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The Youth State of Health in Secondary and Post-Secondary Medical Schools All Over the Country

Zdrowotność młodzieży w średnich szkołach medycznych na terenie kraju

INTRODUCTION

The state of youth health in secondary and post-secondary medical schools all over the country was evaluated on the basis of youth dyspanserian groups.

In public opinion medical staff is thought to be healthy. It is likely to follow the fact that in most cases patients contact with the medical staff, who are friendly, and who demonstrate proper hygiene and health habits and care about their outward appearance. An ill person feels better among nice looking medical staff in hospital. Nevertheless, the staff are exposed to various negative factors affecting their health in everyday work. Therefore, secondary and post-secondary medical schools carefully select their youth, mainly girls, with reference to the health criteria to do the job. Good health state is necessary for nurses and midwives (5). This paper is to evaluate the state of health among students of secondary and post-secondary medical schools. The criterion of evaluation is the number of students qualified to particular dyspanserian groups (7).

MATERIAL AND METHOD

The students' state of health was analysed on the basis of data supplied by the students of The Nursing Department Extramural Studies, The Medical Academy, Lublin, academic year 1987/1988. Their task in hygiene was to work out as a whole topics of health and hygiene at schools they work in. The data were obtained from 30 secondary medical schools from all over the country attended by 10,502 students, 15—19 years old, and from 10 post-secondary medical schools attended by 3,436

students, 19—23 years old. Totally, the data concerning 13,938 students health were analysed. Moreover, data about tobacco smoking and drinking alcohol were collected.

Part of the examined youth was qualified to the following dyspanserian groups: IV — disorders in somatic and mental, development, permanent defects of the central nervous system, V — eye diseases and sight defects, VI — chronic diseases of the nosopharyngeal cavity and ears, hearing and speech disorders, VIII — diseases and disorders of the circulatory system, rheumatic disease, diseases of the connective tissue, IX — chronic diseases of the urinary systems, X — permanent defects of the locomotor systems and statics of the body, XI — other chronic diseases necessitating active care.

RESULTS

Youth from 30 secondary medical schools from all over the country, the age group 17—19, were inquired into the matter. Totally, 10,502 students were examined. Out of them, 4,887 students, which makes 46.5%, were qualified to dyspanserian groups. The most abundant group (35.3%) suffers from the diseases of the locomotor systems — group (35.3%) suffers from the diseases of the locomotor system — group X, and eye diseases (28.7%) — group V. A great number of youth (14.1%) suffers from disorders in somatic and mental development — group IV. Other chronic diseases necessitating care make 10% of all cases. The rest group of diseases constitutes a slight percentage (Table 1).

In 10 post-secondary medical schools out of the total 3,436 students from age group 19—23 years, 2,298 students were qualified to dyspanserian groups, which makes 66.2%. The highest percentage of defects found in youth (36.2%) constitute locomotor defects and static disorders — group X. Secondly ranked diseases are eye diseases (26.2%) — group V, and disorders in somatic and mental development (17.8%) — group IV. Fairly significant place occupy diseases of the circulatory system, rheumatic diseases, and diseases of the connective tissue — (10.9%) — group VIII. The rest groups of diseases constitute small percentage of cases — Table 2.

Having in mind the students of medical schools we expected them to know adverse effects of alcohol and tobacco. Yet, the fact is that 25.9% of secondary medical students smoke and 22.4% of them drink alcohol.

Among post-secondary medical schools 43% smoke cigarettes and 42% drink alcohol.

DISCUSSION

Functionally, health is defined as a condition of effective participation in public life, hence individual state enabling a person his or her everyday activity on the level assumed by the community he or she belongs to (2, 3). The youth from the dyspanserian groups do not fully participate in normal school activities; what is more, they necessitate active specialist guidance. A lot of papers on youth

Table 1. Secondary medical schools

No.	Town	Number of pupils	Dyspanserian groups								Total
			IV	V	VI	VII	VIII	IX	X	XI	
1	Bielsk Podlaski	534	6	20	2	1	8	—	27	15	
2	Biłgoraj	357	35	25	5	—	55	—	184	82	
3	Braniewo	285	78	32	—	—	2	—	11	1	
4	Brodnica	366	54	45	2	1	4	—	30	9	
5	Chełm	205	6	9	2	—	4	—	26	12	
6	Chełm	200	5	16	5	—	—	—	18	17	
7	Dąbrowa Górna	300	27	54	6	—	63	15	84	15	
8	Gorzów Wlkp.	245	4	47	—	1	1	—	42	6	
9	Gorzów Wlkp.	245	5	57	3	1	3	—	48	5	
10	Gostynin	380	8	55	8	2	7	1	122	11	
11	Hała	650	52	98	1	—	4	2	15	3	
12	Kozienice	230	17	34	14	—	8	—	27	1	
13	Lublin	284	8	44	13	4	9	2	20	11	
14	Łódź	208	5	42	—	1	1	1	7	5	
15	Łódź	460	6	26	19	6	1	1	41	2	
16	Łódź	460	12	82	1	1	13	6	72	5	
17	Łódź	417	14	61	2	8	2	1	60	8	
18	Piła	320	—	65	6	—	21	—	58	4	
19	Pisz	420	—	33	2	1	1	3	36	12	
20	Płock	434	17	76	7	6	21	13	187	1	
21	Przemysł	464	54	52	—	—	9	—	16	1	
22	Słupsk	368	25	45	—	—	5	3	19	—	
23	Świecie	400	82	31	6	50	4	2	24	7	
24	Warszawa	386	31	80	2	1	3	4	104	41	
25	Warszawa	206	17	34	1	10	12	—	42	26	
26	Warszawa	201	6	12	1	1	—	—	15	4	
27	Wrocław	416	54	86	22	22	3	—	258	172	
28	Zgierz	376	13	73	—	6	—	—	67	7	
29	Zielona Góra	373	—	55	—	—	1	—	52	6	
30	Żyrardów	312	49	13	—	—	4	—	11	1	
TOTAL		10,502	690	1402	130	123	275	54	1723	490	4,887
			14.1	28.7	2.7	2.5	5.6	1.1	35.3	10.0	100%

