

HEALTH INDICATORS

2004

List of acronyms

AR Arkhangai ВО Bayan-Olgii BKH Bayankhongor BU Bulgan GΑ Gobi-Altai GS Gobisumber DG Dornogobi DO Dornod DU Dundgobi ZΑ Zavkhan OR Orkhon UV Uvurkhangai UM Umnugobi Sukhbaatar SU Selenge SE TU Tuv UVS Uvs KHO Khovd

Aimag Aimag average
UB Ulaanbaatar
Country Country average

KHU

KHE

NSO National Statistics Office

Khuvsgul

Khentii

MDG Millennium Development Goals STI Sexually transmitted infection HIV Human Immunodeficiency Virus

AIDS Acquired Immunodeficiency Syndrome
DOTS Directly observed treatment short-course

NTBP National TB Sub-program RH Reproductive health

IMCI Integrated Management of Childhood Illness

Preface

It is already a well-established tradition to make available to the readers a yearbook with main health indicators essential for policy and decision-making. The indicators are estimated based on routine health statistical reports and in accordance with international methodology.

The yearbook is published in both Mongolian and English since 2001, and this has increased its use by international partner agencies and consultants.

In 2004 the main health indicators have been estimated according to different levels of health care for the first time. Furthermore, the inclusion of the Millennium Development Goals and national health program indicators has contributed to the novelty of the current publication.

It is clearly demonstrated in the publication that one of the main health indicators, namely maternal mortality has reached its lowest level in the past twenty years as a result of successful implementation of Maternal Mortality Reduction Strategy for 2001-2004. Moreover, effective measures to improve the health of the population have contributed to a steady decline of infant and under-five mortality in the last decade.

I hope that this publication will be of assistance to health policy and decision-makers at all leves as well as other information users in making sound evidence-based decisions, and I believe that readers will provide their comments and suggestions for the further improvement of the publication.

We would like to express our gratitude to the WHO, which provided the financial support to make this book available to public.

VICE-MINISTER OF HEALTH

Sh. ENKHBAT

1.3 Population Pyramid

Currently, young people constitute the largest cohort in Mongolia. Comparison of 1992 and 2004 population pyramids clearly demonstrates changes in population structure due to the birth rate decline.

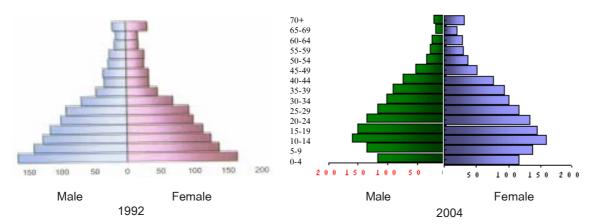


Figure 1.3 Population pyramid, 1992 and 2004

1.4 Birth, Death and Population Growth Rates

The population of Mongolia doubled between 1918 and 1969. The same doubling was observed in two decades between 1969 and 1989. However, mid-1980s marked the beginning of a steady decrease in birth rate, and the decline has further accelerated since 1990. Birth rate decrease is the main factor determining the declaration of the population growth. Between 1990 and 2004, the birth rate fell from 35.3 to 17.7 per 1,000 population.

Crude and age-adjusted birth rates, as well as general and total fertility rates from 1998 and 2003 Reproductive Health Surveys are compared in Table 1.1. In 1998, the age-specific birth rate was highest among adults aged 20-24, and the rate for adolescent 15-19 year-olds had a tendency to decrease in urban settings while increasing in rural areas. However, age-specific birth rates declined in all age groups in 2003 compared to 1998.¹

Table 1.1 Age-specific birth rates by the place of residency
RH Survey 1998 and 2003

	Place of residency		Place of residency RH Sur		RH Survey-2003	RH Survey-1998
Indicator	Urban	Rural	Total	Total		
Age groups						
15-19	33	81	53	54		
20-24	149	197	173	216		
25-29	124	155	140	169		
30-34	73	92	82	105		
35-39	41	45	43	50		
40-44	7	8	7	18		
45-49	1	0	1	0		
Birth rates						
TFR	2.14	2.89	2.5	3.06		
GFR	72	104	87	113		
CBR	18.9	26.7	22.6	28.5		

