

# Chronic Disease in NZ Asians: Prevalence and Prevention

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# 2006/07 NZ Health Survey

	Asian	Non-Asian
Adequate vegetable intake	47.9%	64.1%
Meeting PA Guidelines	40.4%	52.9%
Sedentary	23.5%	12.9%
Overweight/Obese	43.4%	62.3%
Diabetes	8.3%	3.9%
Don't see PHCP first when unwell	14.5%	6.8%

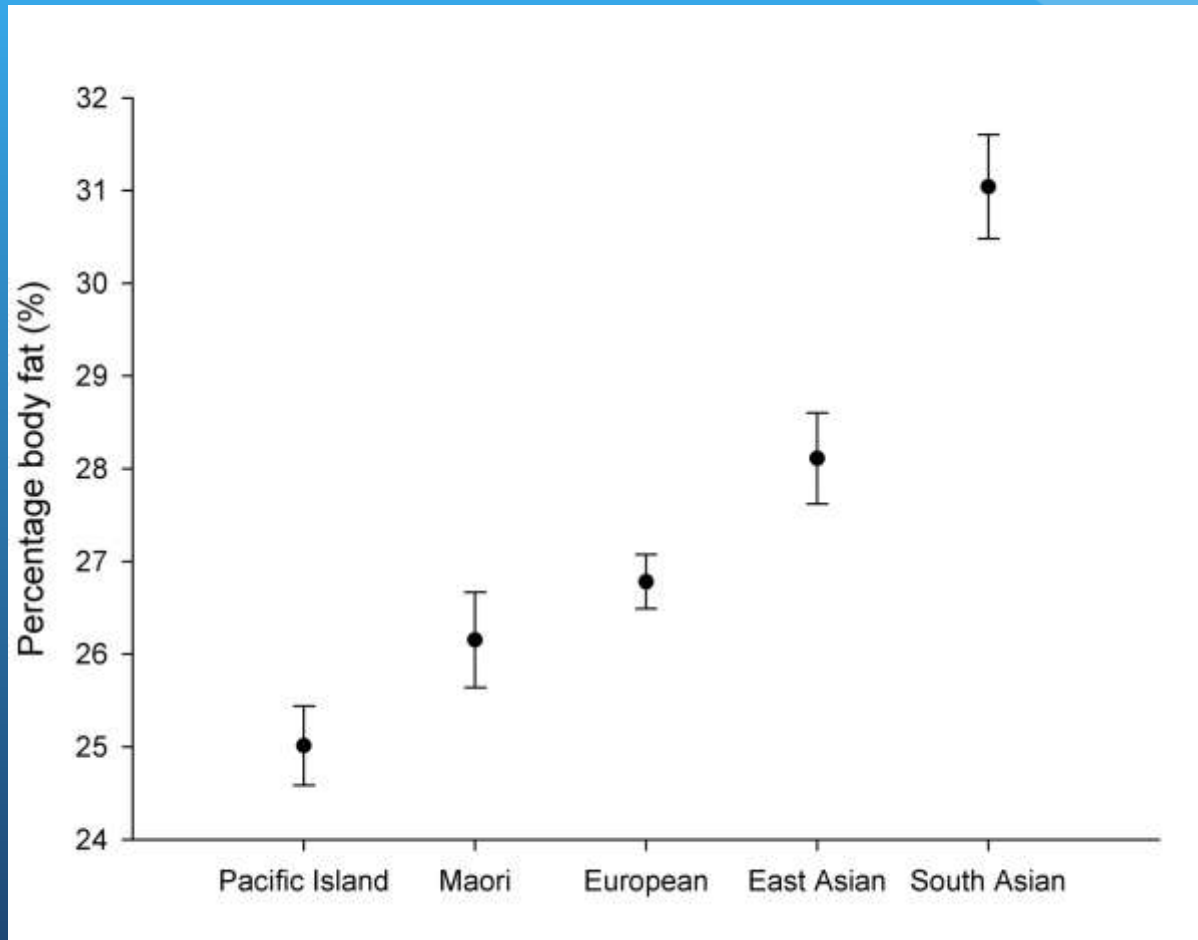
# The South Asian Syndrome?

- Indians living in India have among the highest prevalence of CHD and diabetes in the world  
Pinto (1998); Ramachandran et al (2001)
- The plight of expatriate Indians...
  - Balarajan (1991). *BMJ*, 302(6776): 560-4.
  - Vardan et al (1995). *Ind Heart J*, 47(4): 399-407.
  - Bhopal et al (1999). *BMJ*, 319(7204): 215-20.
  - Sheth et al (1999). *Can Med Assoc J*, 161(2): 132-8.
  - Dhanjal et al (2001). *Int J Clin Prac*, 55(10): 665-8.
  - Palaniappan et al (2002). *Am J Cardiol*, 89(5): 524-9.
- Summary: Indians have poorer risk factor profiles for CVD and diabetes, and much greater risk of CHD, than the local population or other immigrant groups

