

National Health Examination Survey, Thailand



Wichai Aekplakorn, MD., PhD

Faculty of Medicine, Ramathibodi Hospital,
Mahidol University
National Health Examination Survey Office,
Health System Research Institute



National Health Examination Surveys

Objective

To determine the prevalence of certain health condition and risk factors

	<i>Year</i>	<i>Age group</i>
NHES I	1991	1+ years
NHES II	1997	1+ years
NHES III	2004	15+ years
NHES IV	2009	1+ years



Sample

- Non-institutionalized of registered population
- Multi-stage random sampling of 30 000 individuals age 1+ yr
- 5 provinces / regions + Bangkok = 21 provinces



NHES procedure

- Ascertain selected individuals at their household to ask for permission and consent
- Interview and examination at local health centers, schools or temples in the community
 - Blood pressure measurement
 - Anthropometry
 - Blood samples,
- Administered by trained personnel



NHES topics

- Obesity
- Diabetes
- Nutrition
- Anthropometry
- Risk behaviors
- Mental health
- Reproductive health
- Older person health

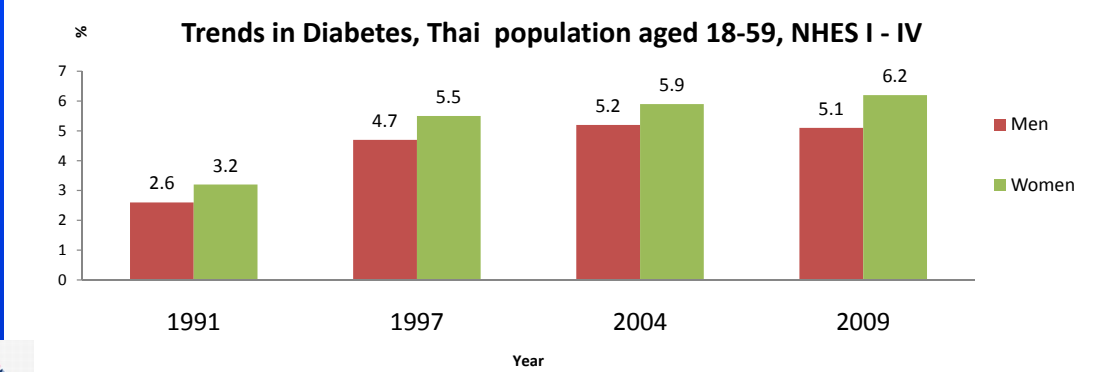
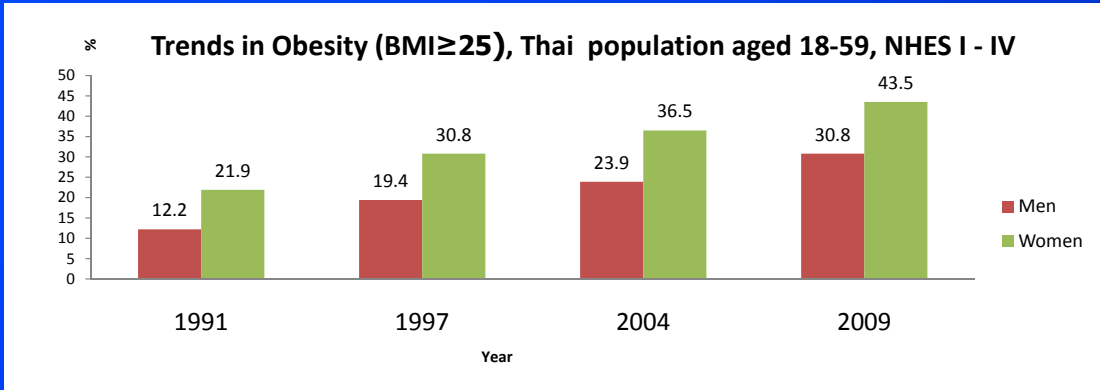




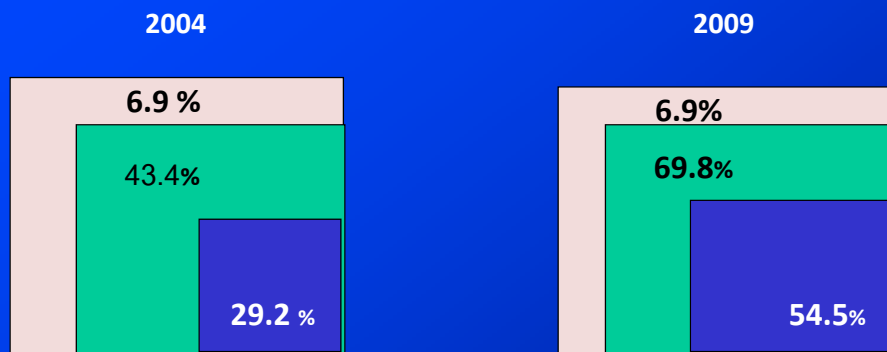
Example Findings and public health Action

- Rising levels of obesity & diabetes
 - Obesity control program
 - Exercise group in community
- Unawareness of Hypertension and diabetes
 - increase screening program
- Suboptimum control of Blood glucose & Blood pressure
 - Clinical practice guideline and service
- Low vegetable and fruit consumption
 - Public health campaign





Prevalence, treatment and control of Diabetes in 2004 and 2009



- Prevalence
- awareness / all diabetes
- Treated & controlled / All treated (FPG < 140mg/dL)



NHES Data, Health Policy, and Practice

- Unique national source of actual measurement data
- Integrate findings from each interview and exam component
- High quality of data collection, processing and analysis
- Responsive and relevant to current and future data needs



Future Activities

- Future of Health examination Surveys
 - Mortality studies, verbal autopsy
 - Local HES
 - Relevant health specific issues
 - Longitudinal Follow-ups
 - PDA
 - Mobile units



Summary

- Many lessons learned over twenty years
- We don't know if we did not measure
- Focus should be on content, logistical issues and operational methods and quality control
- Quality of data collection and timely release of results is essential.



Thanks



<http://www.nheso.or.th>



Thanks



<http://www.nheso.or.th>

