By Jack A. Hager, MT(ASCP)SBB

Where Our Health and Global Health Merge

Benjamin Franklin (1706-90), in a letter to Jean-Baptiste Leroy, dated 1789, quoted what was an already familiar and fatalistic proverb:

“In this world nothing can be said to be certain, except death and taxes.”

There are diverse individual views on this quote, but it is reasonable, at least from my experience, to conclude that though most of us accept death and taxes as certainties, we also try to avoid or delay them as much as possible, and prefer to consign both to someone else.

Views on health care are also varied, but at a very simplistic level, individual and organizational views of health care can be categorized into three groups: My Health, Our Health, and Their Health.

My Health is probably the most obvious category, wherein concern is focused on meeting personal needs for a long, healthy, and productive life. Very few individuals or organizations have no interest in their own well-being or longevity.
Our Health is where the interest or concern extends to others for whom a genuine sense of care and compassion exists. The scope of the “our health” category is manifold and may be limited to family, friends, and associates, or be so sweeping as to include everyone everywhere.

Their Health is a category where consideration, thought, and resources are allocated to the health of people who are geographically distant and/or with whom we have limited association.

For some individuals and organizations, there really is no “their health” category, because the concern for others whom we genuinely care about, or the “our health” category, extends to all mankind. We can be certain that the American Society for Clinical Pathology (ASCP) is one such organization, because for a number of years through the ASCP Global Outreach program, work has been progressing around the world to improve laboratory quality and patient health outcomes. Global Community is, along with Knowledge, Advancement, and Collaboration, one of the four goals and areas of special interest for ASCP in 2014.

Global health and, by extension, the work ASCP is involved in, may seem on the surface to be mainly a “their health” issue because the work is being done on other continents and is providing for people worldwide. I’ve had members ask me why ASCP is so involved in global health. The answer in part is that because we live in an age when so much of the world is interconnected, global health has become pertinent to all three of the healthcare views mentioned above. Twenty years ago, the citizens of the United States didn’t consider...
West Nile Virus (WNV) an issue within the “my health” realm. WNV was an endemic disease found only in Africa, and thus was considered a “their health” problem. Today, whether in Southern California or Maine, it is in everyone’s best interest to take precautions against WNV during the summer.

Similarly, in the 1970s HIV was not an “our health” issue. It was not even a “their health” issue, except for perhaps a handful of people who were studying the bizarre manifestations of the infection. Today there are no communities and very few people who would not consider HIV to be a pertinent “our health” topic. President Obama exercised sound logic last fall when he extended the 10-year-old President’s Emergency Plan for AIDS Relief (PEPFAR) that was started by President George W. Bush. Also, in December, around the time of the 25th World AIDS Day, it was announced that the U.S. would shift $100 million from existing programs to a newly announced initiative to find a cure for HIV.

The global health initiatives ASCP is involved in are effective. For example, regarding the topic of HIV, a recent United Nations report states that the rate of new HIV cases has fallen 33 percent since 2001. New cases of HIV/AIDS worldwide fell from 2.5 million in 2011 to 2.3 million in 2012, while deaths related to the illness dropped to 1.6 million in 2012, down from 2005’s peak of 2.3 million. Unfortunately, the number of patients without access to treatment in low- and middle-income countries grew by almost 20 percent, to 9.7 million, indicating that there is more work to be done on prevention and treatment.

An ever-growing number of infectious diseases other than WNV and HIV have moved from being “their health” issues to “our health” and “my health” issues. Chagas disease, leishmaniasis, and a whole host of mosquito-borne viruses such as dengue fever and chikungunya are crossing continents. The various strains of influenza viruses continue to circumnavigate the globe.

Though the quote on death and taxes is spot on, it is also fatalistic. We need not be fatalistic on health issues; it is better instead to act proactively and collaboratively as ASCP is doing. Another famous historical leader, Woodrow Wilson, is quoted as saying, “One cool judgment is worth a dozen hasty counsels. The thing to do is to supply light and not heat.” This is an astute strategy when it comes to global health issues.

A great example of proactive and collaborative efforts is this season’s outbreak of the H1N1 influenza virus. As of this writing, H1N1 is being identified as a major component of the 2013-2014 flu season. Although the World Health Organization (WHO) announced the last H1N1 (or swine flu) pandemic was over in August 2010, epidemiologists knew H1N1 was still circulating. Thankfully, H1N1 was included in both last year’s and this year’s flu vaccines. In retrospect, that was an insightful decision given that in 1918, during President Wilson’s term, the H1N1 virus killed more people than World War I.

ASCP’s decision to make global health a strategic organizational priority “supplies light” by means of providing pathology services otherwise unavailable to thousands of people. Besides being the right thing to do, it shows that we have learned many lessons from history. Collaboration in the interest of global health has resulted in smallpox, measles, mumps, and diphtheria being generally eliminated as health concerns, and malaria mostly eliminated from the United States. We do not know what lies ahead, but collaboration on global health issues will provide us hope that someday we can speak of similar elimination of diseases such as HIV, WNV, and malaria worldwide.

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