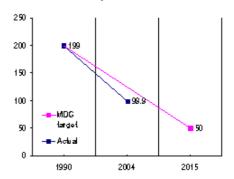
Source: RH Survey 2003, NSO **Index:** TFR - Total fertility rate

GFR - General fertility rate
CBR - Crude birth rate

Target 7
Provide essential reproductive health services to all reproductive age individuals, and reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio

Indicator	1990	2000	2004	2015
Matemal mortality ratio per 100,000 live births	199 (1992)	158.5	98.8	50
Proportion of births attended by skilled health personnel	-	-	99.5	99.8

Figure 2.2 Maternal mortality ratio per 100,000 live births



Current State

Mongolia was classified as a country with the high maternal mortality between 1990-2000. In 2000, the maternal mortality ratio decreased to 124 per 100,000 live births, and in 2003, reached its lowest level in the last decade (109.5 per 100,000 live births). 2004 was a year when the maternal mortality ratio dropped to a two-digit level for the first time.

According to the official heath statistics, the contraceptive prevalence rate among reproductive age women was 49.1 percent in 2000, and increased to 51.3 percent in 2004.

Enabling Environment

Maternal mortality reduction is one of the main themes of the State Policy on Population Development (2004), Maternal Mortality Reduction Strategy (2000) approved by the Government of Mongolia, National Reproductive Health Program as well as other national programs.

The State Public Health Policy (2001) approved by the Parliament puts a special emphasis on improving reproductive health services for the vulnerable and those living in remote areas.³

Target 8
Have halted by 2015, and begun to reverse, the spread of HIV/AIDS and STIs

Indicator	1990	2000	2004	2015
HIV prevalence among 15-24 year old pregnant women	0	0	0	0
Contraceptive prevalence rate	-	49.1	51.3	-
Number of children orphaned by HIV/AIDS	-	-	-	-

CHAPTER III

MATERAL AND CHILD HEALTH

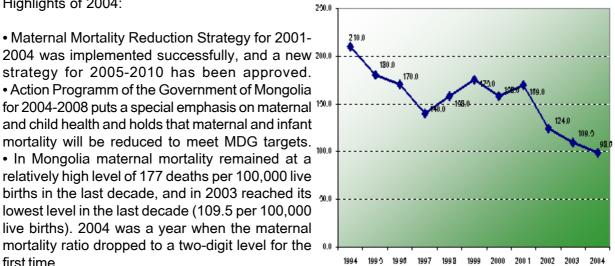
3.1 Maternal Health

Highlights of 2004:

 Maternal Mortality Reduction Strategy for 2001-2004 was implemented successfully, and a new 200.0

- Action Programm of the Government of Mongolia for 2004-2008 puts a special emphasis on maternal 190.0 and child health and holds that maternal and infant mortality will be reduced to meet MDG targets.
- In Mongolia maternal mortality remained at a relatively high level of 177 deaths per 100,000 live births in the last decade, and in 2003 reached its lowest level in the last decade (109.5 per 100,000 live births). 2004 was a year when the maternal mortality ratio dropped to a two-digit level for the first time.

Figure 3.1 Maternal mortality per 100,000 population /1994-2004/



3.1.1 Antenatal Care

Antenatal care includes the following services:

- Early detection of pregnancy and at least 6 times of antenatal check-ups;
- General blood and STI testing of pregnant women:
- Prevention, early detection and timely treatment of pregnancy and birth complications;
- Provision of vitamins and mineral supplements to pregnant women;
- Improvement of maternity rest home services;

Early and continuous antenatal care is important in timely diagnosis and treatment of associated diseases, and thus, in the reduction of pregnancy and birth related complications.

In 2004, early antenatal care coverage was 77.6 percent of all pregnant women. Specifically, 67.4 percent of mothers gaving birth in urban settings and 83.1 percent of those in rural areas received early antenatal care. Comparatively low coverage in Ulaanbaatar is related to the increased population migration.

