

WHO speaks out on global health challenges

The following is an excerpt from the 2007 David E. Barmes Global Health Lecture, delivered by Dr. Margaret Chan, director-general of the World Health Organization, in which she advanced the arguments that the world's ability to handle health challenges rests upon the capacity of local health system infrastructure.

"Industrialization of food production, globalization of the food supply and its distribution and marketing channels mean that all of us are in-

creasingly eating similar unhealthy diets. With the massive move to cities, lifestyles are increasingly sedentary. Obesity has gone global.

Chronic diseases, long considered the companions of affluent societies, have changed places. They now impose their heaviest burden on low- and middle-income countries. Here is 1 example. In Cambodia, a least developed country, 1 in 10 adults now has diabetes and 1 in 4 adults has hypertension.

The rise of chronic diseases and the demands of chronic care are placing an almost unbearable strain on health systems. The costs for impoverished households can be catastrophic. In part of rural China, for example, 30%–50%

of poor farmers cite ill health or the costs of chronic care as the root cause for their poverty.

Two conclusions are obvious. If we want better health to work as a poverty reduction strategy, we must reach the poor. If we want health to reduce poverty, we cannot let the costs of health care drive impoverished households even deeper into poverty.

Public health has been given a big push forward, but it is still an uphill climb. Here is the reality. Interventions and money will have only a limited impact in the absence of adequate delivery systems." — Wayne Kondro, *CMAJ*

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DISPATCH FROM THE MEDICAL FRONT

Appropriate applause procedures

It seemed a windfall to our multinational group of 8. Our grand foray to the Great Wall of China was to be interrupted by an unscheduled stop at the world-renowned Imperial Academy of Natural Chinese Medicine.

We were greeted warmly by a pair of attractive young women in freshly starched lab coats, ushered into a classroom, served a hot beverage made from "health giving" plants and treated to a lecture lauding Chinese traditional and natural medicine. We learned about Yin and Yang, the efficacy of acupuncture and the incomparable excellence of hospital staff.

Then, as a special gift, we "Western visitors" received a free personal examination from 2 of the academy's most renowned professors: 'A' and 'B'. They arrived, dapper in suits and lab coats. The 2 attractive women encouraged us to clap. Disappointed by our lack of vigour, A instructed us to clap louder.

He motioned me forward. The translator ordered me to extend my hand, palm up, on a soiled pink satin cushion. My pulse was taken, my tongue scrutinized. A asked my age and gravely inquired about my current medications. A look of disapproval crossed



Traditional Chinese medicine is based on various belief systems.

his face when I told him that I did not take anything.

"Very serious," he intoned. "You have overheated liver, sluggish circulation and thick blood."

I protested that I felt very well.

"Very serious," the interpreter repeated. "No energy, fatigue, dry mouth and sometimes forget things."

A sadly shook his head.

Again I protested: the weather was hot, my energy excellent, my memory good.

"Sometimes," he implored, "the most serious of medical conditions seem like that until it is too late. You need urgent treatment."

I explained that our bus was moving on. He urged that I "look after my health before it was too late. ... Hundreds of my patients come to my hospital from North America before it is too late."

I was clearly not a good patient.

Other tourists were summoned forward. A Mexican physician was diagnosed with "serious womb and period problems." Also of a noncompliant bent, she was swiftly discharged, as was another Canadian physician suffering "sluggish circulation, hypertension, thick blood and developing diabetes." He protested that he felt well and recent lab work was normal.

But a muscular, 35-year-old dental technician proved more responsive. Advised that he was "seriously ill, hypertension, sluggish circulation, and on the verge of getting diabetes," he forked over US\$300 for a football sized bag of dried herbs. He was instructed to return, "without fail," in 3 months. He looked worried! — Donna Stewart, MD, Toronto, Ont.

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