Population and World Diseases

Introduction: Throughout most of human history, the human population has been increasing. However, population has not always been steady and uninterrupted. For example, during the mid-1400s, there was a sharp decline in population as a result of the bubonic plague, or Black Death, that struck much of Europe and Asia. The plague killed more people than any other single disease; it claimed the lives of 25 percent of the adult population of Central Europe and Asia. The population of England was reduced by about 50 percent between 1348 and 1379. In addition to the plague, worldwide outbreaks of cholera, typhus, malaria, yellow fever and smallpox have claimed millions of lives. The more densely population cities became, the more quickly diseases spread.

The biomedical revolution of the 20th century has also resulted in increased population growth. During this revolution, the death rates continued to drop as health and hygiene improved. The discovery of antibiotics and vaccines has wiped out or controlled many life threatening diseases. At the same time, birth rates have increased due to better prenatal care.

Many health specialists today feel that the world health situation can be summarized by the following statement "Wealth determines health and health determines wealth "People with poor health are too sick to accumulate wealth and those with no wealth cannot afford the health care necessary to become well. Therefore, one third of the population of the world is sick, with the majority of the illness among children of developing nations. Every year, in developing nations, more than 14 million children under the age of five die because poor nutrition leaves them unable to fight common infections.

Important Terms: Population dynamics, fertility rates, mortality, prediction, connections map, infectious disease, developed nation, developing nation, parasite, malaria, pie graph, vaccine, population density;

Objectives:

A

- To create two pie graphs comparing the causes of death in developing and developed nations;
- To analyze data comparing the causes of death in developed and developing countries;
- To create a map illustrating the availability of health care around the world;
- To compute and analyze the possible growth of infectious diseases as a result of global warming;
- To compute the increases in the distribution of infectious diseases for 2050;

Materials: Student Activity Sheets, pencil / paper, colored pencils, calculator;

Part A:

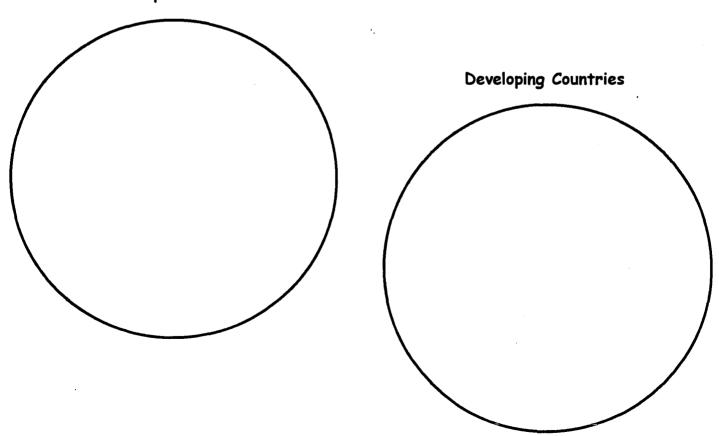
Procedure:

- 1. Based on the data presented in the **Data Table**, students should prepare two pie graphs comparing the causes of death in developing and developed countries.
 - Students should then answer the related questions in the Analysis section.

Causes of Death (1980)

CAUSES	DEVELOPED NATIONS	DEVELOPING NATIONS		
Infectious and parasitic				
diseases	8%	40%		
Cancer	19%	5%		
Cardiovascular and				
degenerative disorders	53%	19%		
Childbirth related	2%	8%		
Injury and poisoning	6%	5%		
Other	12%	23%		

