DATABASES ON PATIENTS' INFORMATION

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Patient Information Systems (PIS)

- Disease Diagnosis and Management are of vital importance for planning and evaluating Community Health Care
- By analyzing Morbidity, Mortality and Behavioral data, one can attempt to quantify health problems and the behavioral risk factors that contribute to them
- Hence PIS is important as it helps in correct recording, documenting and retrieval of patients information
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Databases at BIC, Sevagram	
TbDB	Tuberculosis
FilaDB	Filariasis
ObSoft	Obstetrics
Gynsoft	Gynaecology
PsySoft	Psychiatry
Sevamed	Bibliography with Abstract
Similarly other Conditions are being included	
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Bioinformatics Centre at JBTDRC, MGIMS, Sevagram

Established in 1999 with grant in aid from DBT, New Delhi

Thrust Clinical Informatics

- Publication of current awareness journal SEVAMED
- SEVAMED Quarterly issues for 2001 & 2003 with abstracts are available on CD
- CD on Essentials of Biomedical Informatics & Communication based on the Proceedings of Workshops held during 2000-2003 at this centre
- In house training to faculty and students
- National Workshops on Medical Informatics & Biomedical Communication
- ICMR WHO Workshop on Storage and Retrieval of Information 8

Tuberculosis status

Global status

- 1.7 billion infected worldwide
- Each year 8 million new cases & 3 million deaths

India

- 12 -13 million suffering from TB, 2.5-3 million new cases are added annually & 5 lakhs deaths
- Almost one death per minute due to TB
- 15% amongst active TB cases represent extrapulmonary form

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Problems in Diagnosis : Clinical, radiology, cytology bacteriology, histopathology etc Conventional AFB smear : Lacks sensitivity AFB culture : Time consuming (4-8 weeks). Restricted to open cases of TB Chest X-ray : Useful but can be non specific and insensitive Cytology, : Invasive procedures Histopathology : Expensive, requires skilled personnel PCR Not suitable for routine assay In children : Difficult in obtaining sputum specimens : Useful but not precise Mantoux text 10





Problems in diagnosis of filariasis

- Night blood is examined for microfilaremia
- Low parasitemia, may not be detected
- Microfilariae are normally not seen in peripheral circulation in clinical and occult disease
- Diagnosis based on clinical features is empirical
- No classical manifestations in occult cases
- Therapeutic trial with DEC in clinically suspected cases may show transient clinical improvement but does not give radical cure
- Long term DEC treatment appears to have macrofilaricidal activity and thus relapse may be prevented
- There is a need for immunodiagnosis & monitoring of active infection in the absence of microfilaraemia 13



Hospitals & Research Centres Evaluating Kits Institute of Vector Control and Zoonoses, Dept of Public Health and Preventive Medicine, Hosur NICD Regional Training and Research Centre, Calicut Regional Medical Research Centre (RMRC), Bhubaneshwar Centre for Biotechnology ,Chennai

- ISPAT General Hospital, Rourkela
- Advanced Patho Lab & Research Centre, Bilaspur

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