

NEW CRYSTAL HEALTH SERVICES LTD.

# DISEASE TRENDS

Enhancing Healthcare Through Research



ISSUE 01

OCTOBER | 2024

In Focus

## DISEASE TRENDS

A comprehensive analysis  
within the Ashaiman  
Metropolis, Ghana.

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## EDITORIAL

**New** Crystal Health Services Ltd (NCHS) has played a vital role in enhancing the health outcomes of marginalized communities by prioritizing quality and affordable healthcare services. Over the past 21 years, our group has strived tirelessly to meet and enhance our services continually by leveraging highly qualified personnels, technology and state-of-the-art facilities.



In line with our dedication to delivering high-quality healthcare to our valued clients, we are proud to announce the establishment of a research arm focused on scientific investigations to discover innovative solutions for diseases relevant to our population. To mark this initiative, we are excited to launch NCHS's inaugural newsletter, "Enhancing Healthcare through Research." In this edition, we showcase NCHS's significant contributions to healthcare delivery in Ghana and extend an invitation for partnerships to advance public health research.

Recently, Ghana has seen a rise in non-infectious diseases like hypertension and diabetes, while infectious diseases remain a concern. Lifestyle choices such as illegal mining (galamsey) and narghile (shisha) smoking have also become more common, adding to public health challenges. This has driven more research to understand the effects of these factors on the health of our people. Through this newsletter, we aim to share important insights on these issues and the latest healthcare developments.

Our mission is not to just observe trends, but to inspire change through research. As someone deeply committed to research, I have personally experienced the transformative power it holds in healthcare. By tapping into our community's collective knowledge, we can find new ways to improve healthcare in Ghana and beyond.

The healthcare sector presents both challenges and opportunities to innovate. Limited funding, regulatory complexities and the urgency of patient care are some of the difficulties we face. But within these challenges lie opportunities to learn and improve. Through research, we can refine our practices and better serve our patients.

I am honored to lead this collaborative endeavor, which relies on the strength of our community. Whether you are a healthcare professional, researcher or someone who cares about health, your contributions are welcome. Together, we can build a healthier future for everyone. As we embark on this journey, I extend my deepest gratitude to our dedicated team for bringing this newsletter to fruition. To our readers, thank you for joining us on this journey as we explore the complexities of healthcare and work towards a stronger, healthier community.

The Editor-in-Chief (Dr. Gameli Kwame Norgbe)

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## EDITORIAL TEAM



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Dear Friends and Supporters, I am thrilled to extend a warm welcome to you all as we unveil the inaugural edition of The New Crystal Health Services (NCHS) newsletter. This occasion marks a significant milestone in our journey of growing together in good health.



At NCHS, our mission is simple yet profound: to provide quality healthcare services with compassion and integrity. For over two decades, we have remained steadfast in our commitment to this mission, tirelessly striving to meet and exceed the evolving needs of those we serve.

I am immensely grateful to our dedicated team of healthcare professionals, volunteers, donors and community partners who have stood by us every step of the way. Your unwavering support and commitment have been instrumental in our success and I extend my heartfelt thanks to each and every one of you.

As we celebrate the transformation of Michel Camp Healthcare Centre into a fully-fledged hospital, made possible by the \$5.2 million funding from the International Finance Corporation and the launch of the New Generation Wellness Campaign - which aims to register and renew 6,000 students in the Ashaiman municipality under the National Health Insurance Scheme - we also recognize the significant advancements in healthcare delivery, improved health outcomes and service expansion. Looking ahead, we remain committed to broadening our reach, enhancing our programs and leveraging innovative solutions to address the ever-changing landscape of public health.

I invite you to join us on this journey of transformation and impact. Whether through volunteering your time, donating to support our initiatives, or simply spreading the word about our work, your involvement makes a difference. Together, we can empower individuals, strengthen communities and build a healthier, more equitable world for all.

