

Chapter 1 : Prevention is better than cure

Prov. It is better to try to keep a bad thing from happening than it is to fix the bad thing once it has happened. (See also An ounce of prevention is better than a pound of cure.) If we spend more money on education, so that children learn to be responsible citizens, we won't have to spend so much.

Open in a separate window Prevention of childhood obesity Prevention is the key to success for obesity control as many, but not all, obese children will eventually become obese adults. The management of obesity in adults is a difficult and often unsuccessful feat especially in the absence of a known organic etiopathogenesis eg, leptin deficiency, other hormonal abnormalities. Prevention of childhood obesity on the other hand can be more rewarding, providing better chances for reducing long-term complications. There are three levels of prevention in dealing with childhood obesity: Inculcating healthy practices like plant-based foods and fruit consumption and inclusion of exercises and active lifestyle form the pillars of the prevention programme. On the other hand, school going children and adolescents require at least 60 minutes of daily physical activity out of which 30 minutes should be structured activities like sports and supervised exercises. The best-established counseling techniques used for pediatric obesity treatment use a behavioral change model, which includes the following elements: Self-monitoring of target behaviors logs of food, activity, or other behaviors recorded by patient or family. This allows the child and family to recognize the behaviors contributing to their weight gain. Clinician feedback throughout the self-monitoring process is essential to monitor the behavior change. Stimulus control to reduce environmental cues that contribute to unhealthy behaviors. This includes reducing access to unhealthy behaviors eg, removing some categories of food from the house or removing a television from the bedroom and also efforts to establish new, healthier daily routines such as making fruits and vegetables more accessible. Goal-setting for healthy behaviors rather than strict weight goals. Goal-setting is widely used for inspiring behavioral change. However, the process can be detrimental if goals are not realistic and maintainable. Contracting for selected nutrition or activity goals. Contracting is the explicit agreement to give a reward for the achievement of a specific goal. This helps children focus on specific behaviors and provides structure and incentive to their goal-setting process. Positive reinforcement of target behaviors. Positive reinforcement can be in the form of praise for healthy behaviors or in the form of rewards for achieving specific goals. The reward should be negotiated by the parent and the child, ideally facilitated by the provider to ensure that the rewards are appropriate. Rewards should be small activities or privileges that the child can participate in frequently, rather than monetary incentives or toys; food should not be used as a reward. Clinicians should take into account the developmental stage of the child, family schedule, and personal preferences for activity, while being mindful of sedentary activity. Clinicians can support the change process by consistently advising children and families to be physically active, suggesting options and encouraging goal-setting. In addition, community participation can be encouraged by forming partnerships with local fitness centers and schools. To increase physical activity in children, it is often helpful to consider a variety of options. Structured physical activity organized sports or performance arts may be team-based or individual and competitive or noncompetitive. Less structured activities include recreational sports with peers or family, self-directed physical training, and lifestyle activity. Although these categories overlap, they provide expanded and diverse options and increase the opportunities for physical activity for the child and family. For preschool-aged children, unstructured activity like outdoor play is simple and useful. The provider can also encourage parents to consider physical activity levels when they make choices regarding day care and after-school programs. Substantial evidence supports the importance of reducing sedentary activity as a means of preventing and treating obesity in children. In fact, television viewing is the single best established environmental cause in the evolution of childhood obesity. Data on the role of other media in the development of obesity are lacking. School-wide campaigns and messages, and behavioral interventions using reinforcement and reward strategies have been effective in reducing television use. Children and families should first monitor their present amount of media use and then set goals to reduce it. The following recommendations are made in keeping with the American Academy of Pediatrics policy statement. Quiet,