Of all pregnant women receiving antenatal care, 81.4 percent underwent the general blood testing and 14.4 percent of them were anemic, which is less than in 2003 by 6.2.

should receive antenatal check-ups at least six times, and this indicator was included in the minimum set of health indicators in 2003. The indicator was 79.7 percent in 2004. It was lower than the country average in Arkhangai, Bayankhongor, Khentii, Bayan-Olgii, Selenge, Umnugobi and Uvurkhangai aimags. Percentage of pregnant women not receiving antenatal care was 1.2 in the same year.

3.1.2 Intranatal Care

In 2004, the number of women who gave birth totalled 44 591. Compared to 2003, the birth rate increased in Bayankongor, Dornogobi, Dornod, Orkhon, Uvurkhangai and Umnugobi aimags and Ulaanbaatar city, and decreased in the remaining aimags.

About 36.9 percent of women gave births in Ulaanbaatar city, 39.7 percent - in aimag hospitals, 25.1 percent - in soum and inter-soum hospitals, and the remaining 0.8 percent were home deliveries. Compared to 2000, there were 1.3 times fewer home deliveries in 2004. There were 34 and 110 cases of deliveries not attended by trained health personnel in urban and rural areas, respectively. This is 1.2 times less than in 2000.

Table 3.1 Number of births by type of health facility, 2004

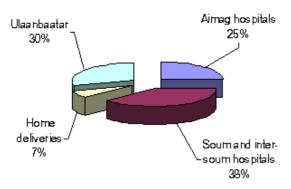
Aimag, city	Total number of births	Number of births in aimag hospitals	Of them, soum residents (percent)	Number of births in soum hospitals	Number of home deliveries	Number of births at bagh feldsher posts	Number of births in private hospitals
Arkhangai	1546	716	54.3	824	6	0	0
Bayan-Olgii	2768	1271	48.8	1495	2	0	0
Bayankhongor	1592	953	54.8	626	5	0	8
Bulgan	691	401	79.8	282	5	3 7	0
Gobi-Altai	1138	497	43.7	624	10	7	0
Gobisumber	234	232	7.3	2	2	0	0
Darkhan-Uul	1383	1276	5.7	87	21	0	0
Dornogobi	907	616	48.4	285	6	0	0
Dornod	1403	1225	37.1	172	2	0	0
Dundgo bi	816	511	57.5	302	3	0	0
Zavkhan	1316	715	36.6	601	0	0	0
Orkhon	1318	1280	2	25	13	0	0
Uvurkhangai	2170	1325	59.8	819	6	3	17
Umnugobi	933	636	63.1	293	4	0	0
Sukhbaatar	935	585	67.4	346	4	0	0
Selenge	1263	835	38.4	418	10	0	0
Tuv	736	351	30.5	385	0	0	0
Uvs	1828	809	40.8	980	5	34	0
Khovd	1926	1009	44	899	18	0	0
Khuvsgul	2201	1085	45.2	1110	1	5	0
Khentii	1190	584	50.2	593	11	3	0
Aimag average	28294	16912	41.8	11168	134	55	25
Ulaanbaatar	16297	799	10	14	210	0	197
Country average	44591	17711	40.3	11182	344	55	222

3.1.4 Maternal Mortality

Mongolia continues to be classified as a country with high maternal mortality. However, maternal mortality reduction measures of the last few years have been very effective, and MMR fell to 98.8 per 100,000 live births in 2004.

In 2004, no maternal mortality cases were reported in Gobi-Altai, Gobisumber, Dornogobi, Dornod, Zavkhan, Orkhon, Uvs and Umnugobi aimags. Of 44 maternal mortality cases in the same year, 27.3 percent were among these aged 35 years of age and 72.7 percent among women aged 20-34. More than two-thirds of maternal mortality cases were from the rural areas.

