

Burden of asthma and chronic obstructive pulmonary disease and access to essential medicines in low-income and middle-income countries

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Demographic and epidemiological transitions are changing the age structure of the population and the most common diseases. Non-communicable respiratory diseases are an increasing problem at both ends of the age range in low-income and middle-income countries. In children, who represent a large proportion of the total population, the increasing problem of asthma is a strain on health services. Improved survival of the older population is increasing the proportion of morbidity and mortality attributable to chronic lung diseases. Health services in low-resource countries are poorly adapted to treating chronic diseases. Designed to respond episodically to acute disease, almost all historical investment has focused on infectious diseases. Crucial to the successful management of chronic diseases is an infrastructure designed to support pro-active management, providing not only an accurate diagnosis, but also a secure supply of cost effective drugs at an affordable price. The absence of such an infrastructure in many countries and the market failure that makes drugs generally more expensive in low-resource regions means that many people with chronic non-communicable lung diseases are not given effective treatment. This has damaging economic consequences. The common causes of poor lung health in low-income countries are not the same as those in richer countries, and there is a need to study why they are so common and how best to manage them.