nonmedia activities such as reading aloud or playing board games are also acceptable substitutes, because they avoid television advertising and establish patterns of family interaction that may ultimately lead to active play. Strategies to reduce media use for older children are more variable and are best addressed through a combination of self-monitoring, establishment of family media limits, and negotiation to identify substitute activities. For these and other reasons, engagement of the child in the behavior-change process is essential, using the behavioral strategies outlined earlier. Pediatric experience with drugs Experience with pediatric use of weight loss drugs has surfaced and some of the findings are promising. However, anorectic drugs are not recommended for routine use for childhood obesity. The efficacy and safety of these drugs have to be established by controlled clinical trials before prescribing them in prepubertal children. In the case of post-pubertal adolescents who have failed to respond to behavioral therapy and diet modifications, use of anorectic drugs can be considered. All adolescents on medical therapy should be encouraged to engage in physical activity and should concurrently receive nutritional education and joint family counseling. Although it appears promising as a weight loss strategy, it is still to be proved so. Many people find these techniques as uncomfortable, embarrassing, and inconvenient. In addition to the previously mentioned techniques, there are certain biochemical markers that are markers of satiety like glucagon-like peptide and cholecystokinin. Leptin is another useful marker primarily stimulated by carbohydrates in diet that can be used for long-term appetite responses. Conclusion Childhood obesity today constitutes one of the most serious health concerns, both in the developed and developing world. Obesity in childhood is causative for many chronic diseases, including type 2 diabetes, cardiovascular disease, hypertension, osteoporosis, and some carcinomas. It also has psychosocial consequences and may contribute to a delay in academic and social functioning as well as poor self-esteem and depression. The interventions for preventing and controlling obesity are mainly aimed at limiting the intake of sugar and high calorie snacks with higher consumption of vegetable- and fruit-based diet. This includes eating calcium-rich high-fiber diet with balanced micronutrients, daily healthy breakfasts and home cooked family meals, smaller portion size, and a curtailment in eating-out. Over the last 30 years, the prevalence of childhood obesity has increased exponentially. Multifaceted strategies involving the public and private health sectors along with community participation are required to gradually reverse this trend. Acknowledgments No external funding was secured for this study. Footnotes Author contributions All authors made substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; took part in either drafting the article or revising it critically for important intellectual content; gave final approval of the version to be published; and agree to be accountable for all aspects of the work. Disclosure The authors have no financial relationships relevant to this article to disclose. The authors report no conflicts of interest in this work. Attributable risks for childhood overweight: Establishing a standard definition for child overweight and obesity worldwide: Influence of race, ethnicity, and culture on childhood obesity: Diseases associated with childhood obesity. Overweight in children and adolescents: Guidelines for overweight in adolescent preventive services: Am J Clin Nutr. Challenges of accurately measuring and using BMI and other indicators of obesity in children. Body mass index and body fatness in childhood. Validity of the body mass index as an indicator of the risk and presence of overweight in adolescents. Arch Pediatr Adolesc Med. Health-related quality of life of severely obese children and adolescents. Long-term morbidity and mortality of overweight adolescents. A follow-up of the Harvard growth study of to N Engl J Med. Overweight in childhood and adolescence. Health consequences of obesity in youth: Relationship of childhood obesity to coronary heart disease risk factors in adulthood: Adiposity in childhood predicts obesity and insulin resistance in young adulthood. Overweight, fat patterning, and cardiovascular disease risk factors in black and white girls: Problems in childhood obesity. Persistent hyperaminotransferasemia resolving after weight reduction in obese children. Amin R, Daniels SR. Relationship between obesity and sleep-disordered breathing in children: Psychological correlates of obesity: Obesity and the metabolic syndrome in children and adolescents. Association between multiple cardiovascular risk factors and atherosclerosis in children and young adults. The Bogalusa Heart Study. Insulin resistance and cardiovascular disease risk factors in children of parents with the insulin resistance metabolic syndrome. The predictive value of childhood body mass index values for overweight at age 35 y. Body mass index and height from childhood to adulthood in the British

born cohort. Childhood predictors of adult obesity: Diagnosis and differential diagnosis of obesity in childhood. Treatment of child and adolescent obesity: Childhood overweight and the relationship between parent behaviors, parenting style, and family functioning. Expert committee recommendations on the assessment, prevention, and treatment of child and adolescent overweight and obesity: Body image, weight, and food choices of Latina women and their young children. *J Nutr Educ Behav*. Duration of breastfeeding and risk of overweight:

Chapter 2 : Prevention is better than cure. - Desiderius Erasmus - BrainyQuote

Prevention is better than a cure because it literally prevents the discomfort and costs of becoming sick or experiencing a similar preventable event. It also often takes less effort to prevent something than to cure it, hence the popular expression "an ounce of prevention is worth a pound of cure."

