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Submitted to **Consultation Paper for the National Preventive Health Strategy**
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Development of the National Preventive Health Strategy

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Vision and Aims of the Strategy

4 Are the vision and aims appropriate for the next 10 years? Why or why not?

Vision and aims :

TSANZ supports the vision and the focus on all life stages.

We believe that the vision should include prevention of ill health as well as improving health. We would also suggest that the phrase "targeting risk factors" is ambiguous. Tobacco, alcohol, poor nutrition and lack of physical activity are the leading causes of preventable ill health and "targeting" these risk factors does not clearly articulate what the course of action will be. What does it mean to target these risk factors?

We understand the broader causes of health and wellbeing as the social determinants of health.

We urge the government to include the impacts of climate change, occupational and environmental pollution in the Strategy.

We have provided detailed feedback on each of the aims below.

1. Best start in life

We welcome the life course approach. Respiratory ill health frequently starts in infancy and/or childhood. The First 1000 days (the period commencing at conception to the child's second birthday) is a critical evidence-based window of opportunity for the foundation of good health later in life, including for respiratory health (Darling et al., 2020). Whilst a focus on infectious diseases and injury is important, so too is ensuring that Australian children and pregnant women breathe clean air. This means a focus on controlling tobacco smoke inhalation, reducing pollution through effective planning and controls on diesel emissions. It also requires a focus on addressing climate change so that exposure to smoke from fires such as experienced in early 2020 is avoided in the future. There is no reason for young Australians to have access to e-cigarettes or ANDS. These products will cause damage in developing lungs. Addressing modifiable risk factors such as vaping and smoking in pregnancy and in early in life is crucial to preventing later ill-health (McAlinden et al., 2020).

Young lungs should be breathing clean air in order to prevent future respiratory disease. As respiratory disease is a leading cause of premature morbidity and has a burden of disease comparable to cardiovascular disease, ensuring the respiratory wellbeing of future generations is crucial. In addition to addressing the need to breathe clean air, prevent infectious disease and prevent injury, we strongly support programmes that support healthy eating behaviour, the prevention of obesity through the development of a National Obesity Strategy, further enhancements to food labelling and increasing physical activity. Strategies that increase access and affordability of healthy foods and which support positive healthy behaviours are vital. We further support the First 1000 days initiatives that take an holistic approach to improving health (including respiratory health) and emotional wellbeing throughout life. This includes increasing rates of breastfeeding through improved education, awareness raising and systems changes. We also recognise that maternal health is vital to the best start in life with prenatal maternal health being critical to infant lung health (Owens, 2016).

2. Live as long as possible in good health

Prevention requires action in the workplace. Too many Australian workers are exposed to dusts, fumes, and vapours and other disease-causing agents at work, which include carcinogens. Between 15-30% of non-malignant lung diseases are attributable to workplace exposures including asthma, COPD, lung fibrosis, lung cancer and pneumoconiosis (Blanc, 2019). Occupational health screening must be enhanced. Lessons from the coal workers pneumoconiosis and the accelerated silicosis disasters clearly demonstrate what can happen when poor workplace controls occur, along with ineffective systems for early detection through screening. No Australian should be contracting debilitating, life long and/or fatal chronic illnesses simply because they are going to work.

Risky behaviours such as tobacco, drug and alcohol use must be addressed using a robust, evidence base to support Australians to live a healthy life for as long as possible. Lobbying from vested interest groups including the tobacco industry and vaping manufacturers and suppliers must not be allowed to interfere with health policy or the long term health of Australians.

Lung cancer is Australia's leading cause of cancer death (AIHW, 2020). Screening and early intervention has the potential to radically change lung cancer outcomes. Investing in existing and emerging early screening intervention programs is crucial to support accurate and early diagnosis and effective treatment.

3. Australians with more needs

We are supportive of the aims and of the application of an equity oriented health system to ensure all Australians have access but that those most at risk or with poorer outcomes receive greater support.

4. Investment

We strongly support an increase in investment in prevention. In particular, we note the progressive underfunding of tobacco control measures and urge the Government to invest in national cessation service provision and sustained social and traditional media campaigns.

Respiratory disease affects 1 in 4 Australians and yet is woefully underfunded. Preventing respiratory disease through increased funding (including in research) should be a government priority.

References

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Goals of the Strategy

5 Are these the right goals to achieve the vision and aims of the Strategy. Why or why not? Is anything missing?

Goals :

The statements are not goals as written and we would encourage utilising key performance indicators or targets and use of evidence-based approaches to design systems to support prevention and early intervention. For example, despite smoking cessation evidence clearly demonstrating combination therapy with behavioural counselling has the highest success rate for achieving cessation, existing systems and restrictions prevent most Australian smokers from accessing best practice and may be contributing to tobacco-related inequities.

Mobilising a Prevention System

6 Are these the right actions to mobilise a prevention system?

Enablers :

Yes, these actions to mobilise a prevention system are essential. They must be funded and delivered. For example, smoking cessation in the health system is not embedded. Smoking data is frequently undocumented and delivered inconsistently. Ill health is one of the reasons smokers cite for giving up smoking yet the health system, lacks consistent, embedded and funded processes to support smoking cessation.

Monitoring and surveillance systems should include better measures to allow data linking between patient data and registry and research activities.

