Editorial

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Ninety years ago, Winslow defined Public Health as “the science and art of preventing disease, prolonging life and promoting health through the organized efforts and informed choices of society, organizations, public and private, communities and individuals” (Winslow 1920), and this issue of the Journal of Public Health is the practical witness of the science and of the underlying art.

Moreover, as underlined by Koyuncu and Kirch, Public Health, dealing with disease prevention at the population level, occupational safety, regulations of products and environmental health, needs a sufficient legal foundation for the establishment of infrastructures and its proper function. In this regard, the paper presented by González-Andrade and colleagues emphasizes the importance of a National Register of Hospital Admissions/Discharges in a situation where a specific official public medical poisoning registry or disease-specific registries are lacking. The authors report their experience in Ecuador, where pesticide poisoning occurs in individuals of both sexes who are between 15 and 25 years old and work in adverse conditions as agricultural farmers. The use of such types of data sources makes clear that poisoning especially occurs in flower and banana plantation workers and that the vast majority of cases are due to organophosphate and carbamate poisonings, responsible for death in 4% of the cases.

Concerning disease prevention, Langiano et al. emphasize that some infectious diseases are far from being completely under control, particularly focusing on measles, mumps and rubella (MMR). The prevention of this kind of

disease is strongly related to educational issues, and above all, there is a strong need of concerted efforts in order to educate young adults about the benefits of vaccination and to raise their level of consciousness to motivate them to request vaccination.

Moscato et al. present a multicenter survey on musculoskeletal injuries among operating room nurses. In this study, they focus on chronic disorders of the musculoskeletal system, particularly low back pain (LBP), that have been increasing in recent years and represent a social and economic problem of growing importance, especially if correlated with working conditions. The authors suggest that it is important to promote new programs of prevention based on professional training and physical activity among nurses and to improve the organization of work shifts in the hospital. Concerning the same health issue, Mesquita and colleagues develop the Portuguese version of the standardized Nordic Musculoskeletal Questionnaire. This kind of operation is of great importance for at least two reasons: self-administered questionnaires are fundamental for clinical assessment and research, and the use of recognized questionnaires in different languages facilitates the compilation of reliable data for making international comparisons. Moreover, from the methodological point of view, as researchers we need tools that can be reliable in different cultural contexts.

The impact of a novel preventive care service (PCS) on the incidence of hip fractures among the elderly in Sweden is the subject of the study presented by Krüger and colleagues, which aimed to determine the impact of a service employing home visits by non-physician experts on the incidence of hip fractures among the elderly. The authors found that there is an impact on both the efficacy and the efficiency: they reveal the impact of the PCS with results showing about 8.27 fewer incidents of hip fracture

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in the short term and about 3.74 fewer incidents of hip fracture per year in the long run; moreover, the examined preventive care service is an economically efficient measure (the social costs of falling accidents amount to about €0.48 billion each year).

Concerning the “prolonging life” issue strictly related to public health, an interesting survey was conducted by Mortensen and colleagues on a qualitative study of women’s anxiety and information needs after a diagnosis of cervical dysplasia. This study shows how important it is to address women’s fears and their need for information, and to ensure better communication with medical practitioners about cervical dysplasia immediately after diagnosis, demonstrating that secondary prevention (screening) is not sufficient by itself, but must be accompanied by something more, i.e., interaction with the patients, and providing correct information about the diseases and the cure process in order to give the best value of health care.

Promoting health is another public health issue, and it is impossible to prevent diseases without enough data to have a clear picture of the burden of disease in a certain country. Babu et al. describe the epidemiology of suicide in Kerala, India. The authors report a high rate of suicide compared to the national rate. Family problems, ill health and economic issues are the main reasons for suicide, particularly for men (the male:female ratio is almost 3), young people (age group between 15 and 59 years), being self-employed among males and being homemakers among females.

The appropriateness of health care utilization and barriers to accessing health services are key points in modern public health. In this issue of the Journal, three

papers deal with these factors. The first one, by Dias and colleagues, describes perceptions and experiences related to access and utilization of health care services by African and Brazilian immigrant women in Portugal. The authors report that within a multicultural setting like the Portuguese one, the challenges to providing integrated and comprehensive health care services need to be highlighted, considering that for an immigrant woman there could be several barriers to the access and utilization of services related to legal issues, economic constraints and health professionals’ attitudes. Another vulnerable group is represented by children, and Vincitorio et al. report the experience of one of the richest Italian regions where hospital admission costs account for more than 50% of total health expenditures. The authors show that high costs of hospitalization are partly explained by inappropriate use. The appropriateness of admission and days of stay in a pediatric hospital were assessed using the pediatric appropriateness evaluation protocol, which is a valid tool in the hands of managers for monitoring the appropriateness of admission and stay. Finally, Babitsch et al. clearly report that in an emergency situation, the process of help-seeking is clearly influenced and can be accelerated by factors such as the complaint, the perceived severity of the complaint and socio-cultural factors, such as gender, ethnicity and social status.

Reference

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