Developed Countries



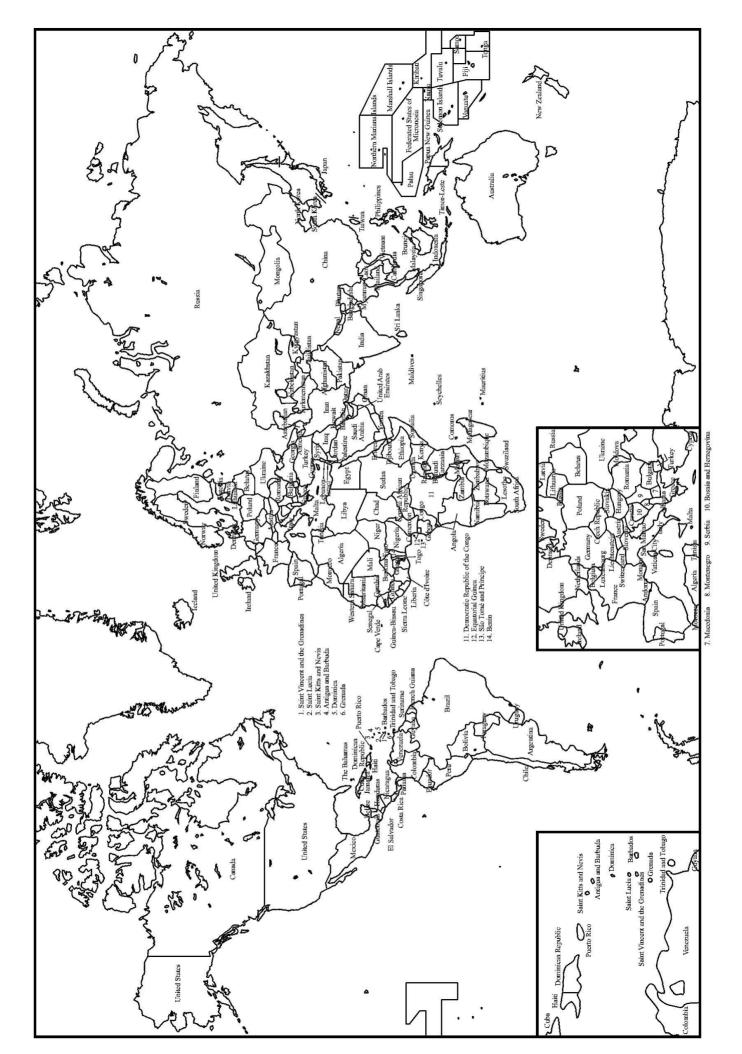
Part B: In developed nations, like the United States, there is one doctor for every 500 people. In poor nations, more than 10,000 people may share one doctor. In Africa, as a whole, there is only one doctor for every 25,000 people and many people live in regions that are so remote they have no access to a doctor at all.

Procedure:

- 1. On the map provided, students should identify the locations of the nations listed below.
 - Using different colors, they should indicate the availability of medical care in these countries.
 - Students should then create a key for the map.
 - Have atlases available to locate the countries students are not familiar with.

Population Per Doctor

50,000	20,000	10,000	5,000	2,000	1,000	500	Under
and	-	-	-	-	-	-	t
over	49,999	19,000	9,999	4,999	1,999	999	500
over Ethiopia Guinea, Burkina Faso	Mali, Niger, Chad, Cen.African Rep; Uganda, Nepal Rwanda, Bhutan Burundi, Tanzania Mozambique	19,000 Mauritania, Senegal, Gambia, Sierra Leone, Liberia, Ghana Benin, Zaire, Cameroon, Sudan, Angola Somalia, Kenya Madagascar, Afghanistan, Haiti;	9,999 Guyana, Togo Nigeria, Congo Zambia, Botsawana Zimbabwe Malawi, Yemen Sri Lanka, Bangladesh Thailand, Sumatra, Borneo, Indonesia, Philippines;	India, Iran Pakistan, Burma Meghalaya Rep.of Yemen, Tunisia, Algeria Morocco, Rio Muni Gabo, Guatemala El Salvador Belize;	1,999 Mexico Honduras Nicaragua Panama Dom.Republic Colombia Peru Chile Bolivia Brazil Paraguay Surinam South Africa Turkey, Syria Iraq, Jordan Egypt, China, Laos, Oman Korea, Malaysia	999 Canada, Ecuador, Venezuela French Guiana, Uruguay, United Kingdom, Ireland, Belgium Switzerland Yugoslavia Romania Vietnam Japan N.Zealand	500 U.S. Argentina Australia USSR Norway Denmark Sweden Finland Italy France Spain Portugal Germany Greece Bulgaria Hungary Austria Czecho- slovakia Iceland



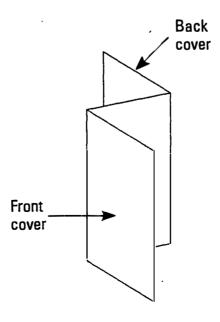
Part C: About 80% of the illnesses in developing nations are caused by waterborne pathogens. For example, more than 5 million people each year die from malaria transmitted by mosquitos that breed in standing water. Another 20 million suffer from Guinea worm infections and over 200 million people are affected by Schistosomiasis.

