Editorial: Two Complement Views Toward Disease Development: Clinical and Prevention Perspectives

Maryam Shakiba1,2*.

1. Department of Epidemiology and Biostatistics, School of Health, Guilan University of Medical Sciences, Rasht, Iran.
2. Cardiovascular Diseases Research Center, Guilan University of Medical Sciences, Rasht, Iran.

* Corresponding Author:
Maryam Shakiba, PhD.
Address: Department of Epidemiology and Biostatistic, School of Health, Guilan University of Medical Sciences, Rasht, Iran.
Tel: +98 (13) 33824663
E-mail: shakiba_mm@yahoo.com

Abstract

The principle of natural history of disease is an essential concept in recognizing disease development and provides a fundamental framework to conceptualize disease entities and ways of intervention. It refers to the disease progression over time in the absence of any treatment. In fact, the journey to the disease development goes from several stages that can be depicted using two complement approach; clinical and preventive. From the clinical point of view, disease begins with the pathologic changes within the body that is known as subclinical stage of the disease. But, from the prevention point of view, disease commences long before subclinical stage when exposure to risk factors takes place that is referred to as susceptibility stage. With the recognition of primordial prevention for non-communicable disease (NCD) prevention [1], the disease spectrum goes beyond of this stage and encompasses social determinants of health in which societal structure prepare the presence of risk factors in the community [2]. This stage goes far

Keywords: Natural history, Primordial Prevention, Primary health care, social determinants of health
Beyond the initiation of subclinical disease and consider the health as social capital.

Based on these two perspectives on disease development, there are two strategies that may dominantly adopted by policy-makers in countries: clinical-care vs health-care strategy. Clinical-care strategy is a profession-centered concept, based on clinical role, and begin with the first contact of a person seeking treatment and a physician or other health professional [3]. Though, as a worthwhile and successful strategy to prevent disease severity and death, the history tells us that it may result in raise the prevalence of disease and disabilities and reduce quality of life if considered as a sole strategy for prevention of disease [4]. This condition is referred to as failure of success meaning that by controlling threatening fatal life event, the average life span was increased in the cost of prolonging their duration hence increasing disabilities [5]. On the other hand, the health-care policy considers all aspects of human life throughout the lifespan and is rooted in social justice and equity [6]. All Individual, social, and environmental conditions are the centerpieces of health-care strategy. Primordial prevention by addressing the social determinants of health is aimed at reducing the various NCD risk factors in the community. Through appropriate modifications in human life style, not only the human being could benefit but also the environment would be less harmful and devastating. This is the best approach for sustainable development and creating a healthy human that is harmony with nature [7].

Despite the holistic view of health-care approach, many countries undermine and often neglect the straightforward principles of preventative perspective in their communities. The primordial prevention is tailored to target the underlying social and environmental conditions that promote the disease. Many simple but life-saving actions can be exemplified in this strategy that need to be provided by the governance such as access to safe sidewalk and green space to promote physical activity, affordability and affordability of healthy food product, safe management of hospital and domestic waste, controlling of air pollution, access to safe water and basic sanitation and equal opportunity for welfare. On the other hand, the primary prevention strategies need to be specifically tailored by health authorities are those that is formulized in the concept of primary health care such as: “community education on health problems and NCD risk factors, maternal and child health care, family planning, prevention and control of endemic diseases, immunization against vaccine-preventable diseases, appropriate treatment of common diseases and injuries, and provision of essential drugs” [8]. Abundant evidence shows that compared to the rising cost of clinical-care, the health-care strategies provide opportunities to exploit prevention as an intelligent and wise approach yield impressive results in terms of reducing burden of diseases, improving quality of life, and making sustainable development of communities [9-12].

**Ethical Considerations**

**Compliance with ethical guidelines**

This is an editorial note. So, there is no applicable ethical consideration to be considered in this article.

**Funding**

This research did not receive any grant from funding agencies in the public, commercial, or non-profit sectors.

**Conflict of interest**

The author declared no conflict of interest.

**References**