# Asian Health Chart Book

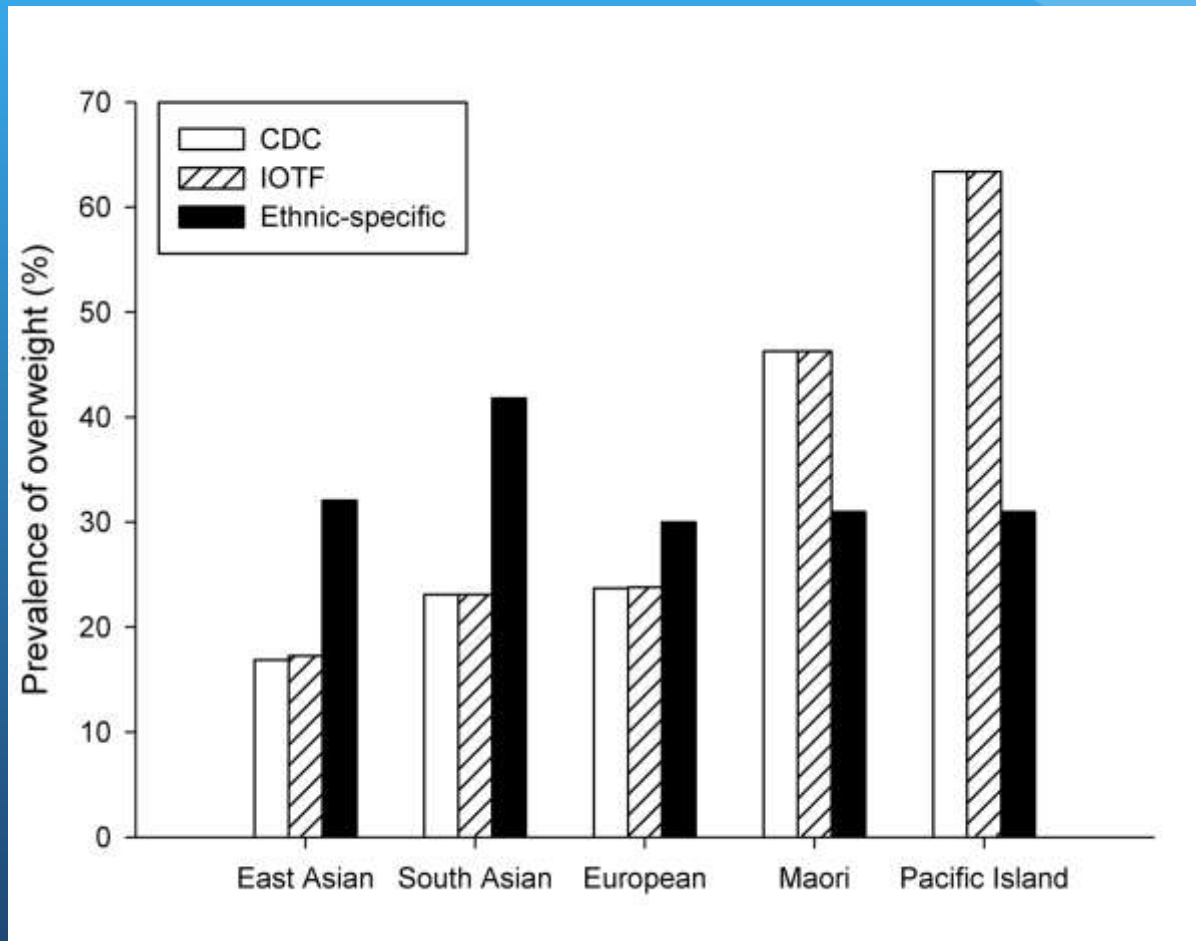
- Compared with gen pop, Indians living in NZ have:
  - Higher self-reported diabetes
  - Higher CVD hospitalisation and mortality rates
  - Higher ischemic heart disease hospitalisation rates
  - Higher stroke hospitalisation rates
- And...
  - Indian females have higher ischemic heart disease mortality than Chinese females
  - Indian adults have a higher prevalence of obesity than NZ Europeans
  - Indian adults are less likely to have adequate fruit and vege intake than NZ Europeans

# CPAN Research



Duncan et al (2009)

# CPAN Research



Duncan et al (2009)

# CPAN Research

- Indian immigrants become increasingly unhealthy the longer they are in NZ

Kolt et al (2007)

- Pilot health promotion initiative for older Indians reduced body fat and blood lipid risk factors
  - Recruitment difficult

Rush et al (2007)

- Primary care = natural solution
  - High compliance in South Asians
  - High reliance on GPs

# Brief Interventions Project

- Funded by HRC as part of Primary Prevention of Cancer and Other Chronic Diseases Research Strategy
- Partners: AUT University (lead), University of Auckland, Waioira, Harbour Health, HealthWest, West Fono
- Focus on physical activity, healthy eating, and weight management in at-risk patients
- ‘Brief’ defined as no more than 5 sessions (5-60 min ea)
- Target groups: Maori, Pacific Island, and South Asian
- Will determine costs/benefits of existing model and Whanau Ora (family) model

# Mast Raho

- Partners: AUT University (lead), Harbour Health, TaPasefika, The Asian Network Incorporated (TANI)
- Community-focused primary health service for South Asians at risk of CVD
- Driven from within the community
- Finding funding a ‘work in progress’

# Other Local Initiatives

- ADHB: funds Green Prescriptions targeting South Asians; forums for raising awareness about diabetes and CVD
- CMDHB: South Asian a priority group in LBD and CVD screening
- WDHB: Asian Health Support Services; BollyworX (SPROUT)
- ARPHS: Asian Health Website
- Harbour Health: Asian Smokefree Communities; Mast Raho
- Total Healthcare Otara: Arogya
- TANI: Mt Roskill community initiatives

# Where to from here?

- South Asians must be a top priority group
- Raise awareness in South Asian communities
- Recognise diversity of Asian communities: culture, language, religion
- Integrate primary and community health
- Solve the problem from within - citizen-centric approach

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