

## **ANALYSIS OF COMMONLY PRESENTING DISEASES PATTERNS IN THE INFORMAL SETTLEMENT HEALTH CARE FACILITIES**

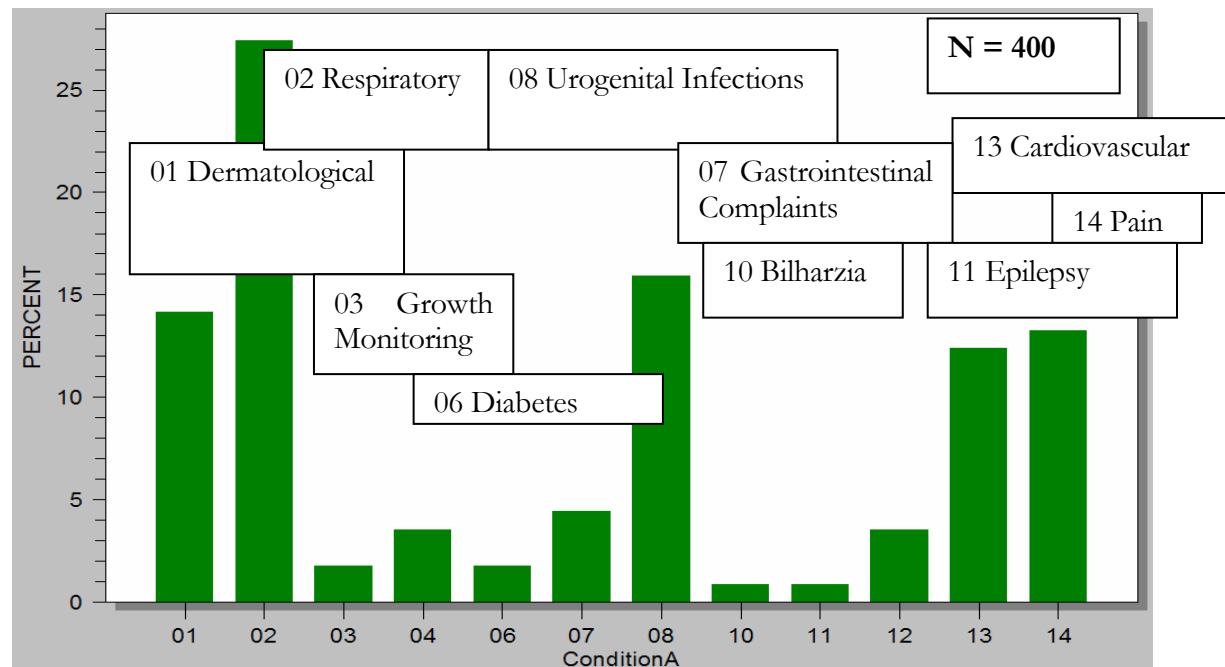
### **5.1 Introduction**

A number of conditions presenting in informal settlements health care facilities are expected to be related to poverty, neglect, lack of infrastructure, clean water, electricity, sanitation, indoor air quality, food preparation and storage facilities (CEROI, 2000). Poor housing quality is closely associated with a wide range of ill health outcomes, including diarrheal diseases, respiratory problems, skin problems, injuries and poisoning as well as chronic diseases (WHO, 1987; Mathee et al., 1996; Mathee and Swart, 1999; Mathee and von Schirnding, 2001).

This chapter looked at the composite picture of conditions presenting to the informal settlements health care facilities. In addition the chapter looks at the distribution of conditions by age to determine age specific prevalences of certain conditions.

## 5.2 Results

The patient records were reviewed to identify the commonly occurring conditions presenting at the informal settlement health care facilities studied. The graph in figure 8 presents a composite picture of the conditions generally seen at the different health care facilities.



