

The triple burden of health problems and the challenges for the Unified Health System

The demographic and epidemiological transition processes have identified chronic non-communicable diseases (CNCDS) as the main cause of morbidity and mortality in Brazil. This scenario led the Ministry of Health to create an action plan to tackle these diseases, with measures especially aimed at vigilance and control of the main risk factors, the implementation of which is fundamental for enhancement of the quality of life of the population.

On the other hand, although CNCDS are responsible for the major share of the burden of disease in Brazil, the persistence of some communicable diseases and non-medical causes in the composition of the country's health profile are also a cause for concern. Traffic accidents and interpersonal violence, in addition to respiratory infections and HIV/AIDS, still contribute a relevant portion of the burden of adversities facing the Brazilian population. Furthermore, the improvement of programs for the control of vector-borne diseases, such as dengue, chikungunya and zika, continue to call for interventions that are essential to contain the expansion of these diseases^{1,2}.

More recently, the COVID-19 pandemic, caused by the new coronavirus, constitutes a global health challenge, requiring a rapid and coordinated response from governments and health systems in order to tackle a highly transmissible disease in a globalized world. Decision-making based on robust scientific evidence is necessary, and there is still a long way to go. The development of vaccines, clinical trials, expansion of diagnostic capacity, structuring of surveillance systems and reorganization of health services are just some examples of these challenges. In Brazil, social distancing measures have succeeded in delaying the explosion in the number of cases and enabling better preparation of health services in the face of the pandemic, though measures to minimize the economic, social and psychological damage, especially of the most vulnerable populations, are now of fundamental importance³.

In just over 30 years of existence, the expansion of the Unified Health System (SUS) has contributed to the reduction of the burden of diseases and illnesses on the Brazilian population and reducing regional inequities, however inequalities in access to services and actions of prevention and promotion still persist². In this moment of enormous challenge for the control of the COVID-19 pandemic, coupled with the recognition of the relevant burden that other diseases and non-medical causes exert on the Brazilian population, we must fight for the consolidation of SUS, as the only strategy to guarantee universal and quality access to health in the country. In addition to this, the importance of a robust science and technology system capable of responding quickly and efficiently to the different health problems affecting populations must be stressed, as this has been threatened by the increase in cuts in funding for research in Brazil.

In this issue, Revista Ciência & Saúde Coletiva brings together articles that clearly illustrate the scenario of the triple burden of problems facing health systems, duly highlighting the importance of the production of knowledge for the adoption of more effective measures aimed at controlling these adversities. The studies presented here are in line with the strategic research agenda for SUS, contributing to the enhancement of this system.

Sérgio Viana Peixoto (<https://orcid.org/0000-0001-9431-2280>)^{1,2}

¹ Instituto René Rachou, Fiocruz. Belo Horizonte MG Brasil.

² Escola de Enfermagem, UFMG. Belo Horizonte MG Brasil.

References

1. GBD 2016 Brazil Collaborators. Burden of disease in Brazil, 1990-2016: a systematic subnational analysis for the Global Burden of Disease Study 2016. *Lancet* 2018; 392(10149):760-775.
2. Souza LEPE, Paim JS, Teixeira CF, Bahia L, Guimarães R, Almeida-Filho N, Machado CV, Campos GW, Silva GA. Os desafios atuais da luta pelo direito universal à saúde no Brasil. *Cien Saude Colet* 2019; 24(8):2783-2792.
3. Werneck GL, Carvalho MS. A pandemia de COVID-19 no Brasil: crônica de uma crise sanitária anunciada. *Cad Saude Publica* 2020; 36(5):e00068820.

