A TRANSITION IN HEALTH STATUS FROM CHILDHOOD TO ADULTHOOD AND ASSOCIATED RISK FACTORS: A 13 YEAR INTERVAL FOLLOW-UP STUDY IN SOUTH AFRICA


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Introduction:

A country such as South Africa that is less developed but having a developed aspect to it has to cope with 1st world and 3rd world issues. These include the exposure of the population (often more vulnerable because of low socio-economic status) to pollutants, not only from domestic fuel burning but also from industries and motor vehicles. Over the past hundred years there has been a definite transition in diseases, globally. This transition was mostly from infectious diseases, for which many have been eliminated or reduced, to non-communicable diseases of which the risk factors are largely associated with lifestyle. Emerging infections such as HIV/AIDS and re-emerging infections (polio) together with existing diseases (TB and malaria) and the exposure to occupational and environmental pollution have had a double burden effect on the population of South Africa.

Aim:

This study reviews the health status and lifestyle aspects of young adults who participated as 10-year-old children in the Vaal Triangle Air Pollution Health Study (VAPS) during 1990, and of whom the health status, as children of ten years old, are known.

Results:

The study found the prevalence of hypertension to be 11% whereas the average for the South African population between 15 and 24 years of age is 2%. Ten percent of respondents had high cholesterol level compared to the average of 3.5% for the average South African in the same age group. The study further found a significant increase in the prevalence of respiratory illnesses in the adult phase compared to childhood.
Conclusion:

The study population in the current study had, in general, a higher prevalence of chronic diseases compared to the average for the South African population. The findings of this study indicate that the transition in health status found elsewhere in the world could also be demonstrated in this specific group in South Africa. These findings also confirm the importance of follow-up studies in obtaining long-term epidemiological data.

The paper will report on the descriptive statistics and main findings.

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