Figure 3.4 Maternal mortality by levels of health care



Complications of Pregnancy, delivery and puerperium, and extragenital diseases were responsible for 22.7, 25, 6.8 and 45.5 percent of maternal mortality, respectively. It is also worth of noting that 38.6 percent of cases were among herders and 45.5 percent - housewives.

3.1.5 Abortion

It is quite alarming, that despite incomplete reporting of the abortion, its rate does not show signs of decline. According to 2003 RH Survey, abortion rates were 214 per 1,000 live births and 0.7 per reproductive age woman in five years preceding the survey. Health statistics for 2004 demonstrate abortion rates of 200 per 1,000 live births and 12 per 1,000 women reproductive age women. Abortions in the first trimester account for 93.8 percent of all abortions.

Age breakdown reveals that 7.6 percent of all abortions are among women aged below 20, 65.6 percent among those aged in 20-34 year-olds, and 26.7 percent among women aged above 35.

3.1.6 Contraceptive Prevalence Rate

Knowledge about and use of contraceptives is increasing in Mongolia, which improves opportunities for exerting control over birth spacing and the number of children a woman or couple would like to have, and contributes to the reduction of illegal abortions. RH Surveys have demonstrated an increase in contraceptive prevalence rate from 33 percent in 1998 to 45 percent in 2003. According to the official health statistics the rate increased from 41.9 percent in 2001 to 51.5 percent in 2004, which could be an indication of improvements in quality and availability of RH services in Mongolia.

Health Indicators, 2004

Perinatal pathologies, diseases of the respiratory system and congenital malformations were the leading causes of infant mortality in 2004, and were responsible for 46.5, 27.1 and 8.9 percent of infant deaths, respectively. In previous years diseases of the digestive system were the third leading cause of infant mortality; however, they moved to the fourth position in 2004. This was the result of successful implementation of IMCI, and National Program on Childhood Respiratory and Diarrheal Diseases. According to the place of residency the leading cause of under-five mortality was perinatal pathologies in urban settings and diseases of the respiratory system in rural areas.

There is a national target to reduce under-five mortality to 37 per 1,000 live births by 2005. However, the indicator already reached 29.1 per 1,000 live births in 2004. The leading causes of under-five mortality were perinatal pathologies (36.4%), diseases of the respiratory system (29.2%) and injuries and poisoning (9.7%).

There also were differences in leading causes of infant and under-five morbidity in urban and rural areas.

Table 3.4 Infant and under-five morbidity by cause and place of residency, 2004

	0-1 ye	ar-olds	1-4 yea	r-olds
	Urban	Rural	Urban	Rural
Diseases of the respiratory system	49.24	69.98	46.41	67.32
Diseases of the digestive system	13.17	11.37	11.23	12.45
Perinatal pathologies	8.41	1.33		
Injuries and poisoning	3.4	0.9	12.87	2.4
Infectious and parasitic diseases	2.31	0.3	6.63	3.4
Diseases of the ear and mastoid process	2.9	5.93	1.97	2.6

1st leading cause 1st leading c 2nd leading cause 2nd leading 3rd leading cause 3rd leading

There is a preponderance of the diseases of respiratory, digestive and genitourinary systems, injuries and poisoning.

Table 3.5 Five leading morbidity causes of children and adolescents by age group, 2004

	1-4 year-olds	5-9 year-olds	10-14 year-olds	15-19 year-olds
Diseases of the respiratory system	271.5	103.2	94.1	65.9
Diseases of the digestive system	54.3	51.3	60.5	63
Infectious and parasitic diseases	20.3	13.2	8.2	12.42
Diseases of the ear and mastoid process	13.7	10.9	11.9	10.2
Diseases of the genitourinary system	8.9	12.4	23.7	42.9
Injuries and poisoning	26.7	21	25.2	32.1