Long and Short Essay on Prevention is better than Cure in English Prevention and cure, both are different words and their meanings are also different. However, prevention is considered as better than cure because it saves us from harm of curing through medicines. Prevention is a safe way to remain away from any problem. We just need to maintain a healthy and disciplined lifestyle all through the life. Whereas, our carelessness lead us toward cure using medicines or other treatments. Cure cannot cure us completely however prevention keeps us away from danger and maintains normal health. We have provided below some essays on Prevention is better than Cure under various words limit in order to help students who have been assigned by their teachers to write some paragraphs or complete essay on this topic. You can select any Prevention is better than Cure paragraph or essay given below according to your need and requirement. If our problems expand a while or to a great extent, they cannot be controlled through the prevention methods and they need to be treated and cured well through medicines or other type of treatment. If we take preventions, we become safe otherwise we have to take the help of cure. There is need to detect the root of cause of problems before start curing. This proverb is generally based on the physical and mental health of people. The meaning of this proverb is well suited to us in our daily sphere of life. It is the good example to us that even our misfortunes can be changed to the good fortune only if we take precautions to remain away of troubles and be happy. Suppose that, we neglect our studies all through the year but start studying just after the release of exam dates; then what happens, it only will create pressure on our mind and body. It ultimately improves the heart beat, tension and anxiety level which leads us towards illness and then cure. Prevention is better than Cure Essay 3 words Prevention is better than cure is a most famous proverb which is a big example to us in our daily life. It teaches us to maintain a healthy, disciplined, and tension free lifestyle in order to remain away from any health issue or disease. It is easy to follow prevention methods to be safe from any problem however cure is a while dangerous for our health as it do not give surety of complete wellness once we get suffered from some problems. It is much easier for us to prevent the problem from happening than solving it when happened. Being healthy is much better than falling sick which is only possible when we follow prevention methods and be safe. It is very necessary for us to take all the precautionary and preventive measures in advance and avoid silly mistakes. We should take precautions during the change of every season so that we may not fall sick. Being indifferent or negligent to our health may definitely cause illness which may end to the costly cure and perhaps, sometimes impossible to get normal health. Prevention is better than Cure Essay 4 words Introduction Prevention is better than cure is a proverb which completely suits us in our daily sphere of life. It teaches us to take preventive measures always in our life to get away from all sorts of dangers. Preventive measures help us to save our health, effort, time and money. Preventive measures are very essential in our life required to deal with the effects of bad circumstances regarding healthy life. It is good to have preventive measures earlier than following them while getting affected with any type of health disorder. So, we should take all the preventive measures before spreading of diseases. Preventive measures are like drinking clean water, eating healthy diet at right time, washing hands with soap before and after taking food, washing hands with soap after each and every use of toilet, follow good habits of hygiene, taking daily bath, wearing clean cloth, taking proper sleep during night, etc. Following it in our life, we can be prevented from illness. It teaches us to adopt healthy habits of eating and living. It teaches us to do everything in advance in order to avoid last moment harassment. We should plan our all the activities for the project we have already decided to do in future. It helps us to prevent from all the hazards that may occur because of our irregularity in the daily routine. For example, if we have planned for holidays, we should plan and work accordingly to the trip for getting smooth travel. If we eat easily digestible foods, our stomach will be healthy and calm. If we are not prepared for the exam, we will get harassed at the exam time. So, we should make ourselves ready for all the circumstances. Prevention is a big

