

## Resources on the WHO website

NBD Manual and DALY calculation templates	<a href="http://www.who.int/evidence/nbd">http://www.who.int/evidence/nbd</a>
DISMOD software	<a href="http://www.who.int/evidence/dismod">http://www.who.int/evidence/dismod</a>
GBD 2000 Version 2 results	<a href="http://www.who.int/evidence/bod">http://www.who.int/evidence/bod</a>
GBD 2000 Version 2 documentation	<a href="http://www.who.int/evidence/bod">http://www.who.int/evidence/bod</a>
WHO Modified Logit Lifetable System	<a href="http://www.who.int/evidence">http://www.who.int/evidence</a>

## Other resources

NBD Priors Toolkit	Available from WHO on request
YLD worksheets (Australian studies)	<a href="http://www.dhs.vic.gov.au/phd">http://www.dhs.vic.gov.au/phd</a>

## References

- Mathers CD, Vos T, Lopez AD, Ezzati M. National Burden of Disease Studies: A Practical Guide. Edition 2.0. Geneva, World Health Organization 2001.
- Mathers CD, Stein C, Ma Fat D, Rao C, Inoue M, Tomijima N et al. Global Burden of Disease 2000: Version 2 methods and results. GPE Discussion Paper No. 50. Geneva: World Health Organization, 2002.
- Murray CJL, Lopez AD. The Global Burden of Disease: a comprehensive assessment of mortality and disability from diseases, injuries and risk factors in 1990 and projected to 2020. Cambridge, Harvard University Press, 1996.

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## National Burden of Disease Studies

WHO Support for Country Analyses of the incidence, prevalence, mortality and burden of diseases and injuries



Valid, comprehensive and comparable information about diseases and injuries, their incidences, their consequence, their causation and their trend is more than ever necessary to inform policy-making. In a context where increasingly vocal and well informed people demand more health services and interventions than available resources can finance, decision-makers at all levels are increasingly required to evaluate the impact of health policies, to justify the adoption of new ones and to ensure that information is available for inter-programme comparisons.

WHO member States are increasingly requesting technical assistance and support to undertake country-level burden of disease measurement. The Table below lists Member States who have completed or are in various stages of undertaking these assessments.

Completed National Studies	Studies in Progress
Andra-Pradesh (India)	Australia (2nd study)
Australia	Canada
Chile	Cuba
Columbia	Egypt
England (SW)	Indonesia
Mauritius	Iran
Mexico	Lebanon
Morocco and Tunisia	Malaysia
Netherlands	Mexico (2nd study)
New Zealand	Mozambique
South Africa	Oman
Sweden	Syria
Turkey	Thailand
Zimbabwe	Uganda
	United States of America

## WHO support for national studies

WHO support to national burden of disease studies not only ensures better data for planning but also enables further development and testing of tools to facilitate burden of disease assessments.

This iterative process builds a partnership between WHO and Member States, laying the groundwork for tackling the bigger challenge of integrating burden of disease data into country-level programming and health system performance assessment. In addition, this partnership contributes towards the ongoing updating of the 1990 estimates of the global and regional burden of disease to year 2000 estimates.

## Resources and reference materials

### National burden of disease manual

This manual provides an overview of burden of disease methodology together with a step-by-step practical instructions for designing and carrying out a national burden of disease study. The manual is available on the WHO website (see box on back page).

### International training workshops

WHO and the Harvard Burden of Disease Unit run an annual training workshop on burden of disease analysis usually in October. Details of the next training workshop can be found on the Harvard website at <http://www.hsph.harvard.edu/organizations/bdu>

### NBD Toolkit

WHO also has developed a National Burden of Disease (NBD) Toolkit, the key components of which are WHO 'prior' estimates of mortality and burden of disease for UN Member States for the year 2000. They are intended to provide a starting point for more in-depth analyses by NBD study teams. The NBD Toolkit is available on request from WHO to national study teams.

### Software

WHO has developed general purpose disease modelling software called DISMOD II which assists in ensuring consistency of epidemiological estimates for incidence, prevalence, duration, case fatality and mortality. This software is available on the WHO website at <http://www.who.int/evidence/dismod>.

### Global Burden of Disease Version 2 estimates and documentation

Version 2 draft results of the GBD 2000 project are available on the WHO website at <http://www.who.int/evidence>. An accompanying Discussion Paper (Murray et al. 2001) gives details of analysis categories, principles, and summary results.

## Life tables

WHO has constructed life tables for the years 2000 to 2002 for all 191 Member States. They are available on the WHO website. <http://www.who.int/evidence> and provide a useful starting point for countries without good mortality registration data for estimating total mortality by age and sex. Software to run the WHO modified logit life table system is available on the WHO website at

[http://www3.who.int/whosis/menu.cfm?path=whosis\\_burden\\_statistics\\_life\\_life\\_model&language=english](http://www3.who.int/whosis/menu.cfm?path=whosis_burden_statistics_life_life_model&language=english)

## National Burden of Disease studies

The Australian burden of disease studies have made available a complete set of disease worksheets on the worldwide web. Examination of these worksheets provides a useful introduction to the range of disease models and the types of data that are used in burden of disease analysis.