1st leading cause 2nd leading cause 3rd leading cause

Table 4.2 Selected medical service indicators by the level of care

Indicators	Number	Hospital beds	Number of ad missions	Number of outpatient visits
Primary health care facilities	571	4579	152022	7712980
Soum hospitals	296	3866	129 126	2227062
Inter-soum hospitals	31	713	22896	355071
FGPs	230	-		5130847
Secondary health care facilities	34	4644	136652	3388714
Rural general hospitals	4	282	8588	123563
Aimag general hospitals	18	3089	82202	1614236
District general hospitals	12	1273	45862	1650915
Tertiary health care facilities	20	58 15	166044	1395239
Regional Diagnostic and Treatment Centers	3	1635	55650	333372
General and sapecialized hospitals and centers	17	4180	110394	1061867
Private hospitals	143	1839	58013	
Private clinics	434	-	-	841856
Other hospitals	45	1494	45490	535708
Total	1256	18371	558221	13874497

4.1 Primary Level Medical Services

Soum and Inter-soum Hospital Services

As of 2004 a total of 7,018 health workers including 569 soum and inter-soum hospital physicians, 470 mid-level personnel and 901 bagh feldshers provided health servces to more than 1.5 million rural population. Preventive check-ups comprised 43.4 percent of soum hospital outpatient visits, and the average number of soum hospital visits per rural resident per year was 2.4. A quarter of all hospital beds (i.e. 4,579 beds) were in soum and inter-soum hospitals, a total number of soum and inter-soum hospital admissions was 152,022, and the length of stay was 8.3 days.

FGP Services

Within the framework of Health Sector Development Program FGPs have been established in Ulaanbaatar city and aimag centers. As of 2004, there were 230 FGPs, of which 116 provided services to 915,500 residents of Ulaanbaatar and 114 served 550,900 residents of 21 aimag centers. There was a total of 2,025 health professionals working in FGPs, including 796 physicians, 794 nurses and feldshers, and 435 other health workers.

4.3 Tertiary Level Medical Services

In 2004 there were 17 tertiary hospitals and specialized centers with 1,133 physicians, 1,666 nurses and 560 other mid-level medical personnel. Total number of admissions was 110,400 in the same year. Of them, 36,200 (15%) were referrals from rural areas.

Table 4.5 Selected indicators of the performance of tertiary hospitals

Hospitals	Number of outpatient visits	Average length of stay	Hospital mortality with in 24 hours of admission
1st General Hospital	156934	10.1	18
2nd General Hospital	100892	10.9	21
3rd General Hospital	147470	9.7	12
Maternal and Child Research Center	130736	7.6	12.1
Traumatology and Rehabilitation Hospital	54091	14.3	40
Dermatology Research Center	61711	11.9	-
National Center for Communicable Diseases	120135	17.7	3.8
National Cancer Center	51451	12.8	5.2

According to the pharmacological classification, 197 (16%) registered drugs were anti-bacterial, anti-viral and anti-parasitic drugs, 114 (9.2%) - neurotropic drugs, 108 (8.8%) - cardiovascular drugs, 61 (5%) - digestive drugs and 32 (2.6%) - respiratory drugs (figure 3).

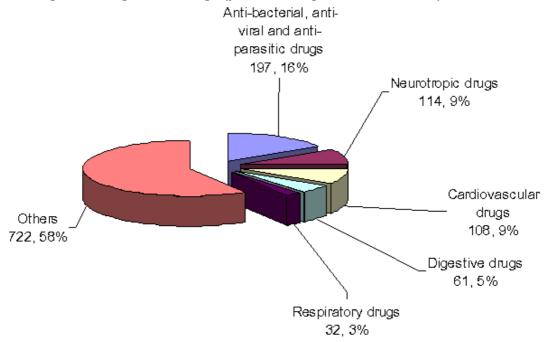


Figure 3. Registered drugs (pharmacological classification)

In the nearest future it is necessary to better link the choice of drugs with the essential drug concept, to improve the knowledge of the general population and health workers on essential and registered drugs, to conduct regularly drugs needs assessment and rational use surveys, and to approve general drug registration policy in addition to the existing drug registration rules.

- The incidence of viral hepatitis B increased in Bulgan, Gobisumber, Darkhan-Uul, Dornod, Orkhon, Uvurkhangai, Umnugobi, Tuv, Uvs and Khentii aimags
- The incidence of viral hepatitis C increased in Darkhan-Uul, Dornod, Dornogobi, Dundgobi and Uvs aimags and Ulaanbaatar city.