Table 2. Post-secondary medical schools

No.	Town	Number of pupils	Dyspanserian groups								Total
			IV	V	VI	VII	VIII	IX	X	XI	
1	Kraków	342	—	24	—	—	1	1	3	—	
2	Lublin	672	4	46	5	2	3	—	12	98	
3	Łódź	320	4	53	—	3	1	1	5	17	
4	Rabka	300	119	85	—	—	17	12	59	—	
5	Słupsk	330	67	68	—	—	—	—	104	—	
6	Warszawa	72	5	8	1	—	1	—	25	17	
7	Wrocław	400	92	60	—	39	32	—	198	—	
8	Wrocław	400	25	92	—	—	56	23	159	—	
9	Wrocław	300	32	89	—	—	16	37	60	—	
10	Wrocław	300	61	78	—	37	23	—	207	—	
TOTAL		3,436	409	603	6	81	250	74	832	43	2,298
			17.8	26.2	0.3	3.5	10.9	3.2	36.2	1.9	100%

health present the opinion about aggravating state of health among the school youth (1, 4, 9).

Evaluating the state of health in secondary and post-secondary medical schools we assumed the possibility of comparison of the state of health of youth, who are more carefully selected in respect of health criteria and the students from the other types of schools. The first should have fairly well established habit of prophylactic activities.

This paper analyses data from 40 medical schools. Tables 1 and 2 imply that the majority of youth suffer from locomotor diseases, 35.2% and 36.2% respectively — group X. Physical fitness of this group is lowered and they expect help from specialist medical care as well as correction and compensation activities at school. Significant percentage, 28.7% and 26.2% suffer from eye diseases — group V. Conclusions of other authors confirm our results. Specialists think it is the result of better ophthalmic care; this group comprises all types of eye diseases. It would not be out of place to quote the specialists opinion that other countries expect higher percentage of children with sight defects. Despite the increasing tendency of these diseases in our country we are far below the world mean level. Yet, we cannot be too complacent. Alarming data are presented by dyspanserian group IV, concerning the diseases of the nervous system, deviation from normal physical and mental development. Both tables show the percentage 178 and 14.1%, respectively. These numbers refer to both mental and somatic disorders.

A considerable number of youth, especially from post-secondary schools (10.9%) suffer from diseases of the circulatory systems and rheumatic disease — group VIII. Post-secondary schools youth, the age group 19—23 years, are 3—4 years older than secondary schools students, but this slight difference in age shows significant quantitative difference with regard to circulatory diseases.

To conclude, it is worth noticing that in Wrocław there is the biggest group of youth affected by the diseases from dyspanserian groups IV, V, VIII, and X. It would be interesting to answer the question whether it is the result of bigger pollution of the environment in the region and its influence on the examined population. Progress in technology brings together a great civilizing threat, that is why it is necessary to aim at the balance between man nad his constantly changing environment (6, 8).

Conclusions

1. The state of health of medical schools youth seems to be alarming. 1/3 of students from secondary and post-secondary schools suffer from locomotor defects and static disorders. Sight defects were found in 25% of the examined; disorders in somatic and mental development in 17.8%.

2. Alcohol drinking and tobacco smoking among youth is alarming, all the more so as they are expected to present proper health habits.

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STRESZCZENIE

Stan zdrowia młodzieży w średnich szkołach medycznych i w szkołach medycznych policealnych oceniano na podstawie przynależności młodzieży do grup dyspanseryjnych w 30 szkołach medycznych, rozmieszczonych na terenie całego kraju, z których uzyskano dane. Uczy się w nich 10 502 uczniów. Do grup dyspanseryjnych zakwalifikowano 4887 uczniów, co stanowi 46,5%. Najliczniej reprezentowane były grupy: X — 35,3%, V — 28,7%, IV — 14,1%, XI — 10%. W 10 ankietowanych szkołach policealnych uczy się 3436 uczniów, z tej liczby do grup dyspanseryjnych zakwalifikowano 2298 osób, co stanowi 66,8%. Podobnie jak w średnich szkołach medycznych, choroby grupy X stanowią największy odsetek przypadków, tj. 36,2%, następnie grupy V — 26,2%, grupy IV — 17,8% i grupy VIII — 10,9%. Ponadto zbierano dane co do palenia papierosów i picia alkoholu. W średnich szkołach medycznych pali 25,9%, pije 22,4% młodzieży. W klasach policealnych pali papierosy 43%, a pije alkohol 42% uczniów.