

Heart Health Asia

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Cardiovascular disease (CVD) is rising in Asia. CVD is the leading cause of death in Asia, and accounted for 9.3 million mortalities in 2014. There are a number of causes. Mass urbanisation in emerging markets is leading to increases in sedentary lifestyles. As the middle classes in Asia swell, high-salt and fatty diets rise. Tobacco use is disproportionately high in Asia, and it is buoying CVD. Ageing societies in Japan, China and Korea are adding stress to their ability to finance healthcare and is causing a rise in non-communicable diseases (NCDs) including heart failure and strokes.

Asia is home to a complex array of healthcare systems, different government policies, and epidemiological and socio-economic factors. Best practices must be examined with different criteria in mind. How can wealthy countries like Japan, Korea and Singapore strengthen their national heart plans? What can emerging markets learn from these examples? How can policymakers, private industry and academia collaborate to improve care across the board? And how can technological developments and innovations revolutionise the way CVD sufferers are cared for?

13.00 Registration**14.00 Chair's opening remarks****14.05 Presentation: Key findings from Heart Health research**

This session will explore a recent study by The Economist Intelligence Unit (EIU) on the policy responses towards chronic cardiac conditions in different countries, drawing on an EIU quantitative benchmarking model and a series of interviews with high-level experts.

14.20 Panel: Strengthening national heart plans in advanced healthcare systems

Asia boasts some of the most sophisticated national heart plans in the world. Korea, Japan, Taiwan, Singapore and Hong Kong have developed impressive CVD specialist capabilities, with cardio and cerebrovascular centres dotted around each country.

The financial burden created by CVD is increasing due, largely, to rapidly ageing populations. Wealthy Asian countries also lag behind other OECD nations in minimising tobacco use. According to the World Health Organisation, China and Korea are 9th and 15th in the global smoking rankings, respectively. Japan is calling for a “smoke free” 2020 Olympic Games, which should raise general awareness.

How can countries with ageing populations in Asia prepare, financially and socially, for increasing CVD cases? How should countries align anti-smoking initiatives with CVD care? While governance in these countries is robust, how can it improve? How can national heart plans create an integrated care system? What are the best practices in benchmarking and measuring CVD post-acute and primary care?

15.05 In conversation case study: Multi-sector collaboration

What are the best practices in cross-collaboration in terms of reforming heart disease care systems to be more efficient and value-based, and how can private-public partnerships support the needed reforms?

15.30 Networking break

16.00 Panel: Healthy heart for all: CVD in emerging markets

Low-to-middle and middle income countries face tremendous financial strain in dealing with rising CVD cases. An exploding middle class is changing the dietary habits of hundreds of millions of people. Urbanisation, a product of this socio-economic change, is leading to increasingly sedentary lifestyles and hypertension. Education on risk factors is lacking. And developing countries struggle to retain talent in top CVD roles. To compound matters, many countries in Asia have demanding local conditions like vast rural populations and a lack of basic infrastructure.

Yet there are examples of how low-to-middle and middle income countries can create robust CVD plans. Thailand has a particularly successful story to tell, and is now a global health tourism hub. How can developing Asian countries effectively finance CVD infrastructure to improve access to primary care? How can they develop cost efficiencies and best practices? What can they learn from wealthier nations? And how can they build a CVD plan that is integrated with their government's overall infrastructure policy?

16.45 In conversation: Technology and innovation in CVD treatment

Technology around the world is profoundly changing the way people interact with each other, businesses, and social services. Healthcare is no exception to this. Some countries in Asia have the ability to leapfrog traditional processes. Data analytics, conversational interfaces, mobile heart-rate detection capabilities, sensor technology, and a vast array of mobile apps are empowering people around the region.

How can the private sector use technology to improve and personalise CVD treatment and make it more effective? How should governments and non-profit organisations collaborate with technology providers? And how can developing countries use technology to leapfrog traditional methods of CVD care?

17.15 Chair's wrap up and review**17.30 Networking drinks reception**