Dr. Wisdom Amegbletor (CEO, NCHS)

**DISEASE TRENDS IN ASHAIMAN**

**Introduction**

**Understanding** disease epidemiology and its evolving trends is crucial for governments and public health institutions worldwide. By scrutinizing prevailing patterns, authorities can develop targeted strategies to address emerging, endemic or potentially epidemic diseases. These trends not only inform national responses but also facilitate regional and global coordination in public health efforts (Li et al., 2024; Ai et al., 2024).

Here, we delve into the contemporary disease trends observed in the Ashaiman municipality during the first quarter of 2024, juxtaposing it with the regional and national trends in the same quarter under review.

Situated in Ghana, the Ashaiman municipality encompasses six sub-metros: Amui Dzor, Blakpatsona, Maamomo, Mantseman, Niiman, and Tsinaï-agber. The Ghana Health Service categorizes diseases into eight groups: communicable immunizable, communicable non-immunizable, non-communicable, mental health conditions, specialized conditions, obstetric and gynecological conditions, reproductive tract diseases, injuries, and others. These classifications collectively cover 108 unique disease items.

To understand the trends at the municipal, regional and national levels we combined all categories of disease and filtered out All other diseases (encompasses all undefined diseases) and eight variables of malaria (leaving confirmed cases of uncomplicated malaria, severe malaria, and uncomplicated malaria in pregnant women). In the Ashaiman municipal, hypertension was the highest disease burden followed by acute urinary tract infection (AUTI) and typhoid fever (Table 1: Ashaiman: Top 10 diseases by number of cases). This trend highlights the rising rate of morbidity linked to non-communicable diseases. The prominence of hypertension at the top of the list underscores the growing impact of lifestyle-related health issues within the population.

**Ashaiman: Top 10 diseases by number of cases**

Rank	Disease/Infection	Total	Percentage
1	Hypertension	3,420	7.70
2	AUTI	3,401	7.66
3	Typhoid fever	2,929	6.60
4	Malaria	2,303	5.19
5	URTI	1,604	3.61
6	Anaemia	1,580	3.56
7	Ulcer	1,469	3.31
8	ROA	1,210	2.72
9	PRC	1,154	2.60
10	Skin diseases	1,132	2.55

Ashaiman and the regional data show hypertension and AUTI as significant health burdens. However, at the regional level, upper respiratory tract infection (URTI) takes the first spot (as shown in "Table 2: Regional: Top 10 diseases by number of cases").

**Regional: Top 10 diseases by number of cases**

Rank	Disease/Infection	Total	Percentage
1	URTI	77,541	9.81
2	AUTI	58,673	7.42
3	Hypertension	39,067	4.94
4	Malaria	38,296	4.84
5	Typhoid fever	37,886	4.79
6	Anaemia	31,729	4.01
7	ROA	30,267	3.83
8	Diarrhoea diseases	28,219	3.57
9	Skin diseases	26,063	3.30
10	Gynaecological conditions	16,128	2.04

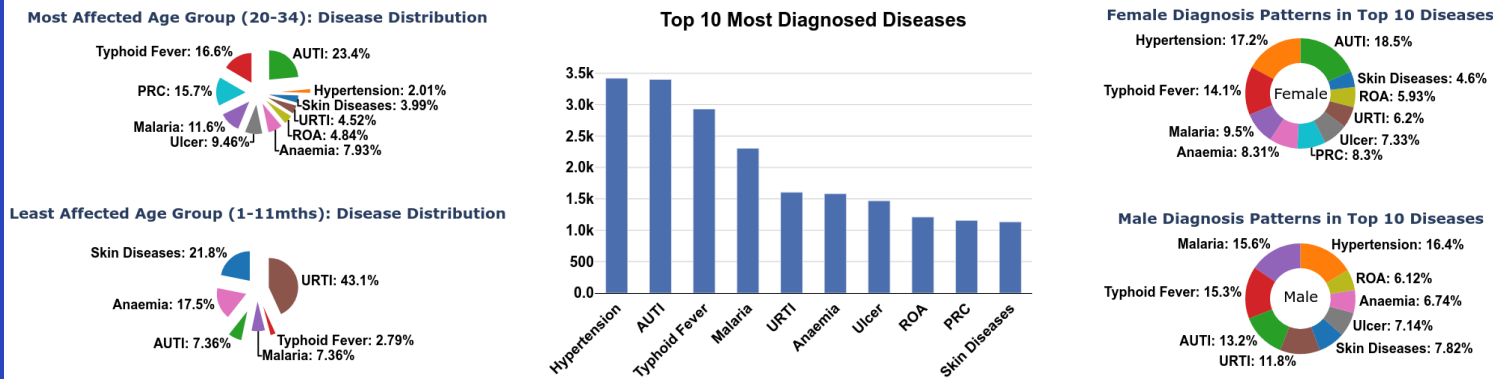
At the national level, malaria was the highest ranked disease, followed by URTI and rheumatism / other joint pains / arthritis (ROA) (as shown in "Table 3: National: Top 10 diseases by number of cases").

