



Global health

2

Slide #:

notes

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Dr's name:

ahmed



Designed by Esraa Al-Salamin, dedication to Ghaida khraisat.

dr. ahmad notes

lec 2 for Dr Ahmad Bataineh

Slides 15-37 (SET 1)

these slides contain many many numbers but i will ask him whatt to memorize tomorrow inshallah smile emoticon

*15

factors that affect health and determinants of health by who from the graph, he read them

*16

current global health trends

he mentioned all of them but he focused on #2 (aging --> people above 65 and he said he will focus on this in the upcoming lectures and exam)

*17

he read it, its all numbers unsure emoticon but he talked about #6 (17 neglected tropical disease and th abbreviation NTD --> it means diseases that the world neglected and didnt focus on finding treatment or prevention just like Malaria and we will talk about many examples later on.

and he mentioned that women in jordan give birth to 3 babies (average) during their reproductive life (15-49)

*18

he read all numbers but he focused on ALMA ATA declaration 1978 and that 134 countries signed

*19 to 22 he read them and he said that this declaration is important to know so memorize please, and he sais that the goal of this is to put people in the center of health care..

*he also talked about the renewal of alma ata ,it started in 2005 and finished in 2008 annd published.

*22 point 9: best practices and country studies he mentioned breast feeding as something all women should do for the first 6 months..

*23 MDG you should know what it means: MILLENNIUM DEVELOPMENT GOALS.:AND THAT IT INCLUDED 8 goals and 21 targets ...started in 2000 and was set to be achieved in 2015! he mentioned this date more than once.

* 25 VERY IMPORTANT.

you should memorize all of these goals as he said its an exam question

*26

USSR is Union of Soviet Socialist Republics..

point 3 he mentioned that mental death diseases will be responsible for 1% deaths and 11% of total world disease burden. but he read te entire slide!!

* 27

VERY IMPORTAGANT

he said he will ask you about the 1st three diseases! so memrize them in order an do ot memorize all the 15..

- *28 he read and translated the slide..so i guess its important.
- *29 aand 30 he read everthing

global health initiative consultation document ->2009

*31

health disparities

focus on each definition.. he explained each one, like what does health disparity mean

*32

he read everything and focused on the reasons of disparities..

*33 indices of health disparities IMPORTANT TOPIC; 9 POINTS FROM SLIDE (33 TO 36)HE EXPLAINED THEM..

VERY IMPORTANT SLIDE -> 33 he said this is an exam question

the meaning of epidemiology transition: is that the global burden of disease is shifting from infectious diseases to non communicible diseases and some examples which r mentioned in slide

*35 HE SAID THAT the longest life expectancy is in japan, for females is 87 years grin emoticon

he also mentioned that you need to differentiate between epidemic, endemic and pandemic,

and i got these explanations from internet ,you probably know them

Endemic is an adjective that refers to a disease or condition regularly found among particular people or in a certain area.

A disease becomes pandemic when it spreads beyond a region to infect large numbers of people worldwide:

An epidemic is a widespread occurrence of an infectious disease in a community at a particular time

By mai ziad		
lecture 3		

Slide 1: measures of population health:

***4 aspects to evaluate the health population

*the difference between life expectancy and healthy life expectancy.

Used as Basic indicator of health: Mortality

slide 4: Burden of disease

- -we can define it by the following:
- IMR
- U5MR
- Adult mortality
- Life expectancy

- Cause of death profile : أسباب الوفيات
- Years of life lost (YLL)
- Prevalence of disability

Slide 15:

**Changes from communicable to non-communicable diseases

Slide 19:

the points are important

Slide 20: health systems will be covered by doctor sireen material

Slide 22:

Trends in global deaths:

we need to know first 2:

cancer and ischemic heart disease

In 2030 cancer will be the first cause

Slide 23, 24: comparative data:

there is a differences between developed and developing countries

GNP >> Growth national products

Slide 26,27:

in developing world : communicable diseases / developed : non-communicable diseases

Slide 28: ** life style factors.