tool which helps us in many ways if we understand its real meaning and follow its teachings in our daily routine all through the life. It benefits a lot than it means. Prevention is better than Cure Essay 5 words Meaning of this Proverb: It is a most famous and old proverb, generally relates to our physical and mental health. Prevention is always better and wiser technique to avoid diseases and other problems of health which require proper cure. Cure is a costly regimen which may or may not treat us completely to the normal level. So, prevention should be the priority instead of seeking remedies. How this Proverb is Applicable in our Life: Prevention measures help us to avoid difficulties in life and give us a peaceful happy life. Our life is full of numerous difficulties and if we are not disciplined, we have to suffer too much. Therefore, this proverb suits a lot to us all through the life. Wise people must follow this technique in their daily life to be healthy, wealthy and happy. In this polluted environment, anyone can be deceased anytime with any big or small health disorder. Prevention is much cheaper technique than cure to be safe and peaceful. It saves time, health, effort and cost. It also prevents us from many anxious thoughts. As a human being, we have power of reasoning and power of foresight, so we should use it for our own benefit. Our mistakes and carelessness invites to the difficulties only. So, we should be careful all time. Life is very short and we should enjoy it completely. However, it is only possible when we are stress free, disease free and disciplined in our whole life. Our preventive efforts should be able to prevent troubles and difficulties. It can happen if the principles of this proverb are followed strictly and faithfully to every aspect of life. Prevention is better than Cure Essay 6 words Introduction Prevention is better than cure is a most popular and old proverb related to our health and healthy life. Good health becomes the valuable present for human life. We can earn lots of money, make houses, achieve luxurious things, etc in life however we cannot buy good health once it got declined by some serious diseases. The meaning of each and every luxurious thing will be zero immediately after we get some diseases. People should divert their mind from costly treatment towards spending time on health education, preventative measures, etc. How it Relates to our Daily Life Most of the people suffer from various fatal diseases which have almost no cure or impossible to cure. Some of the diseases have very expensive treatment. People suffering from such diseases are cured by using very hard medicines having lots of side effects in present or in near future. In order to remain away from such diseases, prevention is a great key we can be safe from deadly diseases. Prevention is very cheap and save lots of money, time and effort of us. If prevention methods are followed by the people, they remain safe and happy forever. Poor people cannot afford costly medical treatments. So, we should take care of us all through proper prevention methods so that we can be away from cure. We have only one life which is very important to all of us. We should live it, not destroy by inviting various problems and difficulties. Life can be more happy and peaceful if we become disciplined and follow principles of this proverb. By properly understanding the meaning and principles of prevention, we can learn how to save ourselves from deadly and fatal diseases. Generally people know the definitions of making their lives healthier and happier. But they forget the key point of control, discipline and patience. Cure becomes the last step to get our body out of danger however sometimes we cannot get the normal health back in case of some serious diseases. Our doctors may save the life but cannot return the happiness in life. People, who already had suffered difficulties in life, well understand the value the prevention. But, it is better, if people understand its value before getting into any difficulty.

Chapter 3 : WHO | Prevention is better than treatment

Prevention is better than cure. Perhaps someday this rationale may also be used as the justification to edit the genes of human germ cells, although that is a huge step that will require much deliberation before it becomes reality.