**National: Top 10 diseases by number of cases**

Rank	Disease/Infection	Total	Percentage
1	Malaria	974,723	15.22
2	URTI	692,638	10.82
3	ROA	403,479	6.30
4	Diarrhoea Diseases	317,316	4.96
5	AUTI	297,337	4.64
6	Anaemia	285,727	4.46
7	Skin Diseases	229,343	3.58
8	Intestinal Worms	203,602	3.18
9	Typhoid Fever	188,503	2.94
10	Hypertension	148,408	2.32

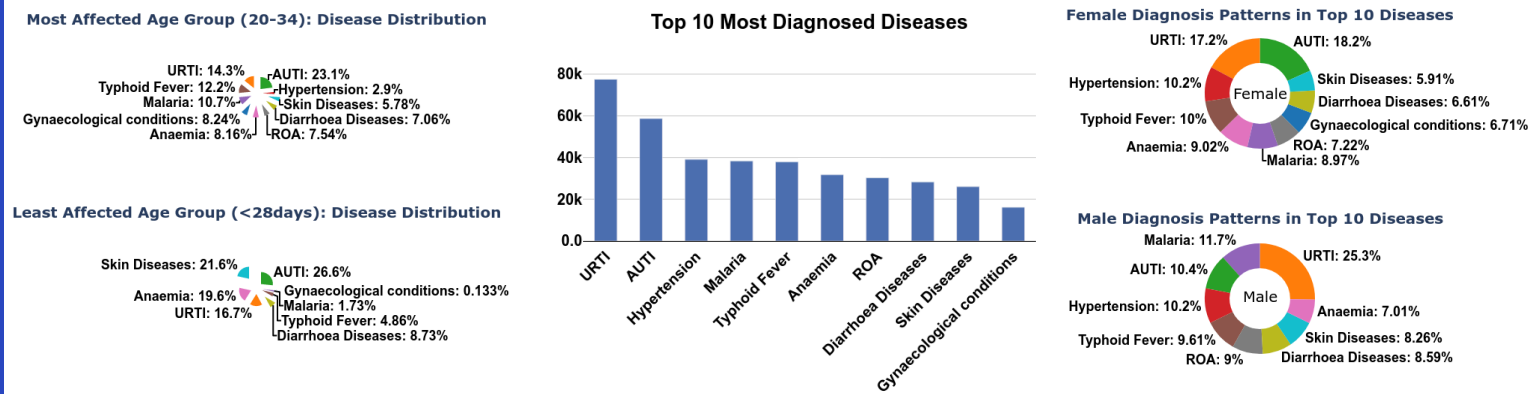
# DISEASE TRENDS IN ASHAIMAN

In the Ashaiman municipal, hypertension, a non-communicable disease, was ranked the highest with over three thousand cases recorded. In looking at the distribution among the highest (20-34 years) and the lowest (1 - 11 mths) affected age groups in the municipal, one can appreciate the disparity of the distribution of diseases. While upper respiratory tract infection (URTI) was the highest burden in the least affected age group among the top 10 diseases, acute urinary tract infection (AUTI) was the highest in the most affected age group. The disease distribution among gender also differed, with AUTI and hypertension being the highest among females and males respectively.