The age-specific incidence rates for 2004 demonstrated that viral hepatitis B was the most common in 10-44 year-olds (94.7%) and viral hepatitis A among aged 1-24 year-olds (95.3%). The incidence of viral hepatitis A was 104.2 per 10,000 two year-olds, 129.9 per 10,000 three year-olds, 139.3 per 10,000 four year-olds and 58.6 per 10,000 5-9 year-olds. In contrast, the incidence of viral hepatitis B increased by 1.1-1.8 per 10,000 in 15-24 year-olds compared to the previous year, and reached 8.5 per 10,000 in 15-19 age group and 10 per 10,000 in 20-24 age group. Despite the comparatively low incidence of viral hepatitis B in age groups that received HBV vaccination, it was 11.1% in children under 14.

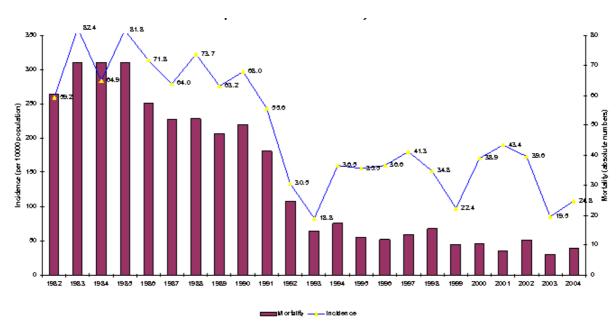


Figure 5.1 Viral hepatitis incidence and mortality trend, 1992-2004

Dysentery

Dysentery constituted 7.1 percent of all reported communicable diseases and 27.9 percent of intestinal infections in 2004. Its incidence increased by 0.9 per 10,000 or 206 cases compared to the previous year. The majority (71.2%) of reported cases were in Ulaanbaatar, and the incidence of the disease in Dornogobi (12.3) and Umnugobi (35.8) aimags and Ulaanbaatar (18.1) was higher than the country average (8.9). Compared to the previous year, the incidence rose by 0.3-30.1 per 10,000 population in Ulaanbaatar city, Gobisumber, Darkhan-Uul, Zavkhan, Umnugobi and Tuv aimags.

In May 2004 there was an outbreak of water-borne dysentery caused by Sh. Flexneri 4a among secondary school dormitory students in Khankhongor soum of Umnugobi aimag. A total of 113 students, 3 school cafeteria staff and 7 household contacts contracted the disease.

- Umnugobi, Sukhbaatar, Selenge, Tuv, Khovd, Khuvsgul and Khentii aimags and Ulaanbaatar.
- The majority of new cases (60.9%) had lung TB, and the remaining 39.1 percent had TB of other organs. Childhood TB accounted for 14.2 percent of cases, which was more than in the previous year by 7.9 percent.
- The majority of new TB cases (68.5%) were young people aged 16-44 years.
- There were 96 cases of TB mortality (i.e. 0.39 per 10,000) in 2004.
- · Laboratory confirmation rate (69.6%) increased by 2.1 percent compared to the previous year
- TB cure rate (83.8%) increased by 0.9 percent compared to the previous year.

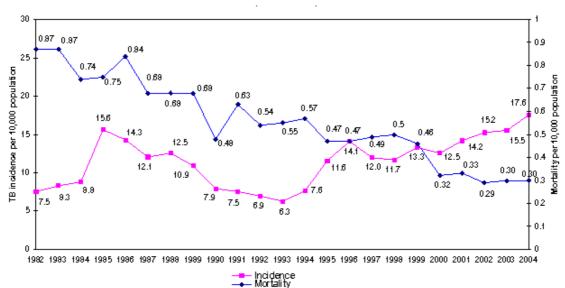


Figure 5.2 TB incidence and mortality trend (1982-2004)

Laboratory confirmation rates were below the country and aimag averages in Darkhan-Uul, Zavkhan, Umnugobi, Sukhbaatar, Khovd and Khentii aimags, and Songinokhairkhan and Bayangol districts.

