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Natural and social-cultural environmental factors are very important in maintaining the health of man. Natural aspects and man's activities are major contributory factors in spreading the communicable diseases in the community. The spatial distribution of diseases chiefly depends upon the physical and socio-cultural factors of the environment. Disease is nothing but a disturbance in the delicate balance between man and his environment and all activities of man are directly controlled by the environment.

The work undertaken by the author entitled, "Geo-Medical Studies of Some Diseases of Pune Division of Maharashtra State" mainly explains the relationship between environmental factors and distribution of major diseases in the region.

While studying the environment and it's effect on distribution of diseases in Pune division, it is found out that the low death rate is remarkably found in Sangli, Kolhapur, Ahmednagar and Satara districts which are the hilly areas. While in the river plain areas the death rate is high. The waterborne diseases show their higher prevalence in the river basins like Krishna-Koyana, Bhima-Sina and Panchganga and Bhogawati. It is also found out that climate plays an important role in the distribution of the diseases seasonally.

while studying the impact of socio-cultural factors, it is noted that number of deaths in the working age group and that of old age above 60 years are rapidly increasing, while the infants and young population is much more safer. It is interesting to note that 1 to 14 years age group in the Pune division is the most safest age group. The district-wise cause specific death rate shows that tuberculosis, diarrhoea, cancer and tetanus are the major diseases of Pune division. The causation and spread of the respiratory diseases is much more in the major cities of the Pune division. Tuberculosis and cancer are the diseases of increasing intensity.

The study of spatio-temporal analysis of selected diseases in pune division, reveals that there is positive correlation between physico-socio-cultural factors and spatial distribution of the diseases. The physiography mainly attributes to the spread of malaria, as the lowlying areas of Krishna, Bhima and Godavari basins have proved to be the endemic places for malaria.

The overcrowding, the bad insanitary provisions and urban pollution due to rapid industrialization are the predisposing factors for the spread of tuberculosis, cancer and pneumonia. The pune is the best example for this in this division. Atmospheric pollution and use of unsafe and polluted drinking water are mainly responsible for spread of these diseases in the division. The maps of districtwise

and citywise cause specific death rates and the ranking techniques show that tuberculosis, cancer, pneumonia are the major diseases of all ages of people in pune division. The special precautionary measures be implemented to control the increasing number of deaths by cancer, tuberculosis and pneumonia in Pune division.

The study of spatial patterns of diseases in cities has proved the direct relationship between altered environment and spread of selected diseases. The overcrowding, urban pollution due to rapid industriliazation, the improper sanitory provisions are the predisposing factors for the spread of tuberculosis, cancer, pneumonia, tetanus and diarrhoea in the major cities like pune, Miraj, Satara, Kolhapur, Solapur, Ahmednagar and Pandharpur. Deaths due to tuberculosis and cancer are increasing every year in much of the cities of pune division. Tetanus is a notable disease of Satara city. Leprosy is creating a serious problem in the cities like Barsi, Pandharpur, Miraj and Solapur. Cholera and dysentery are major diseases of Pandharpur city.

Deaths due to dysentery, cholera, malaria and measles are of less magnitude in the cities like Baramati and Islampur.

Malaria, the only disease has been eradicated completely throughout the cities of Pune division. The unsafe and contaminated water is mainly responsible for the spread of waterborne diseases

in the cities.

The medical facilities in the division at present are indeficit and the existing services are not properly distributed. Major facilities are concentrated in cities. The heavy concentration of medical facilities is observed in the big cities and they possess more than their reasonable share. The pune is the only district which has better served by medical facilities as they are insurplus. While Ahmednagar, Kolhapur, Sangli, Satara and Solapur districts are getting less medical facilities than their fair share.

In general, good medical facilities are available only at district headquarters or in few major cities of every district. There is a need of diversification of medical services or at least the new services should be established in the mofussil areas instead of concentrating them in the cities where they are already oversaturated.

primary Health Centres (PHCs) are not sufficient and good enough to serve the demands of villagers. Waterborne diseases are found in the epidemic form in the villages. It is absolutely necessary to pay more attention towards the health of villagers. Majority of villagers need to rush to adjoining cities for simple treatment. The diseases like dysentery and diarrhoea are found their epidemic form in the villages of Pune division. Villagers are poorly served by medical facilities.

In the rural areas of Pune division, the PHCs are unevenly distributed. The patients visiting the PHCs are from low economic group and hence they are more dependant on free treatment available at PHC. For this, they walk even upto 20 kms to reach the health centres. During rainy season, the morbidity rates are high due to cough, cold and digestive disorders. The children below 15 years of age are suffering from different deficiency diseases. Poor sanitation, unsafe drinking water and poor nutrition are the major health problems of the people of this division.

For improving the health status of people of Pune division, the following measures may be implemented.

- (1) Supply of safe and unpolluted drinking water to all people of the division.
- (2) Health planning may be arranged on the basis of population distribution and as per their needs and demands.
- (3) The rural-urban migration may be checked at its minimum level.
- (4) The attention be given towards providing good sanitation facilities in every village and town.
- (5) PHCs may be well equipped and be located in such a way so as to be benefited by majority of rural population.

(6) Hospitals and health centres may be located at central places and there should be a proper linkage between the lower order centres and upper order centres providing integrated health care system.

The aforesaid suggestions may try to solve some of the existing problems of health standards of Pune division.