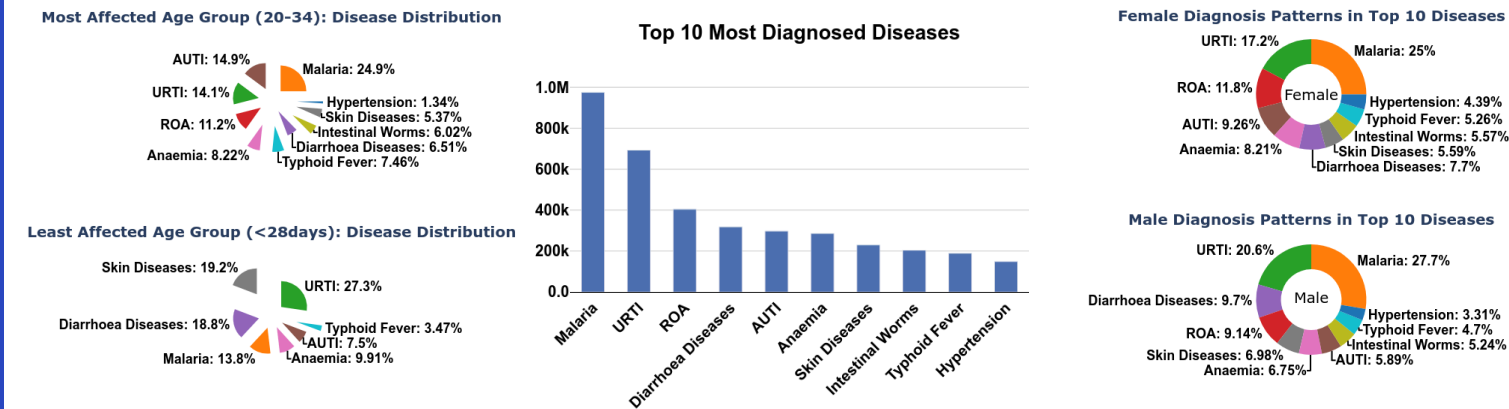
**Figure 1: Ashaiman trends in the 1st quarter (Q1 2024):** In Ashaiman, it is seen that hypertension edges AUTI by a few margin. This is an indication that non-communicable diseases might become the leading cause of morbidity in the area. NB: AUTI: Acute urinary tract infection; URTI: Upper respiratory tract infection; ROA: Rheumatism / other joint pains / arthritis; PRC: Pregnancy related complications

Regionally, upper respiratory tract infection (URTI) recorded the highest number of cases within the first quarter of 2024. A peak into the distribution among the highest (20-34 years) and the lowest (<28 days old) affected age groups show that infectious diseases dominated the top 3 in each group. Also, acute urinary tract infection (AUTI) was the highest in both age groups. For gender distribution, all the top 3 diseases were infectious diseases in males while hypertension was the third highest in the females.



**Figure 2: Regional trends in the first quarter (Q1 2024):** Upper respiratory tract infection (URTI), acute urinary tract infection (AUTI), hypertension, malaria and anaemia were the top 5 diseases. NB: AUTI: Acute urinary tract infection; URTI: Upper respiratory tract infection; ROA: Rheumatism / other joint pains / arthritis; PRC: Pregnancy related complications

At the national level, malaria and rheumatism/other joint pains/arthritis (ROA) rank among the top three most diagnosed diseases. Interestingly, this trend is not observed at the Ashaiman metropolis or at the regional level, reflecting unique demographic characteristics and other factors influencing disease epidemiology in different areas. This finding underscores the significant burden of both infectious diseases, like malaria, and non-communicable diseases, such as arthritis, across the country. The data suggests a need for diverse healthcare strategies that address both communicable diseases and chronic conditions to effectively manage the nation's health challenges. Malaria also recorded the highest number of cases across genders and was most prevalent among the most affected age group (20 - 34 years). The only exception where malaria was not the topmost disease was seen in the least affected age group (> 28 days), suggesting age-specific susceptibility and risk factors.