Boosting Action in Focus Areas

7 Where should efforts be prioritised for the focus areas?

Boosting Actions:

7.1 Reducing tobacco use

Finalise the National Tobacco Strategy and commit to:

- Achieving an adult daily smoking prevalence of less than 10% by 2025
- Establish a National coordination and best practice body for smoking cessation that ensures cessation is embedded in health care worker education is core business across the health sector and that evidence based cessation programs are implemented across the health system.
- Provide funding for research to improve successful cessation outcomes for tobacco and vaping

- Increasing utilisation of existing evidence-based services, such as Quitline
- Sustained multiyear funding for Indigenous and non-English speaking background sector cessation service provision
- Embedding evidence-based cessation support in alcohol and other drug services
- Support the development of smoking cessation guidelines for mental health care settings
- Actions to prevent uptake of smoking and vaping by young people
- Ensure article 5.3 of the FCTC is upheld across whole of government
- Media and social media campaigns that are sustained
- Ensure access to best practice smoking cessation therapies that are evidence based
- Extend smoke-free spaces into casinos and other currently exempt workplaces and into multi-unit dwellings
- Consider regulatory enforcement changes for smoke free spaces in hospital and health care grounds
- Protect smoke free spaces from the lobbying of tobacco and vaping companies and maintain them as vape free spaces
- Commence planning for a tobacco end game

7.2 Consumption of a healthy diet

- Commit to a First 1000 days nutritional strategy, including the deployment of systems, positive environments, and supportive awareness campaigns that increase breast feeding rates and support optimal nutrition
- Commit to and develop a National Obesity Strategy
- Review and update the Australian Dietary Guidelines
- Actively consider a “Sugar tax” on soft drink and confectionary items
- Consider restrictions on when and where non-core food advertising can occur
- Maintain and enhance the transparency of food nutritional labelling
- Enhance Public education campaigns

7.3 Increase physical activity

- Commit to a First 1000 days program for parents that includes a program focussed on; parenting skills; healthy eating behaviour, nutrition, physical activity and emotional well-being
- Commit to and develop a National Obesity Prevention Strategy
- Ensure local government planning and support systems for green areas and spaces for active recreation for all levels of ability
- Support the integration of health professionals with skills to be able to promote physical activity within ‘routine’ health care services
- Evidence-based interventions (e.g. public education campaigns) targeting workplaces, schools, vulnerable populations
- Embed Active transport Strategies at all levels of government

7.4 Increase cancer screening

- Enhance the existing population screening programs to include lung diseases
- Implement a large scale national trial for lung cancer screening to further identify the relevant cohort which should be screened, identify emerging screening technology and tools, and address the many deficiencies and resource limitations in the current health care system that prevent lung cancer patients from receiving clinical care in accordance with the Optimal Care Pathway.
- Support the development and funding of a national clinical quality registry for lung cancer

7.5 Improve immunisation coverage

- The influenza and pneumococcal vaccines are an important preventative strategy for both asthma and COPD. Rates of both influenza and pneumococcal vaccine uptake in people with chronic respiratory disease are suboptimal. This results in preventable (or lost opportunities to prevent) exacerbations of illness and increased hospitalisation and mortality
- All children and adults should be vaccinated vaccine as per guidance in the Australian Immunisation Handbook and the National Immunisation Program Schedule.
- Support research into vaccine development for infectious diseases that affect respiratory health
- Support research into assessment of vaccine effectiveness for those diseases that affect respiratory health
- Invest in strategies to increase vaccine uptake, such as influenza, with an emphasis, but not limited to, vulnerable populations including First Nations

The current COVID- pandemic has generated significant interest in, and debate regarding, both the potential for an effective COVID vaccination and at the same time generated some concern regarding the actions of people opposed to vaccination. There needs to be a systematic education and awareness campaign regarding safety of existing vaccinations. If and when a COVID vaccine is available, the safety of the vaccine will require evidence-based health messaging programs to ensure significant population level uptake.

7.6 Reduce alcohol use and other drug harms

Whilst alcohol and other drugs (with the exception of drugs which are smoked) are not a key area of intervention for respiratory health, we support and endorse the National Drug Strategy and the National Alcohol Strategy.

We would also add 2 additional focus areas:

7.7 Health at work

- Implement the findings of the Dust Diseases taskforce including the establishment of a national dust diseases registry
- Undertake a review of the efficacy of controls in high-risk workplaces
- Undertake a review of screening programs for workers in high-risk workplaces
- Establish a system for rapid case finding of outbreaks of occupationally related lung disease similar to that of the Center for Disease Control in the USA.

7.8 Take bold actions to ensure clean air and to address the health effects of climate change

- Prevent exposure to diesel fumes and other inhaled toxins eg by planning locations of childcare and schools away from main roads
- Implement a national air quality reporting system.

- Take urgent actions to reduce greenhouse gas emissions as a whole of government priority
- Public education
- Protect green spaces
- Invest in pandemic preparedness
- Invest in bushfire preparedness and associated health messaging

Continuing Strong Foundations

8 How do we enhance current prevention action?

Continuing Strong Foundations:

Whilst tobacco use is the risk behaviour which makes the greatest contribution to ill health, all the above focus areas are important to improve health outcomes. The actions for each focus require sustained and secured funding and a renewed commitment to public education and media campaigns.

An evidence based approach using established and proven programs of prevention such as mass media, taxation and support services should be pursued.

Addressing smoking, physical activity, nutrition, work place exposures and clean air will not only improve respiratory health but will also deliver benefits for cardiovascular health and cancer, three of the leading causes of Australian morbidity and mortality.

The Thoracic Society of Australia & New Zealand is fully committed to the optimal lung health of all Australians.

There is already an established evidence base on best practice for lung health and it is now time for implementation of this knowledge. This would have long term health benefits for all Australians, and also result in significant financial savings. Australia cannot afford to wait any longer for these actions.

Additional feedback/comments

9 Any additional feedback/comments?

Additional feedback: