

Highlighting some crucial policy-relevant points in these papers, **Professor Balram Bhargava, Secretary to the Government of India, Department of Health Research, Ministry of Health & Family Welfare, and Director General, ICMR**, said, “These papers through detailed analysis have elucidated disease and risk factor trends of major NCDs and suicide in every state over 26 years. While it is known that NCDs have been increasing in India, a major finding of concern is that the highest rate of increase in ischemic heart disease and diabetes is in the less developed states of India. These states already have a high burden from chronic obstructive lung disease and from a range of infectious and childhood diseases, so the control of NCDs in these states has to be boosted without delay. The proportional contribution of cancers to disease burden in India has doubled since 1990, but the incidence of individual cancers varies widely between the states, the reasons

for which need to be understood better to guide prevention and control of cancer. Another important finding is the very high contribution of India to the total suicide deaths in the world, especially among women. The ten-fold variation between the states in the suicide death rate for women emphasises the need to better understand the reasons behind these suicides and make concerted efforts to reduce this avoidable loss of predominantly young lives.”

On the release of these new estimates, **Professor Vinod Paul, Member, NITI Aayog**, said, “The insights provided by these findings are very timely for the planning of Ayushman Bharat, the National Health Protection Mission announced recently by the Prime Minister. The findings in these papers demonstrate that major NCDs or suicide do not necessarily follow the same trend in the less developed states, or in the more developed states, indicating the importance of planning health improvements based on specific evidence for each state. The detailed analysis of the changes in the major NCDs and their risk factors reported in these papers are therefore quite useful for titrating the Ayushman Bharat effort according to the need of each state. We plan to utilize these findings in collaboration with the state decision makers to determine the appropriate balance of activities under the Health and Wellness Centres to strengthen comprehensive primary healthcare in each state.”

“The ability of a health system to respond to immediate and anticipated future challenges depends on estimates of major disease burdens and their evolving trends. The response also has to be appropriate to the context of each state. This study not only profiles how NCDs and suicide are posing menacing public health challenges across the country, but also enables a contextually configured health system response suitable for each state. Much of this burden is preventable and every attempt must be made to avert these diseases and suicides. At the same time, health services must be ready to provide appropriate and timely care to effectively treat diseases that have already manifested. By shining the torchlight on the specific disease burdens that each state must prioritise, this study will help direct health system resources to maximise impact through early prevention and effective treatment.” **said Professor K Srinath Reddy, President, Public Health Foundation of India.**

**Professor Lalit Dandona, Director of the India State-Level Disease Burden Initiative**, said on this occasion, “It is important to note that the detailed analyses reported in these papers have been possible because of the valuable contributions of many hundreds of highly qualified collaborators from India over the past three years. Their engagement and insights have enabled utilization of relevant data from across India over three decades, methodological improvements in the analysis, balanced interpretation of the findings in the context of India’s diversity, and identification of data gaps that need to be addressed. Encouraged by this momentum, we anticipate that this collaborative work would result in even more refined insights to inform policy decisions at the centre and in the states to improve the health of people in all parts of India.”

“After the successful launch of the initial findings of the India State-Level Disease Burden Initiative last year by the Vice-President and Health Minister of India, I am delighted to see the continuing contributions being made by this Initiative in the form of deeper policy-relevant insights to inform health planning in each state”, said **Dr Soumya Swaminathan, Deputy Director General, World Health Organization**, under whose guidance this Initiative was started in 2015 when she was the Director General of ICMR. “The use of the standardized methodology of the Global Burden of Diseases study by this Initiative to understand health loss due to all diseases and risk factors in a single framework, and the use of disability-adjusted life years that is a composite metric of health loss due to premature mortality and morbidity, has enabled a balanced understanding of the contribution of the various diseases and risk factors in every state of India over a quarter century”, she added.

**Professor Christopher Murray, Director, Institute for Health Metrics and Evaluation**, said “These studies are both invaluable and timely, as they reveal divergent non-communicable disease and suicide trends are emerging across India. The findings will help policymakers tailor health roadmaps specific to each state as they seek to address a growing ‘double’ burden of disease from communicable and non-communicable disorders alike.”

**Dr Richard Horton, Editor-in-Chief of *The Lancet***, said: “The papers in the *Lancet* journals reveal a rapid epidemiological transition in India. While the country is engulfed in an emerging epidemic of non-communicable disease, it is also facing the challenge of a significant burden of suicide. The introduction of the Ayushman Bharat has prioritised universal health coverage as a key political issue. As voters go to the polls in India’s general election in April 2019, health will rightly become a decisive issue for the world’s largest democracy.”