November 9, 2013: In India, the Supreme Court first accepted that sexual harassment exists in the workplace in August and recognised the need to address this issue through legislative measures in its landmark judgement of Vishakha vs. Which means that legislative guidelines have been in place for more than two decades and it is more than 5 years since the enactment of the Sexual Harassment of Women at Workplace Prevention, Prohibition and Redressal Act. Yet, it is only now, with MeTooIndia, that women are finding the courage to speak out. For those of us who work on the issue of sexual harassment at workplace, we know that it is one of the most under-reported forms of violence against women. We know its pervasive nature and know how quickly a report of this nature can become fodder for lunch time gossip and speculation. In fact, the fear of repercussions and further victimization are some of the most significant reasons that women do not report harassment at workplace, sometimes even preferring suicide, like Sangeetha Sharma, an advocate practicing at the Hyderabad high court who committed suicide after being sexually harassed by her senior. Women who are speaking out today are doing so only after having negotiated the hierarchies of power and who have achieved some level of inner confidence to speak. They are finding collective voice, using social media as their platform to amplify their stories. But there are many more stories that remain unheard, untold, un-responded to. They are the ticking time bomb, which Corporate India cannot defuse by merely downloading apps and sharing PPTs from websites with employees. Because when a colleague at work in the midst of the MeToo environment happily tells me that the green tea I drink is taking effect on my figure, and I want to smack the admiration from his face, I am left wondering how many words the definition of sexual harassment must contain for it to be clearly understood by all. The law is a legal tool to address sexual harassment in the workplace. It mandates that all employers or persons in charge of a workplace, whether in the public or private sector, should take appropriate steps to prohibit, prevent and redress sexual harassment. The setting up of an Internal Complaints Committee is the redressal mechanism in the formal sector. Many large business houses and public sector enterprises will answer in the affirmative if you ask them if they have set up a Complaints Committee. Probe a little more and they will claim sexual harassment does not exist in their offices, because no woman has raised a formal complaint with the Committee. Ergo, the problem is out there, not in here. Lack of complaints in no way implies there have been no incidents. In numerous trainings conducted by Martha Farrell Foundation, women have expressed the daily acts of sexual harassment, often including physical assault and sexual abuse, they suffer, but are at a loss whom they should speak to about it. Hidden away in her silence at the workplace is the many challenges that she faces in her daily life. The fear of losing an income that is necessary if her children are to study in a good school, the fear of being branded a trouble maker, the loss of freedom because she will be asked to stop going to work by conservative families. In the safe space created in the participatory trainings we conduct, it is as if a dam breaks, and her submissive silence is replaced with the first stirrings of courage. Most organisations choose to deal with the challenge of sexual harassment at workplace through trainings of their female employees and orientation of Committee members by a lawyer on how to avoid a legal suit should a complaint arise. This is not sufficient to prevent it. Sexual harassment is behaviour, and adults – both men and women – are responsible for their own behaviour and its consequences. You need an orientation that helps you recognize the likely consequences of your behaviour and tools that support you to alter your actions accordingly. Clearly, there needs to be a discussion on the many meanings of what is sexual harassment and it must be done with both men and women. As the late Dr Martha Farrell used to say, men need to consider their behaviour, because what men consider natural may not be seen the same way by women. Corporate India needs to recognise that setting up a Complaints Committee is merely the first step in dealing with sexual harassment. It addresses a legal requirement, without curing the disease. Giving priority to meaningful orientation of employees and Committee members, and creating a supportive environment, where women feel safe to work and to report incidents, is a necessity. After all,

prevention is better than cure. She also heads the gender programs in PRIA where she is responsible for engendering the program management and program delivery of all programs of PRIA. Nandita Pradhan Bhatt is the Director of Martha Farrell Foundation, she is responsible for program delivery and management of the Foundation.

Chapter 4 : Prevention Quotes - BrainyQuote

We're here to talk prevention. And if there's one thing that everybody knows it's: 'prevention is better than cure'. When I was thinking about prevention I looked into where this comes from.

When I was thinking about prevention I looked into where this comes from. The irony was that Erasmus died suddenly from an attack of dysentery, which we now know is a wholly preventable condition. The other person who can lay claim was Benjamin Franklin, who said: And Franklin founded the first fire brigade in Philadelphia and made it one of the safest cities for fires in the world. As the founding fathers knew. Prevention saves lives and saves money. Two of the biggest health successes of the 20th century had prevention at their core: In the UK, both were achieved by careful and considered government intervention. We encouraged better behaviour through informing the public and by stopping smoking in public places where it could affect the health of others. A social contract at the heart of our NHS. We, the citizens, have a right to the healthcare we need, when we need it, free at the point of use. But, we have a responsibility to pay our taxes to fund it, and to use the health service carefully, with consideration for others, and to comply with medical advice to look after ourselves. Too much of the health debate in England has been about our rights: And, of course, those rights are important. But, I think we need to pay more attention to our responsibilities, as well as our rights. Today, I want to talk about those responsibilities, and our task for the National Health Service to help empower people to take more care of their own health. Because only with better prevention can our NHS be sustainable in the long term. This rate of growth of demand is simply unsustainable. I want to talk about how preventing ill health can transform lives, and transform society for the better too. That might sound radical. It is intended to. The government-wide plan we are publishing today sets out how we need a radical shift in how the NHS sees itself, from a hospital service for the ill, to a nationwide service to keep us healthy. Where those who work on the front line of the NHS including the GPs, who are its bedrock, feel confident to remind people of their responsibilities too. At the core of my political philosophy is a belief that the state has a duty to protect the most vulnerable in society, and an equally firm belief that we must empower people to fulfil their potential to be the best they possibly can be. From the education they receive in school, to the freedom they have to achieve in work. And nowhere is this more true than with health. Given this duty, our starting point is to ask: The best evidence points to a 4-factor breakdown. Around a quarter of what leads to longer healthier life is acute care – or what goes on in hospitals. The second factor is genetics. And the final factor is what people do – the choices they make, the lifestyle they choose. Different people put different proportions on these 4 factors: Yet the combination of prevention and predictive medicine have more than twice the impact on length of healthy life. So our focus must shift from treating single acute illnesses to promoting the health of the whole individual. And from prevention across the population as a whole to targeted, predictive prevention. And that is exactly what will happen in the long-term plan. I want to see people taking greater personal responsibility for managing their own health. For looking after themselves better, so staying active and stopping smoking. Like many people, I enjoy the odd glass of wine. I support the budget in which we froze duty on scotch and beer. Yet alcohol abuse puts a huge burden on the NHS. And drunk people are more likely to be responsible for abuse and violent attacks on NHS staff. And this is despite the massive reduction in smoking over the past 30 years. For smoking, the next step towards a zero-smoking society is highly targeted anti-smoking interventions, especially in hospitals. If someone is admitted as a heart patient, and we know that stopping smoking could save their life, then we will do everything we can to help them quit, as they do in Ottawa. This is a Canadian model I like the look of. I want to see bedside interventions in our hospitals so smokers who are patients are offered medication, behavioural support and follow-up checks when they go home. And we need to fulfil our commitments to the obesity strategy, and set ambitious targets also on salt. So we are working on new solutions to tackle salt and will set out more details by Easter. How do we do that? How can we empower people to take more care of their own health? By giving people the knowledge, skills and confidence to take responsibility for their own health. By using new digital technologies, to help people make informed decisions, with more access to primary and community care, and