**Figure 3: National trends in the first quarter (Q1 2024):** At the national level, malaria, upper respiratory tract infection (URTI) and rheumatism / other joint pains / arthritis (ROA) contributed to the top 3 highest disease burden. NB: AUTI: Acute urinary tract infection; URTI: Upper respiratory tract infection; ROA: Rheumatism / Other Joint Pains / Arthritis; PRC: Pregnancy related complications

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The rising prevalence of non-communicable diseases, such as hypertension, anaemia and rheumatism, highlights the need for lifestyle interventions and regular screenings to manage and prevent these conditions. However, it is important to acknowledge the fact that communicable non-immunizable diseases continuous to contribute to the highest burden at municipal, regional and national levels (Figure 1, 2 & 3). The epidemiological data presented here can guide stakeholders, including hospitals, in designing effective health interventions and efficiently allocating resources to improve public health outcomes in the Ashaiman municipality and beyond.

## References

- Li, J. et al. (2024). Current Status of Malaria Control and Elimination in Africa: Epidemiology, Diagnosis, Treatment, Progress and Challenges. doi: 10.1007/s44197-024-00228-2
- Ai, L. et al. (2024). The impact of the COVID-19 pandemic on Staphylococcus aureus infections in pediatric patients admitted with community acquired pneumonia. doi: 10.1038/s41598-024-66071-4

## STAFF IN FOCUS

**Dr. Norgbe** is a consultant obstetrician and gynaecologist with over forty years of experience in practice and academia. Dr. Norgbe trained at the Lvov Medical Institute in Ukraine, Kiev Research Institute, Uppsala University in Sweden, Liverpool School of Tropical Medicine and the University of South Africa.



**DR. GAMELI KWAME NORGBE (M.D, PHD, DRHDC, FGCS, MPH)**

Dr. Norgbe has worked with both the Ministry of Health/Ghana Health Service and private healthcare facilities, rising through the ranks from Medical Officer to Senior Medical Officer and then specializing in obstetrics and gynaecology to become a consultant in the field.

Prior to joining New Crystal Health Services as an obstetrics and gynaecology consultant, Dr. Norgbe worked at the Volta Regional Hospital in Ho, Koforidua Regional Hospital, Caiquo Hospital, Darbem Clinic, Bengali Hospital, and Port Medical Centre.

In addition to providing high-quality care for his patients, Dr. Norgbe is passionate about imparting knowledge in healthcare practice in Ghana. He has played diverse roles as a head of department, lecturer and examiner in both Ghana and South Africa.

Dr. Norgbe was a member of a Presidential Taskforce set to develop Nursing and Midwifery degree programmes for the University of Health and Allied Sciences. He also served as the Acting Dean of the School of Nursing and Midwifery and the Acting Dean of the School of Allied Health Sciences at the University of Health and Allied Sciences in Ho.

Dr. Gameli Kwame Norgbe is a foundation fellow of the Ghana College of Physicians and Surgeons (GCPs) with research interests in adolescent pregnancy and sexual behavior, clinical aspects of reproductive health, maternal and child health, family planning and contraception.

**New Crystal Health Services (NCHS)** continuous to be a leading private healthcare service provider in the country with accreditation from the Health Facilities Regulation Agency (HeFRA) and certified by International Organization for Standardization (ISO 45001, 27001 and 9001) providing high quality and affordable healthcare to our valued clients across eight (8) branches. Our mission is to provide exceptional, accessible, and compassionate care to clients and their families in a timely, safe, friendly and cost-effective manner.

At NCHS, we engage in medical outreaches geared at providing healthcare services to the vulnerable and under-served communities. The medical outreaches we undertake seek to champion preventive health services by providing free health education that is geared towards empowering individuals to take control of their health and well-being.

