

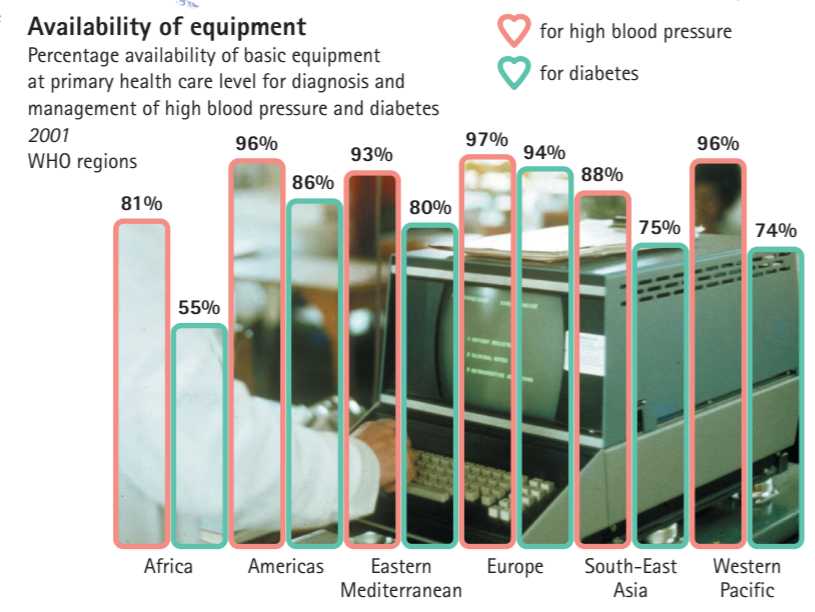
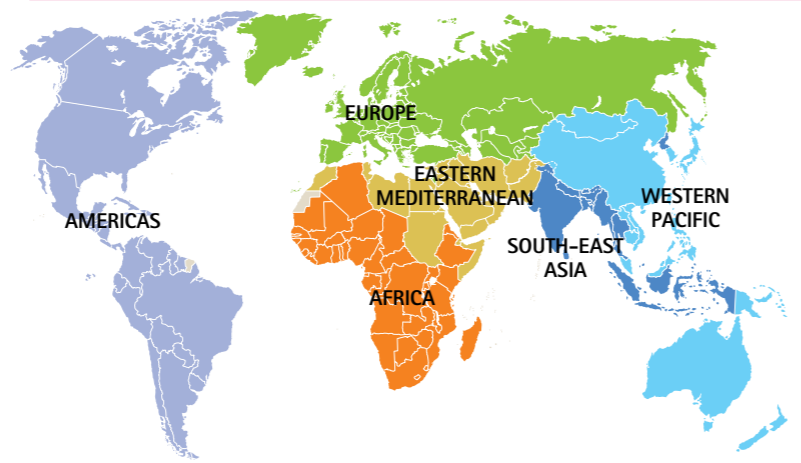
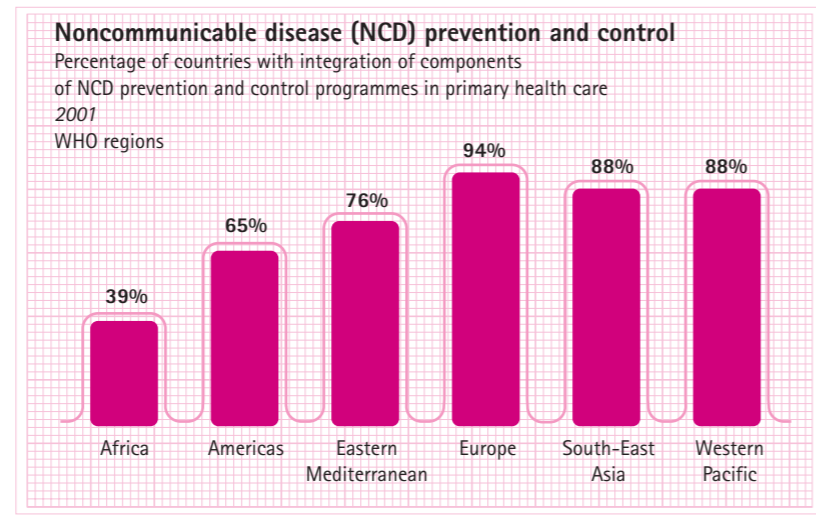
21 Prevention: population and systems approaches

"Thinking well is wise; planning well, wiser; doing well wisest and best of all."
Old Iranian proverb

