

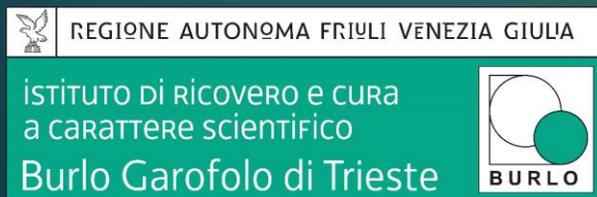
# The objectives, experience and perspectives of the *Italian Global Burden of Disease Initiative*

Lorenzo Monasta

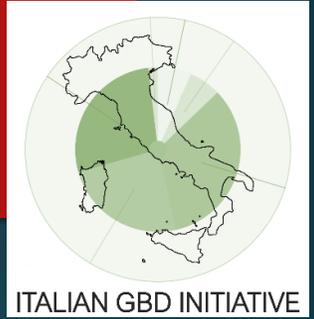
*Coordinator of the Italian GBD Initiative*

Clinical Epidemiology and Public Health Research Unit

Institute for Maternal and Child Health – IRCCS “Burlo Garofolo”, Trieste, ITALY



# The origin of the Italian network



From the first involvement of Italian researchers in the GBD in 2007/2008...  
...to the idea in 2015 of creating a national network of GBD collaborators.

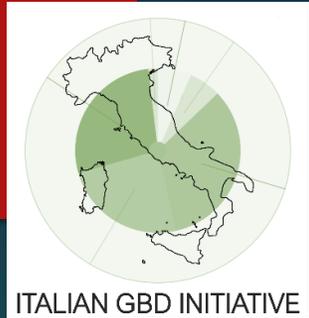
*why work alone? we believe research is a collaborative, open process.*

IHME provided us with the list of Italian GBD collaborators.

2016: First meeting of Italian GBD collaborators (12).

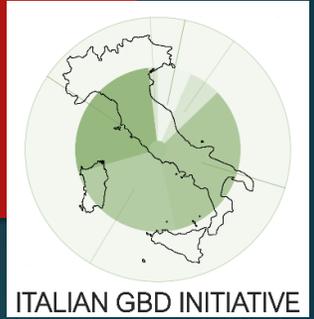


# Why get involved in the GBD? GBD Potential



- **Planning and prevention:**
  - Strongest and most complex effort ever to **collect, organize, weight evidence and elaborate models** at the global level – **evidence based**.
  - Offers a **unique and coherent link** among incidence, prevalence, burden, disability, early mortality, life expectancy, attributable risk, socio-demographic index, health system performance, sustainable development goals.
  - **Time trends and geographic comparisons.**
  - **In Italy, weakness of evidence based planning and prevention, but wellness of data and collaborative research groups.**
- **Research:**
  - Verify hypotheses, stimulated by unicity of the interconnection system.
  - Identify and react to **lack or shortage of original data** in specific areas or **lack of epidemiological evidence**

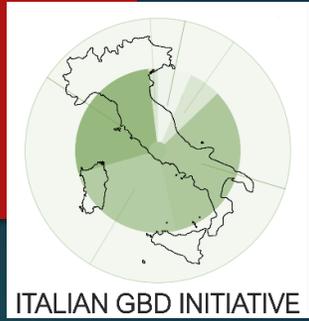
# Why not a national BoD?



- We admire the amazing work done and results achieved by **national BoD projects** and by the **GBD**.
- We started as **single researchers**.
- With a **bottom-up approach**.
- Without a formal mandate from MoH/NHS.
- Many of us work and have worked on BoD projects.

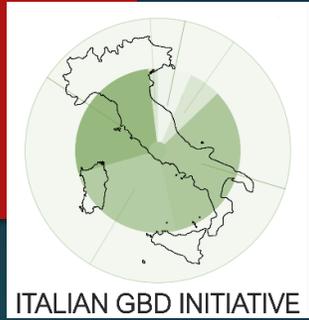
... and we understand the complexity of the machinery

# Why not a national BoD?



- We see no conflict between GBD and national BoD.
- As **integration** is possible between the systems.
- Customizations, adaptations, comparisons will enrich our knowledge and contribute to the final aim: **evidence based planning & fight inequalities.**

# Objectives and strategies



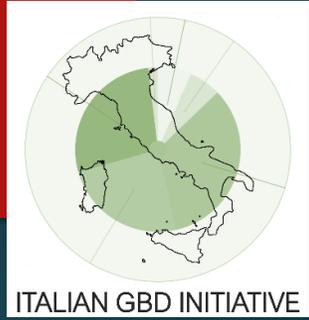
➔ **Share experiences, to strengthen the exchange with IHME.**

➔ **Spread results** generated by GBD, sustain their use as **instruments for planning** in Italy.  
(**the use of data, estimates and indicators, is best way to improve their quality**)

➔ With IHME, further **consolidate the sharing of data and information** that can be fed back to the system to generate increasingly better estimates.

