AMJ Australasian Medical Journal [AMJ 2016;9(12):541–542]

Healthcare challenges in relation to environment, healthcare providing and policy making

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EDITORIAL

Please cite this paper as: Wang W, Fan H. Healthcare challenges in relation to environment, healthcare providing and policy making. AMJ 2016;9(12):541–542. https://doi.org/10.21767/AMJ.2016.2845

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[Health guarantee for people depends on clinical practitioners, environmental protectors and executive policy makers, and the current issue provides further evidence in these regards. Newborn babies, pregnant women, and other populations in the world including South Africa are all target people, and our international colleagues are working toward the goal of healthcare construction.

Firstly, Kuzgibekova et al. detected the state of health of 4,078 children among the child population in the Karkaraly district of the Karaganda region, with 2,272 children living in the Osakarov district of the Karaganda region (as the most ecologically favorable district) as the control group. The authors have found that the child morbidity in the Karakaly district exceeded that in the Osakarov district by several times in almost all cases, revealing the impact of the adverse ecological situation.[1]

Regarding policy-making, Louw et al. studied current documentation such as articles, books and newspapers as primary sources to explore and descriptive the present-day scope of practice and services of the South African traditional healer. They concluded that the practice and rights of the South African traditional healer are unwritten and legally regulated.[2] Louw et al. also completed an exploratory and descriptive study that makes use of an historical approach by means of investigation and a literature review. The authors focused on present and future roles of traditional health practitioners within the regulated healthcare sector of South Africa, as guided by the Traditional Health Practitioners Act No 22 (2007), and recommended alternatives like accommodating traditional healers in some professional Health Councils as healthcare professionals, to assure the continuation of traditional healers as practitioners in the South African healthcare sector.[3]

The Traditional Health Practitioners Act No 22 (2007) in South Africa is also mentioned in other three articles, using the modern-day history approach of the investigation and literature review. Louw et al. tried to determine if the numbers of traditional healers with bona fide status in South Africa were 200,000, and the false of the assumption presented a critique of Act No 22 (2007).[4] Louw et al. found the proportion of South Africans regularly consulting traditional healers were quite low.[5] In addition, Louw et al. investigated thoroughly the definition for the traditional health practitioner.[6] Altogether these articles suggest that the formulation of the Traditional Health Practitioners Act No 22 is worth being discussed.

For a special population, Shastri et al. described the clinical profile and outcome of confirmed rRT-PCR H1N1 pregnant females at Sir SayajiRao General Hospital (SSGH) and Medical College, Vadodara admitted during the pandemics of 2010 and 2015. The mortality of pregnant females in the study was about 60, indicating that awareness, early diagnosis and treatment should be provided to this weak group.[7]

Furthermore, Barman et al. reported a rare case from Indian subcontinent of severe leptospirosis and secondary hemophagocytic syndrome: a 40 year old male patient with high grade fever and jaundice and later was complicated by multi organ dysfunction and death despite aggressive management. The case highlights leptospirosis

as a rare cause of hemophagocytic syndrome.[8]

In addition, Alabdulwahhab have assessed the prevalence and risk factors of diabetic retinopathy in patients with type II diabetes mellitus in Al Majmaah City, Saudi Arabia. Authors had conducted a cross-sectional study design on 327 randomly selected diabetic patients, taking a detailed history and performing ophthalmic examination. The study findings revealed the prevalence of diabetic retinopathy among the study group was 35.8 per cent, which indicated the demand for establishing and promoting national screening and management programs for diabetic retinopathy.[9]

The contributors to this issue have provided good evidence or opinion towards the building of qualified healthcare, which are profound worldwide. Future endeavours will meet the challenges of looking for detailed environmental factors to disease, utilizing available healing methods, and reducing disease burdens.

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PEER REVIEW

Peer reviewed.

CONFLICTS OF INTEREST

The authors declare that they have no competing interests.