Infectious diseases and chronic care in Africa

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Welcome to this June issue of African Health Sciences that is another bumper harvest because of a backlog that we are trying to clear at AHS.

We bring you very interesting manuscripts on infectious diseases particularly hepatitis1,2; HIV AIDS3,4 and H1N1 Influenza A virus5 in the context of chronic care in Africa. Burkina Faso researchers report on the diagnostic performance and operational characteristics of four rapid immune-chromatographic syphilis tests6 while Ethiopian scientists report on risk factors for multidrug resistant tuberculosis patients.7 Keeping with the TB theme we have work from Angola on emotional distress among patients with tuberculosis8. In a similar study Sudanese workers give an insight into illness perceptions and quality of life among tuberculosis patients in Gezira9.

Now parasites! Pakistani workers report on prevalence of Giardia intestinalis and Hymenolepis nana in Afghan refugee population of Mianwali district, Pakistan10. This is followed by three articles on malaria.11,12,13

To break the infectious disease theme we introduce several articles on pain, trauma and arthritis.14,15,16,17,18,19,20,21. We climax our non-communicable disease (NCD) themes with many articles on diabetes mellitus, rightly so, because this has become such an important disorder in Africa contrary to predictions in the pre-independence colonial era.22,23,24,25. This is followed by reproductive health issues26,27,28,29,30, oncology31,32,33,34, herbal medicine35,36,37, sleep quality38 and anthropology39. The next set of papers include: lead toxicity40, retinol41, educational audit42 and microbiology43.

We conclude the review with a relook at chronic care44, medical ethics in Africa45, alpha thalassemia46, asthma47, military TB48 and cortical blindness preceded by pre-eclampsia49. Have enjoyable reading!

References
13. Oyejimi A, Ogundowo B, Odukoya O. Response