➔ In agreement with IHME, **undertake the subnational process** for Italy (for 19 Regions and two Autonomous Provinces), thus allowing to **analyze geographic inequalities** (reflecting economic and social inequalities) → **Official subnational GBD estimates for Italy will be published in GBD 2020**

▶ **GAIN OWNERSHIP over GBD ESTIMATES**



# Who we are now (April 2021)

More than 90 collaborators joined the network  
from more than 25 research institutes (17 in the Framework Agreement).

- ▶ National Research Centers (ISS, CNR-Ist. Neuroscienze, INAIL) (2)
- ▶ IRCCS (Research Institutes of Hospitalization and Healthcare) (4) (3)
- ▶ Regional Health Authorities (4) (3)
- ▶ Regional Research Centers (ISPRO Toscana, CPO Piemonte) (1)
- ▶ Universities and university Departments (9) (6)
- ▶ Provincial Health Authorities (3) (1)
- ▶ Associations (GISED) (1)

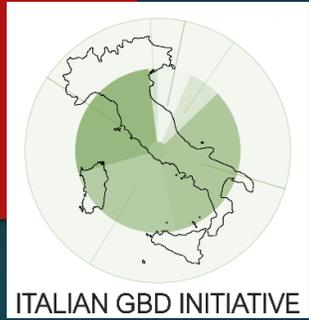
# Core groups

## Disease and injuries

- Cancers
- Cardiovascular Diseases
- Neurological Disorders ... +
- Chronic Kidney Disease
- Dermatological Diseases
- Diabetes I & II
- Maternal, Child and Adolescent Health
- Mental Health
- Musculoskeletal Diseases (\*)
- Occupational Health

## Risk factors

- Smoke and Alcohol
- Overweight and obesity
- Nutritional risk factors
- Environmental exposures & shocks
- Health Economics, SDI, HAQ Index, Inequalities
- ISS Group (National Institute of Health)
- Core Group of Regions



# Core groups

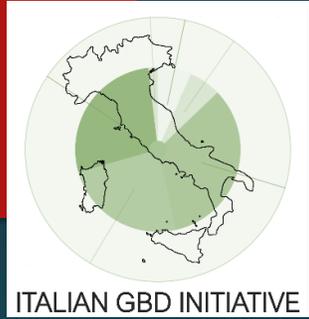


Some of the groups are now working on GBD 2019 «collaborator-led papers».

- ▶ Neurological disorders in Italy (Alberto Raggi)
- ▶ Redistribution of garbage codes to underlying causes of death in Italy (Lorenzo Monasta)
- ▶ Impact of air pollution on health in Italy (Sara Conti & Carla Fornari)
- ▶ NCDs in adolescents in Europe (Benedetta Armocida)
- ▶ Mental health in adolescents in Europe (Giulio Castelpietra)
- ▶ Diabetes Type II and socio-economic inequalities (postponed to GBD 2020) (Cristiana Abbafati)

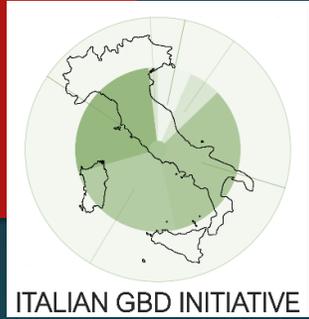
New ideas for new analyses on GBD 2020 are being discussed

# Core groups and tentacles



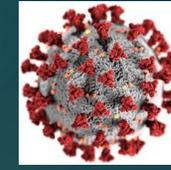
- ▶ **Core Group of Regions:** some Regional Health Authorities are starting to work on GBD estimates for local planning and the definitions of Regional Prevention Plans (first meeting with Piemonte, Toscana, Emilia-Romagna, Lazio, Sicilia).
- ▶ Setting up a **web site** and increase level of communication at national and regional level, for policymakers and the public.
- ▶ Need to **learn from European Countries** that have embarked on similar paths, and exchange with them knowledge and expertise.