TB cure rates in Dornogobi aimag and prison hospitals were below the country and aimag averages.

Almag/district name	Imag/district name Laboratory confirmation rate, %	
Arkhangai	71.9	92.9
Bayankhongor	92.3	100
Gobi-Altai	84.6	100
Uvurkhangai	83.9	96.2
Selenge	80	92.2
Jvs	75	94.3
Baganuurdistrict	88	100
Bayanzurkh district	73.5	86.4
Nalaikh district	78.8	95.2
Sukhbaatar district	73.5	85
Khan-Uul district	78.4	86.8

Table 5.1 Aimags and districts meeting the targets of National TB Sub-program in 2004

CHAPTER VI

NON-COMMUNICABLE DISEASES

6.1 Population Morbidity

In recent years the incidence of cardiovascular diseases and injuries is increasing steadily, and they remain as leading causes of population mortality.

The following were the leading causes of population morbidity in 2004:

- Diseases of the respiratory system /959.48 per 10,000/
- Diseases of the digestive system /741.11 per 10,000/
- Diseases of the genitourinary system /684.73 per 10,000/
- Diseases of the circulatory system /504.38 per 10,000/
- Injuries and poisoning /369.69 per 10,000/

When the incidence of five leading causes of population morbidity was compared by the place of residence (urban vs. rural), the overall morbidity was higher in urban settings. However, the incidence of four leading causes of morbidity (except injuries) was higher in rural areas. For instance, the incidence of diseases of the digestive system was 676.7 per 10,000 urban population and 813.6 per 10,000 rural population, the corresponding numbers for diseases of gentourinary system were 496.2 and 780.4, respectively. Similarly, the incidence of diseases of the circulatory system in urban and rural areas was 438.1 and 529.1, correspondingly.

Table 6.1 Population morbidity by the place of residence and regions

Regions	All causes	Diseases of the respiratory system	Diseases of the digestive system	Diseases of the genitourinary system	Diseases of the circulatory system	injuries and poisoning
Setting						
Urban	4688.01	641,42	676,70	496,20	438 ,12	727,27
Rural	4654.4	1006,16	813,59	780,42	529,13	170,98
Region						
Western region	4367.6	902,09	735,77	864,32	499,82	117,17
Khangai-Gobi region	4897.83	1029,53	910,55	880,93	643,22	161,03
Central region	4180.39	943,78	618,56	705,89	523,27	193,42
Eastern region	5171.88	1149,26	989,50	670,54	450,20	212,31

In all regions of the country diseases of the respiratory system were the main cause of the population morbidity. Diseases of the digestive system were more common in the Eastern and Khangai-Gobi regions, diseases of the genitourinary system - in the Western and Khangai-Gobi regions, diseases of the circulatory system - in Khangai-Gobi region, and injuries - in the Eastern region of the country.

Table 6.2 Inpatient morbidity per 10,000 population

Disease classification	Soum population morbidity	Aimag population morbidity	UB population morbidity	Total
Diseases of the genitourinary system	342.32	374.33	317.59	353.81
Diseases of the respiratory system	327.28	351.38	314.67	338.1
Diseases of the digestive system	185.96	282.66	355.41	308.97
Diseases of the circulatory system	229.31	267.16	319.41	286.06
Diseases of the nervous system	58.58	107.17	151.18	123.09
Injuries and poisoning	37.82	67.82	158.09	100.47
Infectious and parasitic diseases	17.33	73.18	143.3	98.54
Diseases of the musculosceletal system and connective tissue	45.73	62.8	84.99	70.82
Diseases of the skin and subcutaneous tissue	42.88	67.94	68.48	68.13
Mental and behavioural disorders	11.56	36.27	76.21	50.72
Neo plasms	9.68	19.38	76.71	40.12
Diseases of the eye and adnexa	2.79	13.51	45.81	25.19
Endocrine, nutritional and metabolic diseases	11.57	15.72	27.9	20.13
Diseases of the ear and mastoid process	12.08	16.76	14.98	16.12
Other	62.16	274.89	352.07	302.81
All causes	1397.06	2030.96	2506.79	2203.07

According to age groups, diseases of the respiratory system were the main cause of hospital admission of 0-19 year-olds, while 20-39 year-olds and those above 40 were mainly hospitalized because of diseases of the genitourinary and circulatory systems, respectively.

