



The Global Economic Burden of Non-communicable Diseases

*Medicare is a programme of the US Government that provides health insurance to those aged 65 and older and to certain other groups.

For this report, we start with the cost-of-illness approach, as it is considered by many to be an intuitive way to measure the economic burden of ill health. The COI approach distinguishes between direct and indirect costs of different health conditions. Direct costs refer to visible costs associated with diagnosis, treatment, and care. Direct costs may include personal medical care costs or personal non-medical costs such as the cost of transport to a health provider. Indirect costs refer to the invisible costs associated with lost productivity and income owing to disability or death. The COI approach can also accommodate non-personal health costs (such as those associated with research and public health education campaigns). The cost of pain and suffering may also be considered in this approach, although it is rare to find COI studies that place a monetary value on pain and suffering, and the present study does not do so. For further discussion of the COI approach, see page 115 of World Health Organization, 2009.

Implementation of the COI approach typically varies by health condition because of differences in the nature of available data. The interpretation of the results varies in corresponding fashion. This report presents the methods and results for estimating the cost of illness in 2010 and 2030 of the following conditions: cancer, cardiovascular disease, chronic obstructive pulmonary disease, diabetes and mental illness. Due to the nature of data available on **the prevalence and cost of these five categories of NCDs, the COI method was implemented in different ways for each disease** (See Table 2). Therefore, cost-of-illness results presented for any one of the conditions are not directly comparable to the results presented for another. Estimates for each disease are intended to give readers an understanding of the magnitude of costs for each illness, but not necessarily how the costs of each of the disease categories rank against one another.