The second set of slides :
Slide 2:
health transition detention
2 components : epidemiologic and demographic transition
slide3:
epidemiologic transition :
transition from infectious diseases to chroic , degenerative(NCD)diseases AS A PRIMARY CAUSE OF MORTALITY
slide 4 : causes are important
slide 10:
Demographic transition:
- transition from high birth rate and high mortality rate to low birth and low mortality rate .
slide 12 :
changes in life expectancy:
Doctor read the changes in life expectancy for all countries between 1900 and 2030
slide 13:
epidemiologic transition
infectious disease in 1900 it was epidemic >> in 1996 NCD are epidemic
slide 20 :

2 models for epidemiologic ad demographic transition

** western model: economic, technological, scientific

** new model : Mainly by economic

Slide 22

Most smokers live in developing countries

Slide 24:

Tobacoo is very dangerous and has very bad effects on health

Slide 28:

according to recommendations: fat consumption should not exceed 30%

protein: 10-15%

carbohydrates: 55%-60%

Slide 32:

BMI decreases after 2000

في عدّة سلايدات الدكتور ما قرأها سواء في السلايدات رقم 1 أو 2 ، الي بسلايدات رقم 2 في عدّة سلايدات الدكتور ما قرأها سواء في السلايدات ركم عدّة المحاضرة القادمة

بالتوفيق للجميع

تقى الغزاوي by

lecture 4

The doctor at the beginning started to discuss the first 16 slides of

set 2, then the first 14 ones of set 3.

Notice please that the doctor didn't skip any slide; he was reading and discussing all the points equally, I think you need to understand them all. Here are the main points:

Set 2:

- -slide2: the 2 interlinked components of health transition.
- -slides6-9: each stage with the main characteristics of its countries.
- -slides10-16-: the demographic transition, its stages and patterns with their corresponding features.

Set 3:

- -slide3: the general interconnected conditions.
- -slide5: the 3 definitions and the differences between them.
- -slides7-14: the social determinants of health.

by amani alahalabi

lecture 5

he basically read slides 16 - 45, did not skip anything, here are some points he mentioned but werent in the slides and stuff he focused on

slide 26 he only focused on the graph on the right and talked

about debits of Jordan compared with other countries slide 27, the foreign labour in jordan is more than 1 million 9% of Jordans GDP is spent on health while 7% is spent on education

unemployment insurance measures how well-developed a country is, it is an important indicator

HALE: healthy life years you spend without a disease Immunization in jordan is more than 95%

Very-low birth weight is under 1.5%

there are so many numbers in the slides but he only read them so it is up to you to decide whether to memorize them or not

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lecture 6

lide#2: definition of health was set by WHO, and now it should include (socially and economically productive life).

Slide#5: Characteristics of Indicators:

- 1) Valid, ex: if we want to determine the severity of a disease we should measure the Fatality rate.
- 2) Reliable, ex: we measure blood pressure by an instrument and we consider this instrument as reliable one, because blood pressure for this patient will be the same if anybody measure it by the same instrument or with small difference (+5,-5).

- 3) Objective: you should know that it depends on defined standard not subjective feelings.
- 4) specific: reflects only changes

.

Slide#7: Change specifically represents change of health status in a community whether it is positive or negative".

Slide#8: the period of time is one year (important).

Slide#9: Health is affected mainly by social and economical status of the country.

Slide#10: Indicators of quality of life is most important for elderly; ability of elderly people to do their daily activities (eating, washing, shopping) and whether they can do it by themselves or by help.

Slide#11:

- Crude means overall (elderly and young, male and female)
- CDR in Jordan is (5 per 1000)
- some countries (like Germany) have CDR higher than CBR, causing negative population growth. These populations consider children as a burden.
- IF CBR = CDR, population growth will be zero.

- For a country to have population growth, CBR should be higher than CDR.

Slide#12:

- Population growth rate in Jordan = 2.2% (very Important, it was mentioned in more than one lecture).
- Childbearing age (15-49) (very important).
- Fertility rate average in Jordan = 3.6 (important).

