

Chapter 20 Epidemiology

Summary Outline

20.1 Principles of epidemiology

- A. **Epidemiology** is the study the **frequency** and **distribution** of disease in order to identify its **cause, source** and **route of transmission**.
 1. **Epidemiology** is concerned with the **rate of disease in a given population**.
 2. **Endemic diseases** are constantly present in a population.
 3. An **epidemic** is the occurrence of a disease in larger numbers than would be expected in a given population.
 4. An **outbreak** is a cluster of cases occurring during a specific brief time period and affecting a specific population.
 5. A **pandemic** is an epidemic of world-wide proportions.
- B. **Reservoirs of infection:** Continuous source
 1. **Human reservoirs: Infected people** and people who are **carriers** of the infectious agent
 2. **Nonhuman animal reservoirs: Zoonotic diseases** are those such as plague and rabies that can be transmitted to humans but exist primarily in other animals.
 3. Diseases with **environmental reservoirs** are probably impossible to eliminate.
- C. **Portals of exit** include
 1. In **feces**
 2. In **respiratory droplets**
 3. On **skin** cells
 4. In **genital secretions**
 5. In **urine**
- D. **Transmission**
 1. **Hand washing** is an important control measure in preventing diseases that are spread through **direct** or **indirect contact**, as well as those that spread via **contaminated food**.
 2. **Direct contact** occurs when one person physically touches another. Diseases with a **low infectious dose** and those caused by **pathogens that cannot survive for extended periods** in the environment are generally transmitted through **direct contact**.
 3. **Indirect contact** involves transfer of pathogens via **fomites**.
 4. **Droplet transmission** of respiratory pathogens is considered direct contact because of the close proximity involved.
 5. **Food-borne pathogens** can originate from the animal reservoir or from contamination during food preparation.
 6. **Waterborne pathogens** often originate from sewage contamination.
 7. **Droplet nuclei**, dead skin cells, household dust and soil may carry airborne respiratory pathogens. This type of transmission is most difficult to control.
- E. **Vectors**
 1. **Mechanical vectors** result in moving the microbe from one place to another.
 2. **Biological vectors** are a required part of a parasite's life cycle.
 3. Prevention of vector-borne disease relies on control of the vector.
- F. The **portal of entry** of a pathogen can effect the outcome of disease.
- G. **Factors** that influence the epidemiology of disease
 1. The **dose**: The probability of infection and disease is lower if an individual is exposed to fewer numbers of pathogens.
 2. Diseases with a long **incubation period** can spread extensively before the first cases appear.

3. Population characteristics
 - a. **High percentages of immunity** in a population make it difficult for a disease to spread.
 - b. **Malnutrition, overcrowding and fatigue increase the susceptibility** of people to infectious diseases.
 - c. **Age**: The **very young** and the **elderly** are generally **more susceptible** to infectious agents.
 - d. **Natural immunity** can vary with **genetic background**, but it is difficult to determine the relative importance of genetic, cultural and environmental factors.

20.2 Epidemiological studies

- A. **Descriptive studies** attempt to identify **potential risk factors** that correlate with the development of disease by creating a profile of the persons who became ill. Three types of variables describe the population: **Person, place and time**.
- B. **Descriptive studies** attempt to identify **potential risk factors** that correlate with the development of disease by creating a profile of the persons who became ill. Three types of variables describe the population: **Person, place and time**.
- C. **Analytical studies** try to determine which risk factors are actually relevant to disease development.
 1. A **retrospective study** compares the activities of cases with controls to determine the cause of the epidemic.
 2. A **prospective study** looks ahead, comparing **cohort** groups, to determine if the identified risk factors predict a tendency to develop disease.
- D. **Experimental studies** are generally used to evaluate
 1. The **effectiveness of a treatment**
 2. **Intervention** in preventing disease.

20.3 Infectious disease surveillance

- A. The **Centers for Disease Control and Prevention** collects data on diseases of public health importance and summarizes their status in the **Morbidity and Mortality Weekly Report**.
- B. **State public health departments** are involved in infection surveillance and control.
- C. The **World Health Organization (WHO)** is an international agency devoted to achieving the highest possible level of health for all people.

20.4 Trends in disease

- A. Reduction and eradication of disease
 1. Smallpox has been eradicated.
 2. The World Health Organization hopes to soon eliminate other diseases including dracunculiasis, polio and measles.
- B. Emerging diseases include those that are new or newly recognized and familiar ones that are reemerging after years of decline.

20.5 Nosocomial infections: Hospital acquired infections

- A. **Reservoirs** of infectious agents in hospitals include other **patients**, the **hospital environment**, **medical personnel** or the **patient's own flora**.
- B. **Transmission of infectious agents in hospitals** can occur by **diagnostic and therapeutic procedures** and **health care personnel**.
- C. **Hand-washing** is an important means of prevention.