By the end of May, 2024, we had undertaken 246 medical outreaches since January. These outreaches which falls within our community engagement strategic goal for the year has recorded close to five thousand (4,995) beneficiaries. The beneficiaries were screened for breast cancer, fasting blood sugar, blood pressure, malaria and hepatitis B during these outreaches. These outreaches were carried out at churches, markets, lorry stations, schools within Ashaiman, Tema, Michel Camp, Adjei Kojo and the adjoining towns and communities to help prevent non-communicable diseases such as diabetes, cancer and hypertension which are on the rise. For the period under review (January - May 2024), our affiliated branches at Ashaiman, Afenyo, Tema, Medical Mall, Michel Camp and Adjei-Kojo branches undertook 75, 96, 6, 21, 28 and 20 medical outreaches respectively.

Through our slogan, "Growing together in good health", we are committed at leveraging our expertise and resources into undertaking more medical outreaches to help increase the quality of life, health knowledge and behavior, reduce the incidence of diseases and decrease the economic burden of disease within the Ghanaian society.

## UNCONVENTIONAL PRESCRIPTION



### IN THE CORRIDOR

**Fuseini:** (Sitting in the waiting room, looking puzzled) "Did you hear that sound just now?"  
**Ama:** (Also puzzled) "Yeah, sounded like someone getting slapped. But I don't see anyone around."  
**Fuseini:** (Scratching his head) "Weird. Maybe, it is just my imagination."  
**Ama** (Chuckling) "Or maybe it is the doctor's new treatment method—slap therapy!"  
**Fuseini:** (Laughing) "Slap therapy? That is ridiculous!"

### THE CONSULTING ROOM

**Doctor:** "Good morning. How are you today?"  
**Fuseini:** "Honestly, Doc, I have been feeling really low. It is like a dark cloud is hanging over me all the time."  
**Fuseini** tells the doctor all the symptoms and how he feels.  
**Doctor:** (With a professional face): "I see. Well, let us see if we cannot chase away some of those clouds, shall we? Sometimes, unconventional methods can be surprisingly effective."  
**Fuseini:** (Curiously) "Unconventional methods? I am interested."  
**Doctor:** "Yes, indeed. In fact, I have just the thing for you. It is a treatment I have been experimenting with and I believe it could really help lift your spirit."  
**Fuseini:** (Dubiously) "Alright, I am listening."  
**Doctor:** "I am prescribing three solid slaps a day."  
**Fuseini:** (Taken aback) "Three slaps? Are you serious, Doc!"

The patient's imagination takes flight.  
**In Fuseini's mind:** Suddenly, the scene shifts. He envisions himself standing in a boxing ring, wearing oversized gloves and surrounded by cheering spectators. The doctor, dressed as a referee, stands before him, counting down as he prepares to deliver the first slap. With a nervous smile, Fuseini braces himself for impact, wondering how on earth this could possibly help.  
**Back in reality:** Fuseini's skepticism lingers on. As the patient expresses his disbelief, the doctor's eyes twinkle mischievously and a warm smile spreads across his face.

**In the doctor's mind:** He sees the opportunity to break the tension and lighten the mood. With a playful glint in his eye, he leans forward, adopting a mock-serious expression.

**Doctor:** Absolutely. But do not worry, I promise not to use the heavyweight gloves. Just a gentle tap to tickle your funny bone.

**Fuseini:** (Surprised, then chuckling) Well, that is one way to do it! As he laughs, the atmosphere in the room shifts, the weight of his worries momentarily lifted by the doctor's infectious humor.

**Doctor:** (Grinning) Laughter, my friend, is often the best medicine. And who knows? Maybe a little slapstick humor will be just what you need. The doctor goes ahead to discuss mental health and how Fuseini needs to consider that.





## Vision

To become a diversified healthcare company providing the highest quality of health service and research.

## Mission

To provide exceptional, accessible and compassionate care to our clients and their families in a timely, safe, friendly, and cost effective manner.

## Specialist Services

- Urology
- Surgeon
- Pediatrics
- Obstetrics
- Endoscopy
- Paediatrics
- Dermatology
- Gynaecologist
- Ear, Nose & Throat
- Physician Specialist

## Branches

- Tema - Community. 1 & 8.
- Takoradi - Anaji & Mall.
- Adjei Kojo - Near Block Factory.
- Ashaiman - Main Station & Kuffuor Lorry Station.
- Michel Camp - 100 Meters from the Millitary Camp.

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