

PREVALENCE OF ACUTE RESPIRATORY TRACT DISEASES AMONG SOLDIERS DEPLOYED TO MILITARY OPERATIONS IN IRAQ AND AFGHANISTAN

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Background: Respiratory diseases are one of the most common health problems among service personnel assigned to contemporary military operations which are conducted in areas characterized by adverse environmental conditions. This article reviews the results of the studies into the prevalence of acute respiratory tract diseases among soldiers of Polish Military Contingent deployed to Iraq and Afghanistan. The article also discusses a number of factors which increase the prevalence of diseases diagnosed in the population of soldiers on a military mission in different climatic and sanitary conditions. **Material and methods:** Retrospective analysis was based on medical records of Polish troops treated on an outpatient basis (initial visits, excluding check-up appointments) in Iraq in the period 2003-2004 (n = 871), and in Afghanistan in years 2003-2005 (n = 400), in 2009 (n = 2300), and in 2010 (n = 2500). Intensity rates were calculated per 100 persons. **Results:** Acute respiratory tract diseases were one of the most common health problems treated in outpatient medical facilities in all four study populations, i.e.: in Iraq 2003-2004 (45,6 cases/100 persons), in Afghanistan 2003-2005 (61,8/100 persons), in 2009 (45,3/100 persons), and in 2010 (54,8/100 persons). **Conclusions:** The prevalence of respiratory diseases was closely related to the effects of environmental factors (sand and dust storms, extreme temperature changes within 24-hours, unsatisfactory sanitary conditions), and common disregard of basic principles concerning health prevention. Increased incidence of the diseases was observed in March-April and again in September-October, when the Polish contingent rotated its troops and when the newly-arriving soldiers were undergoing an acclimatization process to adjust to environmental conditions prevailing in the theater of operations. Medical personnel supporting Polish Military Contingents in Iraq (2003-2004) and Afghanistan (2003-2005, 2009-2010) had limited diagnostic capabilities as far as the treatment of acute respiratory diseases was concerned (bacteriological and viral diagnoses were unavailable).