

1. Define epidemiology and explain its main objectives.

Epidemiology is the study of how diseases and health-related conditions are distributed in populations, and the factors that influence or determine this distribution. In simpler terms, it looks at who gets sick, why they get sick, and how to prevent sickness. The main objectives of epidemiology are to describe the occurrence of diseases, identify the causes and risk factors, and apply this knowledge to control and prevent health problems within communities.

2. Differentiate between descriptive and analytical epidemiology, providing one example of each.

Descriptive epidemiology focuses on describing the “who, what, when, and where” of a health event. It identifies patterns and trends within populations but doesn’t necessarily explain why they occur. For example, recording the number of malaria cases in a specific region over a year is descriptive.

Analytical epidemiology, on the other hand, digs deeper into the “why” and “how.” It tests hypotheses to identify the causes or risk factors of diseases. For instance, comparing people who drink untreated water with those who drink filtered water to determine the risk of cholera is an analytical study.

3. Discuss the components of the epidemiologic triangle and how they interact in the spread of an infectious disease.

The epidemiologic triangle consists of three key components: the agent, the host, and the environment.

The agent is the cause of the disease, such as bacteria, viruses, or parasites.

The host is the organism (usually a human or animal) that can be infected.

The environment includes all external factors that influence exposure and transmission, such as sanitation, climate, and living conditions.

These three elements constantly interact. For example, in malaria, the agent is the Plasmodium parasite, the host is the human, and the environment includes mosquito breeding areas. A change in any one of these, say, more standing water after rainfall, can increase disease transmission.

4. Explain the concept of 'determinants' in epidemiology and give two examples of biological and environmental determinants.

Determinants are the factors that influence a person's health or risk of disease. They can be biological, behavioral, environmental, or social.

Biological determinants include factors like genetics and immune status. For example, a family history of diabetes or low immunity can increase disease risk.

Environmental determinants involve external conditions such as air quality or water sanitation. Living in a polluted area or using contaminated water are classic examples that affect health outcomes.

5. Describe the three levels of prevention in public health, and provide a real-life example for each.

1. Primary prevention aims to stop a disease before it occurs. Example: Vaccination against measles prevents infection altogether.

2. Secondary prevention focuses on early detection and prompt treatment. Example: Regular blood pressure screening to detect hypertension early.

3. Tertiary prevention helps reduce the impact of an established disease. Example: Physical therapy and medication for stroke patients to improve quality of life and prevent complications.

6. How did John Snow contribute to the development of modern epidemiology? Describe the method he used during the cholera outbreak.

John Snow is often called the "father of modern epidemiology." During the 1854 cholera outbreak in London, he investigated the pattern of cases and noticed they were concentrated around the Broad Street water pump. He mapped the cases, interviewed residents, and found that most affected people had used water from that pump. By removing the pump handle, the outbreak quickly subsided. His systematic approach of mapping, observation, and data analysis laid the foundation for modern epidemiologic methods.

7. Compare and contrast incidence and prevalence. Why is it important to understand both when studying a disease like diabetes?

Incidence refers to the number of new cases of a disease that develop in a specific period, while prevalence represents the total number of existing cases (both new and old) at a given time. Understanding both helps researchers and policymakers gauge different aspects of a disease. For diabetes, incidence tells us how many new people are developing it each year, useful for identifying emerging risk factors, while prevalence shows the overall burden on the healthcare system and society.

8. What are the common types of epidemiological study designs, and how does a cohort study differ from a case-control study?

Common epidemiological study designs include cross-sectional, case-control, cohort, and experimental studies.

A cohort study follows a group of disease-free individuals over time to see who develops the disease based on exposure to a certain factor.

A case-control study, in contrast, starts with people who already have the disease (cases) and compares them to those without it (controls) to see what exposures they had in the past. The main difference lies in direction, cohort studies move forward in time, while case-control studies look backward.

9. Define and differentiate between relative risk (RR) and odds ratio (OR), including when each is typically used.

Relative Risk (RR) measures how much more (or less) likely an exposed group is to develop a disease compared to an unexposed group. It's commonly used in cohort studies where incidence can be directly measured.

Odds Ratio (OR) compares the odds of exposure among cases and controls, and it's mainly used in case-control studies where actual incidence can't be determined. While RR shows risk directly, OR estimates it when direct calculation isn't possible.

10. Explain the role of epidemiological surveillance in managing public health. How can it help during an emerging epidemic?

Epidemiological surveillance involves the continuous, systematic collection and analysis of health data to detect, monitor, and respond to diseases. It helps identify outbreaks early, track their spread, and evaluate control measures.

During an emerging epidemic, like COVID-19, surveillance allows health authorities to quickly detect new cases, understand transmission patterns, and implement timely interventions such as quarantines, vaccination campaigns, or travel restrictions. Essentially, it's the backbone of effective disease control and public health response.

