

颜士勇,刘弘,陈毅琼,征柏,徐惠珠,高围激,王李伟.上海市静安区食源性腹泻病的发生状况及对策分析[J].中国食品卫生杂志,2010,22(3):277-280.

## 上海市静安区食源性腹泻病的发生状况及对策分析

### Occurrence of Food-Borne Diarrhea in Jing'an District of Shanghai and Analysis on Countermeasures

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中文摘要:

目的 全面了解静安区食源性腹泻病发生状况, 为建立食源性疾病监测网络提供基础资料, 以便提出相应的对策措施。方法 整群抽样的方法选择静安区常住居民201人, 入户调查, 询问基本情况、食品卫生知识和行为、食源性腹泻病、食品卫生状况评价及需要。用Epidata建数据库, 用SAS进行统计分析。结果 静安区居民腹泻年患病率为25.87%, 两周患病率为4.98%; 食源性腹泻年患病率为5.97%, 食源性腹泻两周患病率1.49%。性别、年龄、职业、文化程度、婚姻状况、健康状况对患病率的影响没有显著性。但不同经济收入的调查对象腹泻年患病率差异有显著性 ( $P < 0.01$ ), 其中收入较高者腹泻年发生率有高发倾向。食品加工用具是否生熟分开对腹泻年患病率的影响有显著性 ( $P < 0.05$ ), 刀具不专用患病的危险是专用的6.41倍, 砧板不专用患病的危险是专用的5.23倍; 异味或变质食品处理方式对腹泻两周患病的影响有显著性 ( $P < 0.05$ ), 加工后再吃患病危险是不吃的10.50倍; 家庭冰箱使用状况对食源性腹泻的年患病的影响有显著性 ( $P < 0.05$ ), 不使用冰箱患病危险是使用冰箱的5.03倍; 未发现其他生活方式对患病的影响。结论 食源性腹泻病有发生, 居民要加强厨房卫生意识和养成良好的个人卫生习惯, 要大力宣传食品卫生知识。

Abstract:

Objective To survey the status quo of food-borne diarrhea in Jing'an district and to provide basic information for food-borne disease surveillance network, so as to put forward the corresponding countermeasures. Method Conducting a household survey on 201 residents selected by cluster sampling method. The subjects were investigated by questionnaires on the general conditions, their knowledge and behavior on food safety, the incidence of foodborne diarrhea, and the evaluation and needs on food hygiene and safety. The database was built with Epidata and analyzed with statistic software SAS. Results The prevalence rate of diarrhea in the year was 25.87% and the rate of diarrhea in two weeks was 4.98% and the prevalence rate of foodborne diarrhea in the year was 5.97% and the rate of foodborne diarrhea in two weeks was 1.49%. The prevalence rate of diarrhea was not affected by gender, age, occupation, education, marital status and health status significantly, but the prevalence rate of food-borne disease varied significantly with the income ( $P < 0.01$ ) and the ways of preparing foods ( $P < 0.05$ ). The risks were 6.41 times higher in residents not using knife separately for preparing raw and cooked foods and the risks were 5.23 times higher in residents not using chopping block separately than those using knife and chopping block separately for preparing raw and cooked foods. The prevalence of diarrhea was affected by the manner of disposing bad smelled or deteriorated foods. The risks for eating deteriorated food after cooking again were 10.05 times higher than not eating. The risks for residents without refrigerator at home were 5.03 times higher than those with refrigerator at home. Conclusion A proportionate of foodborne diseases still occurred in Jing'an district. The hygienic awareness in the process of food in kitchen should be strengthened; and personal hygiene and good dietary habit should be developed. The knowledge on food safety should be promoted widely.

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参考文献(共4条):

- [1] WHO,INFOSAN,FAO Prevention of foodborne disease:the five keys to safer food 2006
- [2] MEAD P S,SLUTSKER L,DIETZ V,Food-related illness and death in the United States,EMERGING INFECTIOUS DISEASES,1999(6).
- [3] JONES T F,SCALLAN I E,ANGULO F J,FoodNet:Overview of a decade of achievement,Foedbome Pathogen Dis,2007(1).
- [4] 刘秀梅,陈艳,樊永祥,王茂起.2003年中国食源性疾病暴发的监测资料分析[J].-卫生研究2006(2)

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- [1] 关淳,张靖,李旭.一起食源性腹泻的报告[J].口岸卫生控制,1999,4(2):17-18.
- [2] 谢新宝,朱启镛.食源性腹泻[J].中国实用儿科杂志,2003,18(1):3-4.
- [3] 张清胜.一起食源性腹泻暴发的调查报告[J].医学动物防制,2003,19(8):499-499.
- [4] 张静.伊川县引起食源性腹泻的病原菌调查[J].基层医学论坛,2014(32):4388-4389.
- [5] 赵黎芳,刘丽军,谈逸云.上海市闵行区食源性腹泻现状调查[J].中国初级卫生保健,2011,25(1):68-69.
- [6] 孙香云,刘学双,高悦.秦皇岛市北戴河区引起食源性腹泻的病原菌[J].职业与健康,2013,29(18).
- [7] 陈聿华,王向东,顾峥奕,丁蕾,徐文燕.上海市闸北区食源性腹泻发生情况调查分析[J].中国初级卫生保健,2013,27(9):95-96.
- [8] 何霭娜,马立芳,徐洁,周伟民.上海市黄浦区居民食源性腹泻病况调查[J].中国初级卫生保健,2011,25(8):90-92.
- [9] 李香亭,陈道薄,俞爱青.2008年上海市虹口区居民食源性腹泻发生现状分析[J].环境与职业医学,2010(11):690-692.
- [10] 于振喜,李红卫,高铁夫,于海川.某市由大型聚餐致食源性腹泻危险因素对比分析[J].中国公共卫生管理,2001,17(4):315-317.
- [11] 邢扬,白光大,刘璐,翟前前,张迪,寇泊洋,翁焱君,杨成程,白冰,孙平辉.吉林省2012—2013年食源性腹泻患病情况及影响因素分析[J].中国公共卫生,2015(4):488-490.
- [12] 胡菊妹,薛涛,董旭,沈志昊,纪蕾,张颖,温晓红.湖州市食源性腹泻病例中诺如病毒感染现状与特征[J].浙江预防医学,2014(12):1226-1228.
- [13] 武虹,李凯峰,王涤非.集体就餐致食源性腹泻危险因素分析及干预效果评价[J].中国公共卫生管理,2005,21(4):344-347.
- [14] 李源源,方奋,贾占昀,杨晓文,樊娟娟.食源性腹泻儿童肠道菌群的变化研究[J].食品安全质量检测学报,2016,7(6):2273-2276.
- [15] 张耘,王美珍.一起由弧菌引起的食源性腹泻病况调查[J].上海预防医学,2007,19(2):59-60.
- [16] 石林.食源性寄生虫[J].防灾博览,2006(5):43.
- [17] 江波.关注食源性疾病[J].家庭医学,2007(17):6-7.
- [18] 凡一丁,樊秀丽.肝源性腹泻26例分析[J].中国民政医学杂志,2009(12):1342-1342.
- [19] 凡一丁,樊秀丽.肝源性腹泻26例分析[J].中国民康医学,2009,21(12):1342-1342.
- [20] 葛丽敏,王光旭.食源性布鲁氏菌病[J].中国地方病防治杂志,2007,22(3):227-228.

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