ichpp-2-defined-international-classification-of-health-problems-in-primary-care-oxford-medical-publications
the context of mankind's most enduring societal unit—the family. This is a new book, building on the strengths of the First Edition. The emphasis of this book, like that of the specialty itself, is on the clinical delivery of health care; that is, how the practitioner manages common problems and recognizes uncommon entities encountered in office, hospital, home, and nursing home. In the First Edition, we were faced with the problem of how to organize a family medicine textbook that dealt with clinical topics yet represented more than a series of essays on the specialties for the generalist reader. We began by identifying specific objectives, outlined in the preface to the First Edition. From this evolved an approach which has been called the biopsychosocial perspective—incorporation of behavioral, family, social, and cultural aspects of health care integrated with the traditional "manifestations-and-manage-ment" textbook model. The First Edition also introduced a comprehensive classification of clinical problems in family medicine now used in curriculum planning in many family practice residency programs.

Population Health: T. Kue Young 2005 Population health encompasses traditional public health and preventive medicine but emphasizes the full range of health determinants affecting the entire population rather than only ill or high-risk individuals. The population health approach integrates the social and biological, the quantitative and qualitative, recognizing the importance of social and cultural factors in practice and research. This text is organized around the logical sequence of studying and attempting to improve the health of populations; measuring health status and disease burden, identifying and modeling health determinants, assessing health risks and inferring causation, designing research studies, planning interventions, and evaluating health programs. The second edition incorporates many new topics that reflect changes in contemporary public health concerns and our response to them; as well as shifts in research directions. These include literature approaches to health, gene-environment interactions, emerging infections, and bioterrorism. Among the specific changes are new or expanded discussions of confidence intervals for commonly used rates, the impact of population aging on mortality trends, health survey questionnaires, summary measures of population health, the new International Classification of Functioning, Disability and Health, migrant studies, race and ethnicity, psychosocial medicine pathways, social epidemiology, risk perception, communicating the SARS epidemic, ecologic studies, the odds radio, participatory research, suicide, evidence-based community interventions, evaluation methods and health economics, the Cochrane Collaboration, and systemic reviews. The many positive features of the first edition have been retained, such as the extensive use of boxes, case studies, and exercises; the selection of examples representing a variety of health problems, geographic regions, and historical periods; and a multidisciplinary orientation bridging the quantitative and qualitative, the social and biomedical sciences. The book aims to spark a new kind of broad-based training for researchers and practitioners of population health.

A Dictionary of Epidemiology: John M. Last Professor of Epidemiology University of Ottawa (Emeritus) 2000-11-30 Dictionary making never ends because languages are always changing. Widely used throughout the world, this book will continue to serve as the standard English-language dictionary of epidemiology and many from related fields such as biostatistics, infectious disease control, health promotion, genetics, clinical epidemiology, health economics, and medical ethics. The definitions are clear and concise, but there is space for some brief essays and discussions of the provenance of important terms. Sponsored by the International Epidemiological Association, the dictionary represents the consensus of epidemiologists in many different countries. All the definitions were revised repeatedly by an international network of contributors from every major branch of epidemiology. They are authoritative without being authoritarian. The Fourth Edition contains well over 150 new entries and substantial revisions of about the same number of definitions, plus a dozen new illustrations. Many of the new terms relate to methods used in environmental and clinical epidemiology.

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