TASK: You have been hired as an educational consultant for the World Health Organization (WHO), a branch of the united Nations. Your job is to produce a small pamphlet about one of the diseases listed below. The pamphlet is to be used and distributed by volunteers in a developing nation to help educate the local population about the disease. Be sure to include the following information:

- Organism (or organism) that causes the disease
- Method of infection
- Symptoms
- Treatment
- Preventative measures
- 1. Students may choose to report on any one of the diseases listed below:
 - Malaria

table statement

- Schistosomiasis
- Guinea worm
- River blindness
- Sleeping sickness
- Filariasis
- 2. Pamphlets should be made from a single sheet of A3 paper (standard letter size) folded as shown below. The name of the disease and a map showing geographic location of the disease should appear on the front cover and any references that you used to research the information should be listed on the back cover.



Part D: Scientists know that the transmission of many infectious diseases is affected by climatic factors: temperature, humidity, surface water, wind, soil moisture and changes in forest distribution. Disease like malaria are especially influenced by changes in these factors, since they require an intermediate organism like a mosquito to transmit the actual disease. It is predicted that climate change altered weather patterns would affect range (latitude and altitude), intensity and seasonality of many infectious diseases. In general, increased warmth and moisture would enhance the transmission of these diseases.

Procedure:

- 1. Read over and discuss the Introduction and the Data Table.
- 2. Explain to students that they will be creating a map indicating the present ranges of the 10 diseases listed in the table.
 - They will need to create a code for each disease (either color or symbol).
 - They should include a key for the map explaining the code.
- 3. Students will compute the numbers for columns #7 and 8 ion the Data Table using their calculators.
 - The new data should be added onto the Data Table.
 - Students should use the following formula:

Column #7

New cases each year x % alteration = New cases yearly in 2050

Column #8

Population at risk \times % alteration = Population at risk in 2050

4. Students should then answer the related questions in Analysis section.

Data Table: Incidence and Locations of Infectious Diseases (1994 and 2050)

		T				1	i
DISEASE	VECTOR	Population at risk 1994 (millions)	New cases yearly 1994	Present Distribution	Probability of Alteration	New cases yearly 2050	Population at risk in 2050
Malaria	Mosquito	2400	300 - 500 m	Tropics Subtropics	***		
Schistomiasis	Fluke	600	200 m	Tropics Subtropics	**		
Filariasis	Mosquito	1094	117 m	Tropics Subtropics	*		
Sleeping sickness	Tsetse fly	55	300000	Tropical Africa	*		
Guinea worm	Crustacean	100	100000	S. Asia Arabia Pen. C/W Africa	?		
Leischmaniasis	Sand fly	350	500000	Asia, S. Europe Africa Americas	*		
River blindness	Black fly	123	17.5 m	Africa and Latin America	**		
Chagas disease	Triatomine bug	100	18 m	Central and S. America	*		
Dengue	Mosquito	1800	10-30m	All tropical regions	**		
Yellow fever	Mosquito	450	<5,000	Tropical S.America Africa	**		

NOTE: *** = 40% alteration/increase

** = 25% alteration/increases

* =12.5% alteration/increase

? = No data available

Student Activity Sheet #6

Analys		
1. Why	is the death rate from infectious and par countries than in developed countries?	asitic disease so much higher in developing
0.14#		
z. Wny	nations?	enerative disease is so much higher in developed
3. Many	and other industrialized countries, but ar then, do you think cancer rates are highe	n pesticides, are banned in the United States re still heavily used in developing nations. Why, r in the developed countries?
4. Expl	ain the relationship between infectious dis	sease and climatic factors.
5. Wha		affect the intensity, range and seasonality of itos, flies, etc.,)?
6. Wha	t one factor would you think would be the diseases? Why?	, , , , , , , , , , , , , , , , , , , ,
7. How	are the following diseases transmitted: a. Dengue	b. Yellow fever
	c. Schistomiasis	d. Sleeping sickness
	e. River blindness	
	a. Filariasis	h. Guinea worm

. Whicl	n disease are expoected to experience an alteration of 25%?
Whic	n disease is expected to increase the most?
). Whi	th disease are scienitists unsure about?
(dering an increase in temperature and precipitation to be the most evident direct afford of climate change, what will probably happen to the geographic distribution of diseases spread by mosquitos? Why?
. Wha	t regions of the world should be affected the most?
. Wha	t could the effect be on temperate regions like the southern U.S. and parts of Europe
1	idering what health specialists feel is the reason for poor health in many parts of the world, what could climate change mean for the 1/3 of the world's population that is already sick?
	t do the facts suggest about the future health of people in Africa, S. Asia and some parts of Latin America?
Do 1	he facts presented on the data tables, "Causes of Death" and "Population Per Doctor agree or disagree in their statements about health care and money? Explain.