# Mobilization and transparency



- ▶ **All groups will mobilize** as soon as subnational GBD 2020 estimates are published (July 2021?): planning to organize a series of web meetings to set up the agenda.
- ▶ We expect **big discussions** on subnational estimates.
- ▶ IHME and the Italian GBD Initiative are **open to discussions** on quality of data, quality of estimates, definitions, methods. *The more we discuss, the better the next estimates.*
- ▶ Issues will be identified and analyzed in detail.
- ▶ **Common objective** is to have the best possible estimates for evidence based planning.

# In the meanwhile... apart from Covid-19



ITALIAN GBD INITIATIVE

## THE LANCET Public Health

Articles

Italy's health performance, 1990–2017: findings from the Global Burden of Disease Study 2017

GBD 2017 Italy Collaborators\*

*Lancet Public Health* 2019;  
4: e645–57

Published Online  
November 20, 2019  
[https://doi.org/10.1016/S2468-2667\(19\)30189-6](https://doi.org/10.1016/S2468-2667(19)30189-6)

## scientific reports

Scientific Reports | (2020) 10:22099

OPEN

### National burden of cancer in Italy, 1990–2017: a systematic analysis for the global burden of disease study 2017

Cristina Bosetti<sup>1,2,4</sup>, Eugenio Traini<sup>2</sup>, Tahiya Alam<sup>3</sup>, Christine A. Allen<sup>3</sup>, Giulia Carreras<sup>4</sup>, Kelly Compton<sup>3</sup>, Christina Fitzmaurice<sup>3,5</sup>, Lisa M. Force<sup>6,7</sup>, Silvano Gallus<sup>8</sup>, Giuseppe Gorini<sup>4</sup>, James D. Harvey<sup>3</sup>, Jonathan M. Kocarnik<sup>3,9</sup>, Carlo La Vecchia<sup>10</sup>, Alessandra Lugo<sup>8</sup>, Mohsen Naghavi<sup>3,11</sup>, Alyssa Pennini<sup>3</sup>, Cristiano Piccinelli<sup>12</sup>, Luca Ronfani<sup>2</sup>, Rixing Xu<sup>3</sup> & Lorenzo Monasta<sup>2</sup>

## European Journal of Preventive Cardiology

Trends in cardiovascular diseases burden and vascular risk factors in Italy: The Global Burden of Disease study 1990–2017

Paolo A Cortesi<sup>1</sup>, Carla Fornari<sup>1</sup>, Fabiana Madotto<sup>2</sup>, Sara Conti<sup>1</sup>, Mohsen Naghavi<sup>3</sup>, Boris Bikbov<sup>4</sup>, Paul S Briant<sup>5</sup>, Valeria Caso<sup>6</sup>, Giacomo Crotti<sup>1</sup>, Catherine Johnson<sup>5</sup>, Minh Nguyen<sup>5</sup>, Luigi Palmieri<sup>7</sup>, Norberto Perico<sup>4</sup>, Francesco Profili<sup>8</sup>, Giuseppe Remuzzi<sup>9</sup>, Gregory A Roth<sup>10</sup>, Eugenio Traini<sup>11</sup>, Fabio Voller<sup>8</sup>, Simon Yadgir<sup>5</sup>, Giampiero Mazzaglia<sup>1</sup>, Lorenzo Monasta<sup>11</sup>, Simona Giampaoli<sup>7</sup>, Lorenzo G Mantovani<sup>1,2</sup>, on behalf of the GBD 2017 Italy Cardiovascular Diseases Collaborators

European Journal of Preventive  
Cardiology  
0(0) 1–13

© The European Society of  
Cardiology 2020  
Article reuse guidelines:  
[sagepub.com/journals-permissions](https://sagepub.com/journals-permissions)  
DOI: 10.1177/2047487320949414  
[journals.sagepub.com/home/cpr](https://journals.sagepub.com/home/cpr)



# Thank you!

Lorenzo Monasta

Email: [lorenzo.monasta@burlo.trieste.it](mailto:lorenzo.monasta@burlo.trieste.it)

Tel: +39 040 3785401

Cell: +39 320 4389138

 REGIONE AUTONOMA FRIULI VENEZIA GIULIA

ISTITUTO DI RICOVERO e CURA  
a CARATTERE SCIENTIFICO  
Burlo Garofolo di Trieste

