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| **Evidence of national health policy to reduce metabolic syndrome: A 10-year practice in Japan** |
| **Background** In Japan, the mortality of cardiovascular diseases is the highest behind cancer. A national health policy called specific health checkups (SHC) and specific health guidance (SHG) that focused on reducing Metabolic syndrome (MetS) for 40-74 years old people was launched in 2008. The aim of this study was to review a 10-year of intervention program including local community, occupational filed, and national reports of the Japanese government, and to advocate some recommends to the Japanese government for further improvement of its policy.**Methods** A multi-resource review was conducted in the present study. We reviewed 1) papers on intervention studies of SHC and SHG on Medline or Japan medical abstracts society, 2) national data on from the Japanese government. **Results** Although the rate of SHC has increased to more than 50%, the rate of SHG was still less than 20% in national population after 10-year practice. After SHG, MetS components have been improved according to the published papers, but the prevalence of MetS and pre-MetS have been hardly changed in the local community or national population since 2008.**Discussion** WHO demanded the all member of states to take actions at national level or local level, to attain the nine global targets, including that of a 25% of relative reduction in premature mortality from cardiovascular diseases, cancer, diabetes or chronic respiratory diseases by 2025 in the Global action plan for the prevention and control of NCDs 2013-2020. In this sense, Japan is the first state to take the national policy and great practice for reducing MetS targeting about 50 million people by the law. But the results of our review suggest that the government should increase in the rate of SHG and change the age of SHC target to under 40 years old. For this, the frequency of SHC should been changed from once a year to once per two years so that the health staff could focus their power and respond to the halved target people; and the government should introduce some incentive system: a health point system, a discount of insurance charges for beneficiaries who regularly complete the SHC and SHG, and so on. In conclusion, the national policy is effective but its impact is small. In order to effectively and efficiently execute this policy, some improvements are necessary.**Keywords** Metabolic syndrome (MetS), specific health checkups (SHC), specific health guidance (SHG), intervention, advocacy |