or moderate-to-high risk ($\geq 20\%$) of developing a fatal and non-fatal cardiovascular events in the next 10 years
Effective interventions	Treatment of new cases of acute myocardial infarction with drug therapy or primary percutaneous coronary interventions
	Treatment of acute ischaemic stroke with intravenous thrombolytic therapy
	Primary and secondary prevention of rheumatic fever and rheumatic heart diseases
Other recommended interventions	Treatment of congestive cardiac failure with drug therapy
	Cardiac rehabilitation post myocardial infarction
	Anticoagulation for medium- and high-risk atrial fibrillation
	Drug treatment of ischaemic stroke
	Care of acute stroke and rehabilitation

Disease: Diabetes

Recommended interventions based on WHO-CHOICE analysis

Best buys	Preventive foot care for people with diabetes
	Diabetic retinopathy screening for all diabetes patients
	Effective glycaemic control for people with diabetes, along with standard home glucose monitoring for people treated with insulin
Other recommended interventions	Lifestyle interventions for preventing type 2 diabetes
	Influenza vaccination for patients with diabetes
	Preconception care among women of reproductive age who have diabetes
	Screening and treatment of people with diabetes for proteinuria



Disease: Cancers

Recommended interventions based on WHO-CHOICE analysis

Best buys	Vaccination against human papillomavirus of 9-13 year old girls
	Prevention of cervical cancer by screening women aged 30-49 years
Effective interventions	Screening with mammography (once every 2 years for women aged 50-69 years) linked with timely diagnosis and treatment of breast cancer
	Treatment of colorectal cancer (CRC), cervical cancer and breast cancer stages I and II
	Basic palliative care for cancers: home-based and hospital care
Other recommended interventions	Prevention of liver cancer through hepatitis B immunisation
	Population-based CRC screening at age >50 years, linked with timely treatment
	Oral cancer screening in high-risk groups linked with timely treatment

Disease: Chronic respiratory diseases

Recommended interventions based on WHO-CHOICE analysis

Best buys	Symptoms relief for patients with asthma with inhaled salbutamol
	Symptoms relief for patients with chronic obstructive pulmonary disease with inhaled salbutamol
	Treatment of asthma with low-dose inhaled beclometasone and short acting beta agonist
Other recommended interventions	Access to improved stoves and cleaner to reduce indoor air pollution
	Cost-effective interventions to prevent occupational lung diseases
	Influenza vaccination for patients with chronic obstructive pulmonary disease

Source: Adopted from the WHO's publication "Tackling NCDs: 'best buys' and other recommended interventions for the prevention and control of noncommunicable diseases (2017)"

Annex II

Steering Committee on Prevention and Control of Non-communicable Diseases (from 24 November 2016 to 23 November 2018)

Terms of Reference

1. To steer the direction of work on NCD prevention and control in accordance with WHO's Global Action Plan for the Prevention and Control of NCD 2013-2020;
2. To advise and oversee implementation of the time-bound commitments and achievement of the progress indicators;
3. To develop a set of voluntary targets and indicators based on local NCD situations, and monitor their achievements; and
4. To continue monitoring the implementation of outstanding action items of the three Action Plans.

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Prof Sophia CHAN Siu-chee, JP

Dr Margaret WONG Fung-yee

Mr Simon WONG Kit-lung, JP

Deputy Chairperson

Dr Constance CHAN Hon-ye, JP

Ex-officio Members

Mr Howard CHAN Wai-kee, JP

Dr CHEUNG Wai-lun, JP (till January 2018)

Mr Raymond FAN Wai-ming, JP (till January 2018)

Mr FONG Kai-leung (till February 2018)

Dr Rita HO Ka-wai

Dr HO Yuk-yin, JP (till June 2017)

Mrs HONG CHAN Tsui-wah (till June 2017)

Dr Tony KO Pat-sing (since January 2018)

Mr KOK Che Leung (since March 2018)

Ms Ida LEE Bik-sai (since March 2018)