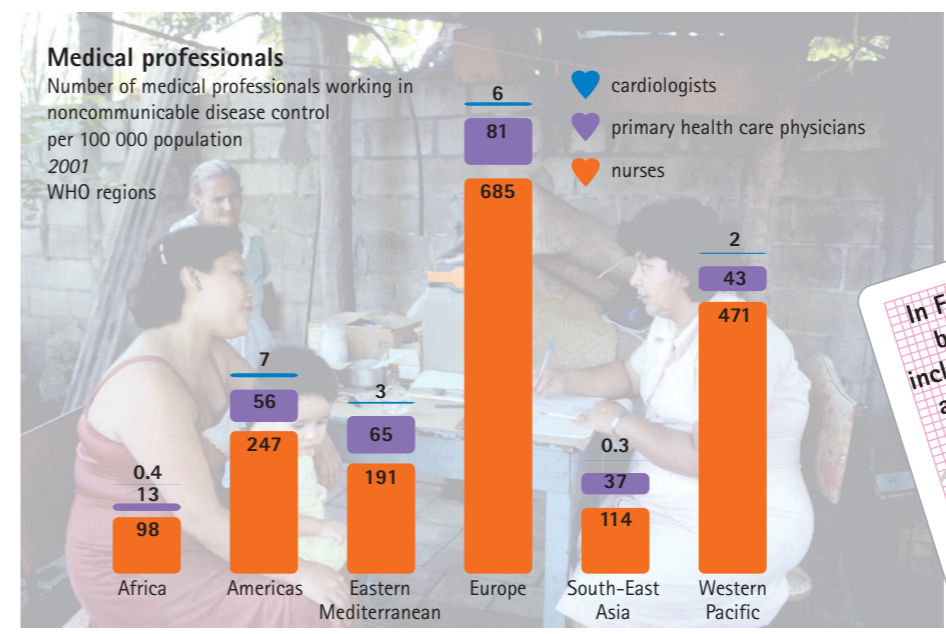
Significant health gains in cardiovascular health can be made within short time spans, through public health and treatment interventions that have an impact on large segments of the population.

As shown here, there is a gap between what is known and what is done in practice, for both prevention and treatment of cardiovascular disease.

Governments are stewards of health resources, and have a fundamental responsibility to protect the health of citizens. Ministries of Health and the health profession can play various roles in reducing CVD, by making data available, educating the public, making treatments affordable and available, advising patients on healthy living practices, and advocating for policy and environmental change. These have been the essential messages of the International Heart Health Conferences and the related declarations on heart health.

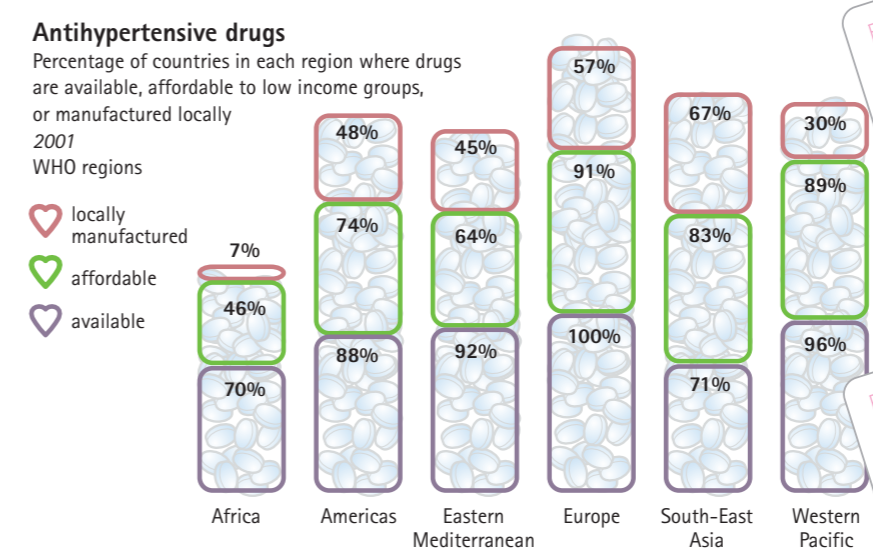


UK dieticians promote the benefits for heart health of eating oily fish, more fruit and vegetables, and less saturated fat.



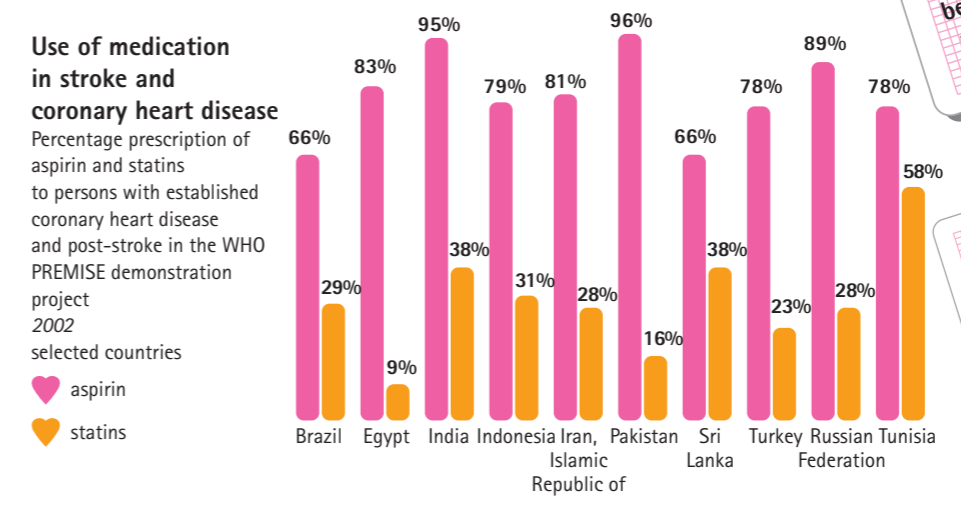
A large gap exists between knowledge and practice.

In Finland, community-based interventions, including health education and nutrition labelling, led to population-wide reductions in cholesterol, closely followed by a sharp decline in heart disease.



In Japan, government-led health education campaigns and increased treatment of high blood pressure have reduced blood pressure levels in the population; stroke rates have fallen by more than 70%.

In New Zealand, the introduction of recognizable logos for healthy foods led many companies to reformulate their products. The benefits included greatly reduced salt content in processed foods.



In Mauritius, a change from palm oil to soya oil for cooking brought down cholesterol levels, but obesity was unaffected.