

Lifestyle diseases - A New Normal

What is the issue?

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• Lifestyle diseases were earlier prevalent among the affluent section of the society.

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 Now it is proportionately prevailing among all economic sections and is a "new-normal" disease.

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A study based on lifestyle diseases explain this crisis.

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What are lifestyle diseases?

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- Lifestyle diseases characterize those diseases whose occurrence is primarily based on the daily habits of people and are a result of an inappropriate relationship of people with their environment.
- The main factors contributing to lifestyle diseases include bad food habits, physical inactivity, wrong body posture, and disturbed biological clock.
- Lifestyle diseases include, heart disease, and stroke, obesity and type 2 diabetes.

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- \bullet Diseases associated with smoking and alcohol and drug abuse. $\ensuremath{^{\text{h}}}$
- Regular physical activity helps prevent obesity, heart disease, hypertension, diabetes, colon cancer, and premature mortality.

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What is the new study about?

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• The distribution pattern of a range of lifestyle diseases across per capita consumption expenditure of persons has been found by plotting a pseudo-Lorenz curve for morbidity.

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• Using this the diseases has been classified into "affluent", "normal" and "deprived".

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• The incidence of these three diseases was 7.7% in 2004, shooting up to 17% in 2014.

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• These classifications are made from the obtained evidence from the surveys conducted by the National Sample Survey Office (NSSO) on "morbidity in India" in 2004 and 2014.

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How does this works?

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- **Pseudo-Lorenz curve** It is curve of income which plots the cumulative percentage of income from source on vertical axis.
- \bullet Cumulative percentage of population ranked by household income or consumption expenditure on horizontal axis. \n
- Such pseudo-Lorenz curves may be attempted for other items and for this study morbidity has been chosen.
- Naturally, the curve lies below the Line of Equal Distribution for items which belong disproportionately more to rich than to poor, like income and, in our case, lifestyle diseases.
- \bullet However, the curve lying above this line points towards the case when the items disproportionately belong more to poor than to rich. \n

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What does the classification signifies?

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• **Affluent** - The diseases under this category hits rich people more than they hit poor.

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- **Normal** The diseases under this category are the ones which proportionately affect all economic sections of the society.
- This proportion increased to 34.6% in 2014, clearly suggesting that many more people are now getting struck with "normal" diseases than they used to, in 2004.

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- This increase is much more in the case of urban India, where incidence of diseases rose from 36% in 2004 to 49.6% in 2014. $\$
- In 2004, the incidence of diseases prevailing proportionately among all sections (normal) of the society in rural India was 28.2%. $\$
- Our preliminary results show that states with significantly high proportion of "new-normal" diseases are Kerala (rural) and Andhra Pradesh (urban).
- For instance, heart-related diseases or diabetes, which were earlier associated with the affluent, are now prevalent among other sections too, particularly in rural areas.
- \bullet The study reveals that, in 2004, 64% of the diseases were associated with the deprived section in rural India.
- \bullet This percentage has gone down to 48.6% in 2014, due to the emergence of new normal lifestyle disease. \n

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Source: Financial Express

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