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Topic: Modern Public Health and Clinical Practices Introduction Chronic diseases are often not given the attention they deserve. This is despite them accounting for approximately 60% of all deaths worldwide. Public health agendas are usually devoid of articulation on chronic diseases particularly in developing and emerging economies due to two reasons (Halpin, Morales-Suarez-Varela & Martin-Moreno, 2010; Schaller & Sandu, 2011). First off, the developing nations usually put much of their attention and efforts towards dealing with infectious diseases. The other reason is that most of the commonly known chronic diseases such as diabetes and cancer have been known and thought to afflict the affluent or developed countries. Surveillance is an important element of modern public health and as such, the lack of surveillance systems for chronic diseases has led to an unprecedented increase of these diseases around the world (Bunker, 2004). This paper will therefore articulate the contribution of modern public health and clinical practices towards treatment and prevention of chronic diseases. There is however a paradigm shift in the perception of chronic diseases worldwide especially after international organizations concerned with health have mounted campaigns against chronic diseases. A lot of confusion abounds especially with regards to the perceived connection between non-communicable diseases and chronic illness which is non-existed. There has been an increased knowledge in health matters through clinical education whereby now people are aware of the fact that life expectancy increase due to better healthcare (Frieden, 2004). Moreover, chronic diseases are being experienced among populations that previously were never affected but had shorter life expectancy. Much of the current new knowledge on health matters can be attributed to concerted efforts of modern public health efforts with help from clinical medicine through doctors (Rychetnik, Hawe, Waters, Barratt, & Frommer, 2004). The modern public health has undergone revolution overtime from the known clinical care provision to the more involving role of assurance. Similarly, the prevention, control and treatment of chronic diseases the provision of care directly for instance health screening usually have strategic importance. Unfortunately, this strategic importance is usually seen or taken casually in favour of other broader issues concerning health care (Egger, 2012; Tulchinsky & Varavikova, 2010). The prevention of auxiliary complications associated with many chronic diseases like diabetes and obesity can be easily done by using the readily available medical interventions. On the contrary, many of people suffering from diabetes or even high blood pressure do not have the underlying conditions adequately controlled. It follows then that monitoring and promotion of treatment of all chronic diseases should be done within local heath care systems. It has been shown that the control methods of disease outbreaks are not adequately utilized with regards to treatment and prevention of chronic diseases (Engel, 2010). The new modern and comprehensive approach to prevention and treatment of chronic diseases is concerned with common risks that exacerbate the chronic diseases’ morbidity on global a global scale. Prevention of chronic diseases is predicated upon adoption of the correct intervention measures which act on the main risk factors of the chronic diseases in question. For this to happen, it has to be visualized within public health policies which are essentially governmental as well as non-governmental organizations interventions that target environmental and behavioural change (Schaller & Sandu, 2011). These changes are geared towards promotion of healthy living behaviours and lifestyles that lead to the prevention of chronic diseases. The improved prevention public health strategies have led to societal benefits such as reduction of costs in health care systems and productivity increment in people. On the other hand, approaches of clinical management of people with diabetes and obesity have led to better outcomes than earlier anticipated (Pushka, 2002). Currently, international health agencies like WHO (world health organization) are increasingly being involved in the expansion the scope of public health focus with regards to chronic diseases. This is being done through different means and one of them is by NCD (non-communicable disease) action plan together with other regional plans. Such noble action plans are a depiction of the modern public health approaches that are based on inter-sectoral and multi level emphasis on research and surveillance (WHO, 2008). Conclusion Chronic diseases have evolved over the years to become a public menace and accounts for many deaths worldwide. Many public health agendas usually do not take into consideration or articulate the serious challenges brought by chronic diseases especially in the developing world. The morbidity of chronic diseases especially the ones associated with sedentary lifestyles has been on a steady increase especially in the developed world. Due to the increase of its morbidity and the high prevalence rate, more public health specialists are needed so that they can help in the study and control of these diseases. The modern clinical approaches in the treatment and prevention of chronic diseases are currently overwhelmed by enormous amount of research that is needed. However, clinical approaches to the treatment and prevention of diseases such as diabetes have led to better outcomes than previously thought. International health organizations such as WHO are also helping in furthering the efforts of modern public health by expanding the scope of public health focus with regards to chronic diseases. References Bunker, J. P. (2004). The role of Medical Care in Contributing to Health Improvements within Societies. International Journal of Epidemiology, 30 (6), 1260-1263. Egger, G. (2012). In Search of a Germ Theory Equivalent for Chronic Disease. Prev Chronic Dis, 9: 110301. DOI: http://dx. doi. org/10. 5888/pcd9. 110301 Engel, J. P. (2010). Prevention: A Statewide Perspective. North Carolina Medical Journal, 71 (1), 52-54 Frieden, T. R. (2004). 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