



University of Jordan
Faculty of medicine
Batch 2013-2019



Global health



Slide # : 2



Dr's name: samar



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

Dr.samar al shareef notes

First lecture :

Slide 3 : the doctor focused on the definition of health

Slide 4 : the doctor focused that physical and mental health are interdependent not independent

Slide 6 : the doctor focused on the individual factors that determine the person's health

The doctor skipped slides 7-10

Slide 11+12 are important

Slide 13 : the doctor explained the figure that promotion and prevention includes : genetic factors , health services , social determinants of health

Slide 15 : the doctor focused on the concepts that maternal health care encompasses and skipped the rest of the slide

Slide 17 : the doctor said that the most important post-natal care is FAMILY PLANING (IMPORTANT) Two thirds of all maternal deaths occur in the first 24 hours after birth (important)

Slide 19 : maternal deaths in the developed world is about 1% of the maternal deaths occuring globally

the doctor skipped slide 20 -24

slide 25 : the doctor emphazied the difference between pregnancy related mortality and maternal mortality is that : pregnancy related mortality only include the direct causes of death like hemorrhage but maternal death include direct and indirect causes of death (indirect like cancer)

Slide 26 : the doctor said that canada and part of Europe have maternal mortality of less than 10 but southern africa have maternal mortality of more than 1000 (important)

slide 28 : OBSTETRIC HEMORRHAGE is the most common GLOBAL

cause of maternal deaths (v.important)

Slide 29 -32 are very important (memorize them)

By Ali Khrisat

second lecture :

Slide 36 : numbers mentioned are important

Slide 37: **** important**** poverty major cause of child illness and death mainly in Africa and Subsahara

high fertility means more risky pregnancies

Slide 38: Infant (1month-1 year old) Important indicator of child health

****important**** ImR per 1000 live births

Slide 39: early neonatal death - first week

Late neonatal - (7-28) days of life

Postnatal - 29th day till first year of life

Difference between

1.LBW : although the fetus completed the all three trimesters , still have problem with his normal weight

2.premature : didn't complete the pregnancy period consequently having under normal weight

******* LBW and VLBW

****** the younger the neonatal the higher risk the child to die

Slide39 : numbers important

pregnancy complications mainly preeclampsia

Slide 41 : *****three quarters (75%) of neonatal death occur in first week after birth (early neonatal period)

Slide 42: IMPORTANT difference between perinatal and fetal mortality rate

Perinatal care considered as a more sensitive indicator of child mortality

Slide 43: fetal death : after 28 week of gestation

Abortion : during first 28 week of gestation

Slide 44 45 46 important with numbers

Slide 47: U5MR- sum of All rates expressed per 1000 live births

After 1 year of birth in poor communities the major cause of death malnutrition , poor housing , poverty and poor immunity due to no vaccination available

In developed countries the cause infectious diseases

Slide 48 : the name of the clinic for child care until five years old called One baby clinic

Slide 50 Very important Sum of infectious causes 62%

Slide 51 neonatal mortality= early neonatal + late neonatal = more than 50% of infants die in neonatal period in developing regions

Slide 52: 38% of all newborn deaths occur in 4 countries in South Africa (1.5 million out of 4 million newborns)

Slide 53 53 55 ***

Slide 56 INFECTIONS 36 % of newborn deaths

ASPHYXIA 23%

Preterm 27%

Slide 57 : you conclude that child are at higher risk to die than the maternal

Slide 59 : emerging : acute epidemic ,first time to face such problem

Re emerging : problems finished then re emerged after a period of time

Swyne flu---- H1N1 virus

Slide 60 : MOST IMPORTANT PREVENTIVE INTERVENTION : vaccination

Tetanus toxoid taken in communities with high home delivery

Malaria in pregnancy is a killer disease

Slide 64: corticosteroids are taken to boost maturation of fetus

Slide 65 important

Slide 66 start with the social determinants and risk factor reaching morbidity and mortality (ps dr Samar didn't say anything else than that)

Slide 67 : 99% of ALL maternal deaths occur in developing countries

The rest dr Samar read them quickly.

by sara al ibrahim

3rd lecture:

* The percentage of deaths in low and middle income countries = 85%

* Leading causes of death in developing: infectious diseases VS
In developed: non-communicable diseases

* Slide #3: factors contributing to emergence are 4 : Host, Agent, vectors and environment

- The disease burden is determined by how serious it is (mortality rate), Spread (range + speed), immunity of the host, global distribution and ability to afford vaccination coverage

* Slide #4: in 1900 (19th century) the leading causes were infectious –more than 50% of the list- VS 1992 (20th century) they became non-communicable diseases

- HIV Emerging in 1981 , others say in 1983 (خلبنا نتفق للامتحان إنه أول)
(مرة ظهر في 1982)

* Slide #7: the major thing causing Neonatal tetanus to drop down is increased percentage of hospital deliveries (not at home) + hygiene

* Slide #11: immunity issue is very important in elderly, child and immunocompromised patients (in terms of severity)

* Slide #12: urbanization (from rural to urban) = overcrowding

- Urbanization in Jordan =82%

* Slide #13 : breakdown of public health measure , example: polio

epidemics in Al-za3tari last year

- Surveillance system is a system used to study the agent and what it exactly affects , its spread and antibiotics used against it (it is very expensive)

* Slide #16: no numbers to save here just notice how number of passengers has increased by folds (more than 30 fold ta2rebn)

* Slide #17: wrong prescribing : patient with viral infection--> prescribing antibacterial drug instead if antiviral

- Non-adherence by patients: when the patient feels well and treated, he stops the drug course and this is wrong

- Counterfeit drugs: taking more than one antibiotic in the same time

* Slide #20: important slide

* Slide #21: infectious disease mortality in united states dropped from 800 per 100000 in 1900 into less than 10 per 100000 in 1980

- Notice the huge increase in the rate in 1920

* Slide #22: (the most important years to be memorized) are:

- Hepatitis C 1989

- HIV 1982

- Ebola 1977

- Rotavirus (most common cause of diarrhea in children) 1973

* Slide #25: the most important are:

- H1N1 emerged in 2009

- SARS (severe acute respiratory syndrome) 2002

- Swine fever 1996

- Plague 1994

* Slide #26: we care for hepatitis C because it causes liver cancer and its prognosis is very poor + the damage is irreversible + portal hypertension is caused

- high risk population to hepatitis B are illicit drug users and health providers (y3ni e7na)

- hepatitis B is mainly transmitted by blood bit it is also sexually transmitted

* slide #29 : very important slide

- why they considered SARS as epidemic disease : serious (high mortality + sprEad Globally)

- don't memorize #s just be aware where the cases were high the highest was in Hong Kong in china

by **امنة منير**

4th lecture:

Slide #22 we need to memorize years of Ebola,Hepatitis c,cholerae,H-pylori,HIV,E-coli

*people who are in high risk to have hepatitis are those who deal with blood and injections

*SARS is very important inf. Disease because it has spread so fast and far also it has high mortality rate

*The highest num of SARS cases was recorded in Hong kong (1755)

* Hepatitis C,B and TB are considered chronic Inf.diseases becuse they need long term treatment and any time they can be activated in the body and on long period they can cause cancer .

*H5N1 infection due to direct contact with birds infected with virus not like H1N1 which transmitted by droplet

*H1N1 have low death rates

H1N1 was mainly reported in 2009

The highest num of cases was reported in Mexico

*Cholera is transmitted by oral-fecal ways and the highest epidemic rate was in Asia so it has been known as Asian cholera .

* Oral rehydration therapy is the first thing to do with cholera infected people

* cholera cases must be weekly recorded

*The most common cause of diarrheal diseases is Rotavirus (15 - 25%) then E-coli (10-20%)

*E-coli cause bloody dirrhea and it can be resistance to many antibiotics

* Diphtheria is transmitted by droplet infictions and there was problem in coverage of vaccines so it came back after 12 years .

*Ebola is important reemerging diseas and have high mortality rate

#Slide H-pylori is important

* TB can attack any part of the body and outbreak locations is important

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*slide of Inf.diseases and chronic diseases the last 4 is important

by dania al-dajeh