Slide#13:

- Life expectancy in Japan = 83 years (very well developed country).

Slide#14:

- CBR is measured per 1000 population in one year.
- CBR in Jordan: 27 per 1000, so we should expect that there is population growth.
- CBR in Africa is very high why? Combination of : High fertility + young age structure (more than 15 years). " doctor repeated thus twice"

Slide#15:

- IMR reflects health status + socioeconomic conditions in the

country.

- IMR in Jordan in 2008 = 19 per 1000. Alma Ata aimed to reduce IMR in the world in 2000 to 21 per 1000 live birth, so Jordan exceeded this number. (imp)

Slide#16:

- Highest IMR is in Angola, Afghanistan has high IMR also.
- Lowest IMR is in Singapore (2.3).

(The doctor mentioned all the countries with all the numbers but he emphasized the above ones).

Slide#17: Major causes of IMR in developed countries include:

- 1) Congenital Malformation.
- 2) Infection.
- 3) Sudden Infant Death Syndrome (SIDS). "It is written Short Infant Death Syndrome which is wrong, correct it

by salsabeela banihamad

lecture 7

Slide#19:

- MCH = Maternal and Child Health
- When MCH services increase, Mortality Rates decrease.

Slide#21: Sierra Leone has Highest Child Mortality Rate in the world.

Slide#23: Maternal death doesn't include death from accidental or incidental causes.

Slide#24: Major cause: Severe Bleeding/ Hemorrhage (25%).

Slide#25: MMR, this Ratio represents the % of women who die from pregnancy related causes to % of all women death.

Slide#26: highest MMR is in Sierra Leone

And lowest is in Iceland (equals 0)

Slide#27:

- Incidence indicates new cases.
- Prevalence indicates new cases + Old Cases.

Slide#28:

- Attendance rate: Number of patients who attend to the clinic.

Slide#29: Sullivan's Index, ex: life expectancy in Jordan = 73, if we want to measure the num of years that are free of disability we abstract 10, so Sullivan's Index in this ex will be 63.

Slide#30: DALYs include disability and premature death.

Slide#32: ex: life expectancy in Japan=83, if we assume there is a person died at the age of 60, so disability rate= 83-60=23.

23 is the num of lost years

- QALY, it estimates the num of years of life added by a successful treatment or adjustment quality of life.
- QALY= age of the patient at the time of operation (or any kind of treatment) + the num of years that were added By doing the operation, this is true if there was a dangerous case that will die if the operation wasn't done.

Slide#33:

- Anthropometric means measurements of the body; BMI, weight, body fat, ...etc.
- Weight measures (acute) malnutrition while height and Mid-arm circumference measures (chronic) malnutrition.
- For adults we usually use BMI as an indicator of overweight and underweight.

% of low birth weight in Jordan is = 13%, this is imp. The doctor said that it is written of one of his slides another num and you have to correct it.

Slide#35: SD = Standard deviation

Slide#37:

* It is written in the slides: "indicates current or recent episodes,....."

Add (of malnutrition) after it, so it will be: "indicates current or

recent episodes of malnutrition,"

Slide#38:

it is written in the slides: "indicates current or recent episodes. Fast, "

Add (of malnutrition) after it, so it will be: "indicates current or recent episodes of malnutrition. Fast,"

Slide#40:

- Every 526 citizens have one physician.

Slide#44: communicable disease e like water prone diseases.

Slide#45: You should know the numbers and percentages of : (V imp)

Total Fertility Rate (TFR) = 3.6

Family size = 5.8

Population increase rate (Growth rate) = 2.2%

Contraceptive use =58%

Slide#46:

- Life expectancy is not as imp as the quality of life.
- Proportion of GDP spent on Health services = 9% and on education = 7% (Very Very Imp).

Slide#47: PQLI= physical quality of life index.

Slide#48: Human development Index I s measured by:

- Life expectancy at birth
- Literacy rate

- Income- GDP per capita income