**Figure 8. Commonly Presenting Conditions and Symptoms Identified at Health Care Facilities.**

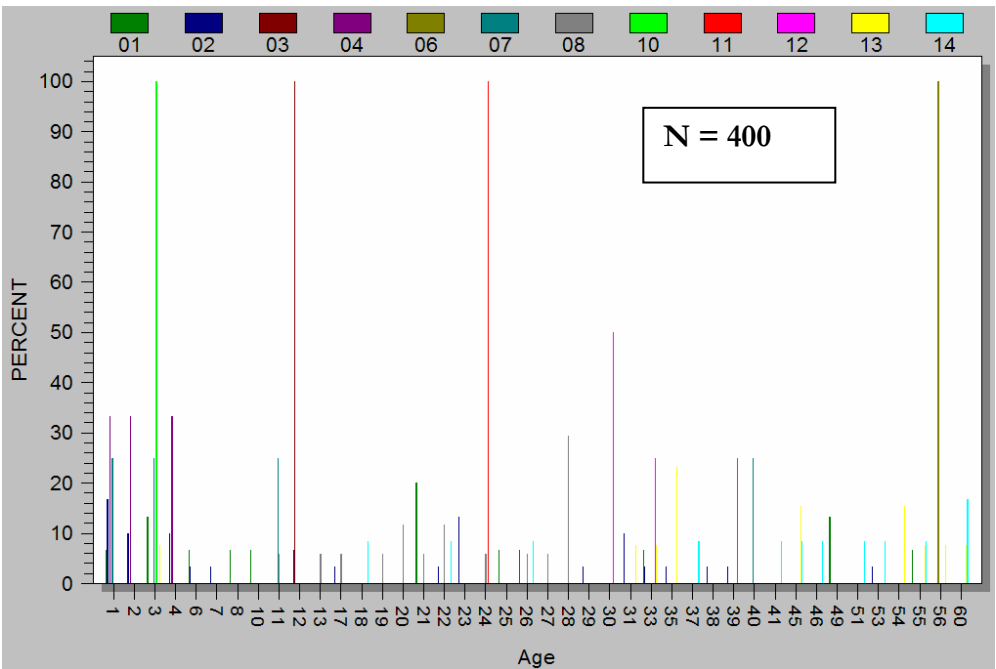
Over 25% (bar 02) of the patients who attended to at the informal settlements health care facilities presented with respiratory problems, ranging from common colds and influenza, cough, upper respiratory tract infections to asthma. Secondly, 16% (bar 08) of the patients attended to presented with urogenital infections, ranging from genital sores, herpes simplex, genital discharge and urinary tract infections. Pain (muscular pain, headaches and trauma) and dermatological conditions; including dermatitis, eczema and skin rash each accounted for 14% (bars 01 and 14) of patients who visited the health care facilities during the study period. 13% of the patients attended to at the health care facilities presented with cardiovascular conditions specifically presenting with hypertension (bar 13).

An unexpected observation from figure 8 was that only 4% (bar 07) of patients presented with gastrointestinal conditions such as diarrhea and stomach cramps. A higher percentage of patients would have been expected to present with diarrheal symptoms because of the non sanitary nature of informal settlements.

Growth monitoring and diabetes each accounted for 3% of patients who visited the health care facilities (bars 03 and 06 respectively) while

epilepsy and bilharzia each accounted 2% of patients who attended the health care facilities (bars 10 and 11 respectively). Family planning and ear, nose and throat infections each accounted for 1% of the patient population that used the health care facilities during the study period.

Figure 9 shows an analysis of the conditions seen at the health care facilities among different age groups.



**Figure 9. Prevalent Disease Conditions by Age**

The most prevalent presenting conditions among the under five were found to be skin conditions, respiratory problems and some infections

such as bilharzia. Over 95% of all the three year olds presented with skin related conditions, while over 30% of the 1, 2, 3 and 4 year olds presented with respiratory and other infectious conditions.

Over 95% of the teenage children presented with skin conditions, while a low percentage of teenagers presented with respiratory ranging between 10% and 20%.

A high number of young adults (over 95% of the 24 year olds), attended the health care facilities for urogenital conditions as well as family planning. The occurrence of urogenital conditions was observed in the 20 to 39 years of age in varying degrees with higher percentages being observed between twenty and thirty five years of age. From the age of thirty the occurrence of diabetes was observed throughout all adulthood.

At ages forty five to above sixty years, the pattern observed was a combination of complaints of pain, hypertension and diabetes.

### **5.3 Discussion and Conclusions**

The pattern of illnesses seen at informal settlements health care facilities were observed as taking the form of acute infectious diseases for infants aged 1 to 5 years of age. It was also observed that teenagers present largely with skin related conditions which tend to persist until the young adult years.

Young adults presented largely with sexually transmitted infections while adults showed signs of chronic conditions such as hypertension and diabetes although in some instances conditions such as epilepsy were observed.