

Spectrum of Communicable Diseases at the Mea Culpa Shelter for the Homeless in Bratislava – 15 year follow up

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Original Article

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Abstract:

This study covering 2002 – 2017, presents an overview of communicable and non-communicable diseases in a model of a high threshold shelter for the homeless; providing screening for about 50,000 homeless population. Clients were seeking humanitarian assistance, from 1 to 64 nights, with a Doctor available twice weekly. No infectious disease outbreak of diarrhea, hepatitis, HIV, TB was recorded, except the seasonal flu-like diseases January to March every year.

Conflict of interest:

The authors whose names are listed in the title of the article certify that they have NO affiliations with or involvement in any organization or entity with any financial interest (such as honoraria; educational grants; participation in speakers' bureaus; membership, employment, consultancies, or other equity interest), or non-financial interest (such as personal or professional relationships, affiliations, knowledge or beliefs) in the subject matter or materials discussed in this manuscript.

Introduction

Healthcare for a marginalized population in the former Post-socialistic CEE (V4) countries is delayed compared to other EU countries. Shelter for the homeless provides healthcare and screening for important communicable diseases common to the homeless such as hepatitis, HIV, TB and ecto-parasites (1-5). Celebrating its 15th Anniversary, the University Mea Culpa Shelter provides basic healthcare and screening for TB and other major respiratory diseases. (6-8) A doctor is present twice weekly to do basic public health surveillance. The aim of this study is to compare the spectrum of ID and inform about potentially possible outbreaks within the 15 years of existence of this second oldest shelter in Bratislava.

Patients and Methods

Located about 15 minutes from the city center, the capacity of the Mea Culpa Shelter

is 42 beds. It is the second oldest and currently largest shelter. The oldest shelter, Resoty, has 21 beds since 1991. Within the last 15 years, Mea Culpa has offered 73,630 (4) days of 12 month 24 hour accommodation and food for 6,226 clients. A part of Mea Culpa, is the St. Luise de Marillac Hospital for Homeless. For last 12 years, St. Vincent, a low-level shelter, has been provided by the Lazarist Vincentine Order.

Results and Discussion

In 2010-2011 a physician was available on request, but this was insufficient to cover every need for medical attention. Currently, a GP is present twice weekly for clinic and is also available by telephone for acute cases. The spectrum of IP diagnoses shows in about 50% of all consultations within last 15 years included mainly upper respiratory tract infections (upper RTI) 72.5%; lower RTI 12.4%; skin and soft tissues infections (SSTI) 15%.

Similar etiology has been described for shelters in the EU (9-12). No outbreak of any ID within 15 years was noted, neither diarrhea nor ecto-parasites or SSTI. However, periodic outbreaks of upper RTI (influenza-like diseases) are present every year despite pressure to vaccinate clients against the flu.

Conclusions

Most common communicable and non-communicable diseases are in correlation with most EU countries. The Mea Culpa Shelter model providing medical care is a good option for socially excluded populations, especially the homeless.

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