GOOGLING HEALTH

The utopian dream of having a systematic record of all health data of patients may yet see the light of day. Google, the ubiquitous web search engine is now testing an online storage bank where people can store and access health records. Google has collaborated with Cleveland Clinic to test an electronic system which will allow patients to control their records and share it with physicians, pharmacies and health service providers. The vital element will of course be security. A login and password will be provided to patients. While online records and data management has flowered in many other sectors like banking, health care has been the proverbial laggard. There have been many false starts in this area and even in the US, only a tiny fraction of hospitals have electronic records. Cleveland Clinic already has an electronic system in place to store records of 100,000 patients. Google hopes that this experiment if successful will translate to a universal or national level health care system (Reuters.com, 21 February 2008).

FOOD FOR THOUGHT

In many countries like India, Indonesia and Vietnam, the poverty line was originally anchored to calorie norm, and was defined as minimum calorie requirement for subsistence levels. The calorie based poverty lines were based on calorie costs based on food expenditure pattern in a given year. The poverty line has been periodically raised to account for food price inflation without revisiting their original calorie basis. But in the last two decades, there has been major economic transformation in our countries. Consequently, lifestyle changes have swept through the nation which have altered dietary habits. These have major nutritional and hence developmental implications.

In a study published in the Economic and Political weekly of India, Ranjan Ray compares the experiences of Vietnam and India in dietary diversity and undernourishment in the last 2 decades. Both countries had high economic growth rates and large reductions in poverty. But while Vietnam also recorded reductions in undernutrition, the reverse was true for India. The Vietnamese intervention program which emphasized nutrition enhancement has lessons for high economic achievers like India.

Similar issues were raised in a recent book by Veena Rao “Malnutrition: an Emergency- What it Costs the Nation”. She emphasizes that the number of people who suffer from malnutrition outstrip those below the poverty line. In India we pay for widespread malnutrition with a 4% loss in GDP. Since more than 50% of malnutrition is not related to poverty, thoughtful interventions may yet reduce the rampant undernourishment in India. (Economic and Political Weekly, 23 February 2008; www.igovernment.in, 6 March 2008)

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