with more social prescribing, all aimed at stopping people from becoming patients in the first place. There are 2 new technologies in particular with the potential to change everything: They promise the potential to unlock our genetic codes; and allow us to apply those codes to how we live our lives. To predict which of us are susceptible to which illnesses, to diagnose those already ill, faster, and to develop new tailor-made treatments to bring people back to health. Together, they will transform medicine. We are finally now able to crack that genetic factor of our health. We can intervene earlier. Save money on unnecessary and invasive tests. Eliminate waste by prescribing the right medication or the right treatment the first time round. And save NHS resources for people who really need it. And that figure is only going to improve. These technologies, and other new digital services giving targeted health advice, are starting to transform global medicine. As it has been with every wave of technology for the last 70 years, the NHS must be at the forefront, embracing these new technologies and shaping them as they evolve and improve. And I know we can do it. From when Edward Jenner developed the first smallpox vaccine, to when Alexander Fleming discovered penicillin, to when Richard Doll proved the link between smoking and cancer. The next frontier of prevention is using the data at our disposal to predict who will be ill with what, and to get in there early. The Prime Minister has spoken with great eloquence about the power of artificial intelligence to save lives by spotting cancer earlier “and we must do that. But predictive prevention has a far broader application. From diagnosing a susceptibility to dementia due to a vitamin deficiency, to motivating activity to tackle obesity, we can have better, more targeted interventions than ever before. Again, giving better results, and helping the NHS eliminate waste and save money. Our aim is to prevent people becoming patients through personalised advice and intervention. Public Health England are leading the way on predictive prevention. They are bringing together a range of experts so we can scale up this pioneering work to a national level. And this is linked to my third and final point: Right now, we tend to think of things in isolation. Pollution is seen as an environmental problem. Employment is something for the Treasury to worry about. And housing is either a public good or a private investment. Our health is affected by each and every one of those. It means a new drive for clean air, building on the successes of recent years in cutting emissions. Secure employment, building on the record number of jobs available now. And it also means our GP surgeries, our hospitals, our care homes, our entire health and care system working more closely with local authorities, schools, businesses, charities and all the other parts that make up our communities. It means employers playing a bigger role in helping their staff stay healthy and to return to health after illness. And we can learn from the excellent work of our military here. Civilian employers must do the same. Employers have a responsibility to help improve the health of their staff and the nation. Each of us has a stake in our health and care system so each of us has a responsibility to work together to build a sustainable system. So, I want us to be open to new ideas and learn from other countries. Like the Netherlands, for example. Where companies must demonstrate due diligence in their approach to the rehabilitation of sick staff and helping employees return to work. To achieve this we need to strengthen the links between employers, their unwell staff, and the NHS. Good health starts with the right pre-natal care, immunisation, nutritional support, fitness advice, minimising social media and mental health harms, secure employment, financial independence, safe housing, help with bad habits, friends and family to fight loneliness, careful and considered interventions at every stage of life into old age. From cradle to grave, not just for the NHS, but for the whole of society. Giving people responsibility for their own health. Empowering them to make the right decisions. The best help when they need help. That is what getting prevention right means.

