Non-communicable diseases sustained high call: China's health care model should be transformed as soon as possible

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Abstract

Background: There is sufficient evidence that the prevalence of non-communicable diseases (NCDs) in China is increasing rapidly. Results from the Fourth China National Health Services Survey (2008) show that compared to 2003, the prevalence of chronic diseases in China increased by 5%, while results from the Fifth National Health Services Survey (2013) showed an increase of 9% since 2008. As the world's most populous country and in the face of the rapid rise of non-communicable diseases, China lacks effective measures to achieve significant results on aspects of tobacco use, unhealthy diet, lack of exercise, harmful alcohol use and other risk factors. Of more concern is that the Chinese health care model is still stuck in the "medical services" stage. The "therapy" of health care models not only cause China to experience high health costs - there is also a steady increase in adverse health outcomes, with a failure to timely and effectively respond to the challenges of NCDs. Purpose: This article aims to analyze health care inputs and outputs since Chinese health care reform, and to provide a useful reference to improve Chinese future health care policies.

Study/Intervention Design: Cross sectional survey

Methods: The study used China National Health Services Survey and China Statistical Yearbook data, which was comparatively analyzed to focus on the distribution of health resources, population health status, health care utilization and health economic burdens before and after Chinese health care reform. Results: During Chinese health care reform in 2009 and 2013, more than 50% of health workers were in hospital and this rapidly increased each year, reaching 54.9% in 2013. In 2013, hospital health personnel were 6.5 times the number of specialized public health institutions; more than 57 % skilled workers were in hospital, rapidly increasing each year, reaching 61.4% in 2013. Similarly in 2013, the hospital technology personnel was 7.27 times the number of specialized public health institutions.

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public health institutions; health workers in the national disease prevention and control system were less than 200,000 and health technology personnel less than 150,000. In 2013, the proportion of health workers and health technicians in the national disease prevention and control system decreased to 2%. During the four year reform period, Chinese government health spending increased each year, reaching 827.99 billion yuan in 2013, 2.07 times that of the 2009 expenditure. Of the government health expenditure in 2013, 65.2% was allocated to "diseases", but public health (Chinese Center for Disease Control (CDC)) expenditure was only 14.6%. Under the "diseases" health care model, the total Chinese health expenditure decreased from RMB1.754192 trillion in 2009 to RMB3.166895 trillion in 2013, in recognition of the rapid rise in non-communicable diseases and enormous medical services utilization. Compared to 2008, the prevalence of residents with chronic diseases in 2013 increased by 9%. Compared to 2009, the annual clinic visits in 2013 showed an increase of 18.2 million people, while those discharged increased by 59.65 million people. Although China has established a comprehensive coverage of basic medical insurance, in 2013 the real burden of Chinese residents with personal medical costs is still up 52.5%. Conclusion: Since Chinese health care reform, the Chinese government has allocated a considerable amount of health resources to "therapy" hospitals which has improved the utilization of residents' health services to some extent. However, due to the lack of effective measures on NCD interventions, together with an ineffective health care model and an increasing prevalence of NCDs, the status of Chinese residents continues to reduce and their accompanying medical financial burden is still high. We therefore recommend that in the future, China should adopt decisive and effective measures on population intervention and "prevention" health care mode reform as soon as possible, to curb the high incidence of NCDs, ensuring the realization of China's “dream” of universal health.