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Basic Health Indicators Changes after Natural Disasters

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Introduction:

On disaster site quality of medical services that provided by foreign medical teams is variable. Greater part of foreign field hospitals has organized to offer emergency medical care and to perform life-saving intervention. Health impact after natural disaster research is to important for improving medical planning response.

Methods:

The dynamics of main health indicators after 42 earthquakes, 38 floods and 37 storms have been studied. Dynamics of following figures have been investigated:

- ◆ under-five child mortality rate;
- ◆ maternal mortality rate, and
- ◆ adult mortality rate

Also researched of pulmonary tuberculosis incidence and prevalence have been done. Level of immunization by DTP 3 and MCV (%) has been studied as model of Disaster impact to Public Health system.

In our presentation will described the compare of health outcomes worldwide with health outcome after Ukrainian natural disaster (flood). In addition the principles of health optimization will be shown.

Results: After natural disaster under-five years child mortality rate and maternal death rate has been increased in average on [+ 6,93%] and [+ 5,53%] respectively; also we noted increase in adult mortality rate [+3,8%], tuberculosis incident [+7,2%], tuberculosis prevalence [+10,6%]. Immunization level of DTP and MCV 3 decreased [-5,0%] and [-3,7%].

Conclusion: The analysis shows a clear picture of Basic health indicators changes after Natural Disasters. Health impact after natural disasters requires establishing multifunctional tent hospitals for medical assistance to obstetrics, gynecology and pediatric, including neonatology services in disaster site. Patients with tuberculosis, AIDS and hepatitis are marked as the «group of risk» and need for establish separate departments at field hospitals and/or at the recovered clinics. During the presentation a description of the needs of emergency surgery in emergency relief operation after natural disaster will be presented.

Keywords: natural disaster, public health, health indicators, medical response