

# Analysis of 9,896 Homeless Patients within an Urban Area in 2014 – 2019 – Social Pathology Leading to Poor Health

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## Original Article

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**Abstract:**

**Introduction:** Homeless populations in EU and USA presents an increasing demographic. Social pathology includes substance or alcohol abuse, family and unemployment distress, and several other factors resulting to poverty and homelessness.

**Patients and Methods:** The purpose of this study was to analyze the spectrum of both communicable and non-communicable diseases in two different urban environments: Large metropolitan area (BA) versus small regional town (NZ); one with 500,000 and other with 50,000 population.

**Results:** Between January 2014 to December 2019, 9,896 homeless patients in Bratislava and 299 in Nove Zamky were analyzed for the spectrum of communicable and non-communicable diseases. Commonest ID had seasonal occurrence; respiratory tract infections (RTI) in November to March, and gastrointestinal from June to September.

**Conclusion:** Vaccination of all homeless should be considered to prevent RTI TB, HIV, HCV in shelters

**Introduction:**

Large inequities in Europe and SE Asia as well as in Latin America resulted from at least two emergencies in social pathology: internal (homelessness) and external (migrant and refugee crisis). Homeless populations in the EU and the USA presents an increasing demographic. Social pathology includes substance or alcohol abuse, family and unemployment distress, and several other factors resulting in poverty and homelessness. Special concerns are in tuberculosis (TBC) and Hepatitis B, C and AIDS (1-3). The aim of this research is to assess the occurrence of patients at two outpatient departments of Homeless Health Posts in a large urban versus local urban setting, capital versus district cities.

**Patients & Methods**

Several health posts and one hospital serve the homeless population in Bratislava and Nove Zamky. The purpose of this study was to analyze the spectrum of both communicable and non-communicable diseases in two different urban environments: large metropolitan area (BA) versus small regional town (NZ); one with 500,000, the other with 50,000 population.

**Results & Discussion**

**Table 1** shows increasing dynamics of the total number of patients among the homeless population among 9,986 patients in 6 years in Bratislava and 299 in Nove Zamky. Respiratory tract infections were

responsible for more than 50% of all visits (511 & 150 – 50.2 vs 50.1%).

## Conclusion

Vaccination of all homeless should be considered to prevent hepatitis, TBC and influenza, and PH control for shelters is essential. Staff should be prevented from burnout syndrome (2). Surprisingly, no case of TB apart of 1 case was noted in 2014 – 2019.

**Table 1.** Annual occurrence of CD/NCD

2014	2015	2016	2017	2018	2019	Total
1,387	1,411	1,635	1,711	1,831	1,911	9,986

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