Mr Albert LEE Kwok-wing, JP (till August 2017)

Dr Samuel YEUNG Tze-kiu (since September 2017)

Mr WOO Chun-sing (since July 2017)

Miss Rosaline WONG Lai-ping (since August 2017)

Dr WONG Ka-hing, JP

Non-official Members

Prof Juliana CHAN Chung-ngor

Dr Peter CHAN Hung-chiu

Ms Amy CHAN Lim-chee, JP

Mr CHIM Hon-ming

Dr CHOI Kin

Dr CHOW Chun-bong, BBS, JP

Prof FUNG Hong, JP (till January 2018)

Mrs Josephine KAN CHAN Kit-har

Ms Lisa LAU Man-man, BBS, MH, JP

Ms Susanna LEE Wai-ye

Ms LEE Yi-ying

Prof Gabriel Matthew LEUNG, GBS, JP

Dr Lobo LOUIE Hung-tak

Dr LUI Siu-fai, MH, JP

Ms Scarlett PONG Oi-lan, BBS, JP

Dr Thomas TSANG Ho-fai (since January 2018)

Secretary

Dr Regina CHING Cheuk-tuen, JP

Annex III

Task Force underpinning the Steering Committee on Prevention and Control of Non-communicable Diseases

Terms of Reference

1. To advise and support the Steering Committee in the development of a set of local NCD targets and indicators based on WHO guidance; and
2. To make recommendations to the Steering Committee on systems, programmes and action plans required to achieve effective NCD prevention and control.

Convenor

Dr LUI Siu-fai, MH, JP

Members

Prof Juliana CHAN Chung-ngor

Dr Peter CHAN Hung-chiu

Ms Amy CHAN Lim-chee, JP

Mr CHIM Hon-ming

Dr CHOI Kin

Dr CHOW Chun-bong, BBS, JP

Prof FUNG Hong, JP

Mrs Josephine KAN CHAN Kit-har

Mr James LAM Yat-fung

Ms Lisa LAU Man-man, BBS, MH, JP

Ms Susanna LEE Wai-yee

Ms LEE Yi-ying

Prof Gabriel Matthew LEUNG, GBS, JP

Dr Lobo LOUIE Hung-tak

Ms Scarlett PONG Oi-lan, BBS, JP

Dr Margaret WONG Fung-yee

Mr Simon WONG Kit-lung, JP

Co-opted Members

Representative of Education Bureau

Representatives of Department of Health

Representative of Food and Environmental
Hygiene Department

Representative of Hospital Authority

Representative of Leisure and Cultural Services
Department

Representative of Social Welfare Department

Representative of Housing Department

Secretary

Dr Regina CHING Cheuk-tuen, JP

Annex IV

Meetings and topics discussed by the Task Force

Meeting dates	Papers considered and discussed
First meeting (12 December 2016)	<ul style="list-style-type: none"> • Work Schedule, Membership and Terms of Reference [TFPC(NCD) Paper No. 01/2016] • Overview of Data Availability and Status of Local NCD Monitoring [TFPC(NCD) Paper No. 02/2016] • Proposed Non-Communicable Disease Priority Action Areas and Approach in Selecting Local Targets and Indicators [TFPC(NCD) Paper No. 03/2016]
Second meeting (24 February 2017)	<ul style="list-style-type: none"> • World Health Organization (WHO)'s Recommended Programmes for NCD Prevention and Control and their Relevance to Hong Kong [TFPC(NCD) Paper No. 01/2017]
Third meeting (4 August 2017)	<ul style="list-style-type: none"> • Proposed Interventions for Prevention and Control of NCD in Hong Kong [TFPC(NCD) Paper No. 02/2017]
Fourth meeting (29 November 2017)	<ul style="list-style-type: none"> • Proposed targets and indicators for Prevention and Control of NCD in Hong Kong [TFPC(NCD) Paper No. 03/2017]

Timeline of meetings of the Task Force and Steering Committee

