

## Study highlights respiratory disorders prevalent in the Middle East

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Lung diseases in the Middle East range from the centuries-old pulmonary tuberculosis (TB) to modern manifestations caused by chemical warfare. A new paper now available in *Respirology*, a journal of the Asian Pacific Society of Respirology, provides pulmonologists and patients with the first comprehensive review of respiratory illnesses specific to the Persian Gulf region, and the challenges in treating them. This unique review is the first of its kind in this topic and will serve as an important landmark reference article.

A wide spectrum of pulmonary disorders affect individuals living in the Middle East, including bronchial and pleural diseases, respiratory tract infections and neoplasms (tumors), as well as chest traumas caused by traffic accidents. According to the World Health Organization (WHO) Global Burden of Disease Report there were 114,000 deaths caused by TB; 407,000 from respiratory infection; 25,000 attributed to lung, trachea and bronchus cancers; and 160,000 associated with respiratory disease such as chronic obstructive pulmonary disorder (COPD) and asthma in the Eastern Mediterranean Region1 in 2008.

"The wealth of pulmonary pathologies encountered in the Middle East probably surpasses all other regions of the world," explains lead author Dr. Atul Mehta, Chief Medical Officer at Sheikh Khalifa Medical City in Abu Dhabi, <u>United Arab Emirates</u>. "Our paper highlights the diverse conditions specific to this region that contribute to the variety of <u>respiratory illnesses</u> found among individuals living in Middle Eastern countries." Major categories covered in the review include



environmental factors, infections, genetic-idiopathic diseases, sleep disorders, lung malignancies, pleural diseases, and miscellaneous respiratory conditions.

For example, the vast desert area of the Middle East experience extreme temperature changes which can exacerbate chronic lung diseases such as asthma. The frequent wars in the Middle East have included chemical ammunitions that can cause immediate lung damage and have potential long-term effects, ranging from bronchiolitis to "desert-storm pneumonitis." Additionally, water-pipe smoking, which is unique to the Gulf region and on the rise, particularly in women and children, has been linked to pulmonary disease, coronary heart disease, and pregnancy-related complication in preliminary studies.

The authors suggest the broad array of lung disorders can be attributed to the large immigrant population and unique cultural and environmental conditions in the region. "An integrated approach that involves public health, primary care, and pulmonary specialists is required to ensure effective management of the various lung diseases in the Persian Gulf," concluded Dr. Mehta. "Consideration of the unique cultural and environmental factors will aid clinicians and public health officials in combating these health issues and ensuring compliance to medical care to improve patient outcomes."

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