Chapter 5 : Preventive Health Care | Gateway to Health Communication | CDC

Prevention is better than cure, say Romanian doctors An epidemic of noncommunicable diseases is sweeping Romania. An underfunded health-care system focused on treatment rather than prevention is struggling to meet the challenge.

Disclaimer Prevention is better than treatment Developing countries face a growing toll of tooth decay and gum disease that can be prevented. Apiradee Treerutkuarkul and Karl Gruber report. Bulletin of the World Health Organization ; Elastus Chonde, a dental project manager, teaches children how to brush their teeth. The project targeted disadvantaged families in Zambia. These nurses became key to running an outreach programme for the prevention of tooth decay and gum disease. A core element of the Thai oral health programmes has been promoting tooth-brushing with fluoridated toothpaste in primary schools – health education made possible by collaborating with teachers and parents. Diseases of the mouth, such as tooth decay or cavities dental caries and gum disease periodontal disease are among the most common noncommunicable diseases in the world and, traditionally, some of the most neglected. According to a recent Global Burden of Disease study, untreated tooth decay is the most prevalent of major diseases and injuries. Periodontal disease is the sixth most prevalent. In response to the growing toll of oral disease, high-income countries rely on treatment, the cost of which often falls on individuals, while prevention measures such as water fluoridation over the last 30 years have improved the situation in some of these countries. For low- and middle-income countries, meeting the current need for treatment would exceed most health-care budgets, leaving prevention as the only viable option. The key factors driving the epidemic of tooth decay are the increasing consumption of sugary foods and drinks and the inadequate use of fluoridated toothpaste, water, salt and milk, to prevent tooth decay. The recommendation was hotly contested at the time by the food industry. An early example of school-based oral-hygiene education in Thailand. Treatment, however, is not an option for most people in low- and middle-income countries, due to the expense and lack of dentists. At the same time, the consumption of sugary foodstuffs and drinks is increasing in developing countries. In , WHO highlighted four essential oral health messages for young children and families to be reinforced through health education projects, such as the ones in Madagascar and Thailand: And, while there is abundant scientific evidence that regular tooth-brushing with fluoridated toothpaste helps to prevent tooth decay, most developing countries do not provide affordable toothpastes or toothbrushes, not to mention fluoridated water, salt or milk. Moreover, in low- and middle-income countries fluoridated toothpaste is often of poor quality. Some middle-income countries manufacture their own toothpaste but the level of fluoride is sometimes too low to be effective and national regulations or even international quality standards are not observed or enforced.

Chapter 6 : Prevention Quotes (45 quotes)

Prevention is better than cure definition is - "used to say that it is better and easier to stop a problem, illness, etc., from happening than to stop or correct it after it has started. "used to say that it is better and easier to stop a problem, illness, etc., from happening than to stop or correct it after it has started.

Nationally, Americans use preventive services at about half the recommended rate. Cost-sharing such as deductibles, co-insurance, or copayments also reduce the likelihood that preventive services will be used. These chronic diseases can be largely preventable through close partnership with your healthcare team, or can be detected through appropriate screenings, when treatment works best. Are you a writer or producer working on a current TV or film project? Contact the program for technical assistance. Eating healthy, exercising regularly, avoiding tobacco, and receiving preventive services such as cancer screenings, preventive visits and vaccinations are just a few examples of ways people can stay healthy. The right preventive care at every stage of life helps all Americans stay healthy, avoid or delay the onset of disease, keep diseases they already have from becoming worse or debilitating, lead productive lives, and reduce costs. And yet, despite the benefits of many preventive health services, too many Americans go without needed preventive care, often because of financial barriers. Even families with insurance may be deterred by copayments and deductibles from getting cancer screenings, immunizations for their children and themselves, and well-baby check-ups that they need to keep their families healthy. The Affordable Care Act ACA makes preventive care affordable and accessible by requiring certain private health plans to cover certain recommended preventive services without charging a deductible, copayment, co-insurance, or other cost sharing. Under this new requirement, those services including well-woman visits, support for breastfeeding equipment, domestic violence screening and counseling, became more broadly available without cost sharing. More information on the requirement that insurers cover cost-free preventive care is available at: Opportunities for prevention impact all Americans, regardless of age, income, or perceived health status. Each year, potentially preventable chronic diseases e. The five leading causes of death in the U. Because health problems impact productivity, health problems are a major drain on the economy, resulting in 69 million workers reporting missed days due to illness each year. Although most Americans underuse preventive services, individuals experiencing social, economic, or environmental disadvantages are even less likely to use these services. Examples of obstacles include lack of access to quality and affordable health care, lack of access to healthy food choices, unsafe environments, and a lack of educational and employment opportunities. Can It Be Prevented? When we invest in prevention, the benefits are broadly shared. Children grow up in communities, homes, and families that nurture their healthy development, and adults are productive and healthy, both inside and outside the workplace. Businesses benefit because a healthier workforce reduces long term health care costs and increases stability and productivity. Furthermore, communities that offer a healthy, productive, stable workforce can be more attractive places for families to live and for businesses to locate. Further discussion of these benefits is available in the National Prevention Strategy at: The ACA has already helped women in private plans with cost-sharing, like waiving coinsurance or deductibles for certain preventive services such as mammograms, cholesterol screenings, and flu shots, amongst other benefits. The Bottom Line for Consumers Eliminating cost-sharing e. The government is making strides to broaden private health plan access to recommended preventive services with no cost or low cost-sharing. You may have no insurance copays or other out-of-pocket costs for certain visits and preventive screenings to detect disease in the early stages, when it is most treatable. Preventing disease before it starts is critical to helping people live longer, healthier lives and keeping health care costs down. Preventive services can also help those with early stages of disease keep from getting sicker. Counseling on such topics as quitting smoking, losing weight, eating better, treating depression, and reducing alcohol use can improve health and reduce costs by preventing illness. Counseling, screening, wellness visits, prenatal care, etc. Increasing the use of proven preventive services can encourage greater workplace productivity. Case Examples Joe Smith always considered himself to be a healthy individual. As far as he was concerned, he ate the right foods and exercised enough. As a result of the ACA, Joe learned that his health care insurance plan

was now offering free diabetes screenings. As a result of the test, Joe met with his health care provider and learned about the types of foods he should be eating, as well as suggestions for improving his exercise regimen. After five months of the new diet and exercise program, Joe was able to lose 24 pounds and reduce his blood sugar so that he is no longer considered pre-diabetic. Judy Davis, an independent consultant was living a fast-paced life. As a single mother with two small children, she focused all of her energy on her work and family. Although her kids ate well-balanced meals, she relied on coffee and cigarettes. Her only exercise was running after her kids. As a result of the ACA, Judy learned that she was eligible for free preventive services with her private health care plan. This included screenings for breast cancer. After a Mammogram, her doctor told her that there was a sizable lump in her breast and recommended a biopsy. Results confirmed that Judy had breast cancer. After a lumpectomy and many months of radiation, Judy decided to change her lifestyle to make sure she would be around to watch her children grow up. Judy quit smoking, began eating healthy, and started exercising. As a result of catching her cancer early, when it was more easily treatable, Judy has a new lease on life and is now cancer-free.

Chapter 7 : Essay on Prevention is better than Cure for Students

Prevention is better than treatment Developing countries face a growing toll of tooth decay and gum disease that can be prevented. Apiradee Treerutkuarkul and Karl Gruber report.

Chapter 8 : Quote by Benjamin Franklin: "An ounce of prevention is worth a pound of cure."

The document, 'Prevention is better than cure', builds on the government's previous work in areas such as childhood obesity and social blog.quintoapp.com shifts the focus to primary and.

Chapter 9 : Nanny Knows Best: Prevention Is Better Than Cure

Prevention is better than cure is a most famous proverb which is a big example to us in our daily life. It teaches us to maintain a healthy, disciplined, and tension free lifestyle in order to remain away from any health issue or disease.