Of hospitalized patients with diseases of the genitourinary system, 65.4 percent had nephritis, while 43.2 percent of patients with diseases of the respiratory system suffered from pneumonia, 23.4 percent of those with diseases of the digestive system had liver problems, and 32.3 percent of patients with diseases of the circulatory system suffered from hypertension.

Table 6.3 Leading causes of inpatient morbidity

Disease classification	Leading cause	Percent of total	
Diseases of the genitourinary system	Nephritis	65,41	
Diseases of the respiratory system	Pneumonia	43,24	
Diseases of the digestive system	Liver diseases	23,73	
	Appendicitis	21,43	
	Diseases of gallbladder	15,84	
Diseases of the circulatory system	Hypertensive diseases	32,30	
• •	Ischemic heart disease	25,73	
Diseases of the nervous system	Disorders of neural radices and plexuses	20,50	
	Epilepsy	12,99	

Diseases of the respiratory system (3.3 per 10,000 population)

Gender-specific mortality rates were 750.8 per 100,000 males and 476.1 per 100,000 females. With regards to age, perinatal pathologies and diseases of the respiratory system were the main causes of mortality in 0-4 year-olds, injuries and poisoning - in 5-44 year-olds, and diseases of the circulatory system and neoplasms - in persons above 45.

Cardiovascular disease incidence and mortality was above the country average in the Central and Khangai-Gobi regions.

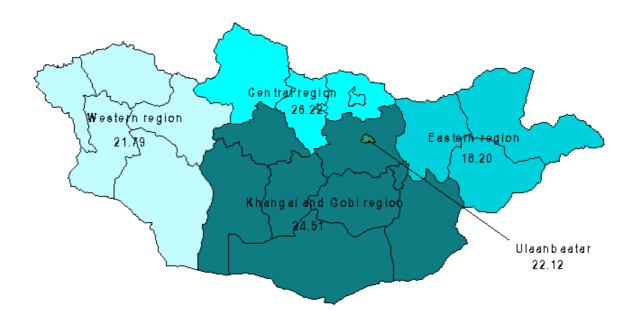


Figure 6.2 Mortality due to diseases of the circulatory system /by regions/

Cancer incidence and mortality has been increasing steadily for the last decade, and remain the second leading cause of population mortality.

Table 6.5 Leading causes of cancer mortality

0	Percent of cancer	Per 10,000	Per 10,000 population	
Cause	mo rta lity	population	Ma le	Female
Livercancer	44,0	4,7	5,6	3,9
Gastric cancer	14,8	1,6	2,1	1,1
Lung cancer	11,7	1,2	2,0	0,5
Cervical cancer	7,2	0,6	-	0,6

NATIONAL PROGRAM ON POPULATION HEALTH EDUCATION

Indicator	Details
Approved by the Government Resolution	Resolution # 5 of 1998
Duration	1998-2005
Main objective	To foster "health promoting" environment, which encourages healthy lifestyle

Nº	Indicators	2003	2004
1	Deliveries among adolescent girls aged 15-19 as percent of all deliveries	6.2	7.4
2	Contraceptive prevalence rate	52.7	51.3
3	Proportion of households consuming iodized salt	60.5	76
4	Syphilis incidence per 10,000 pregnant women	0.4	1.1
5	Incidence of hepatitis A per 10,000 population	19.8	21
6	Incidence of dysentery per 10,000 population	8.3	8.9
7	Incidence of injuries per 10,000 population	335.9	369.7
8	Proportion of overweight individuals		**
9	Number of injections per person per year		**
10	Proportion of cancer patients diagnosed at early (I, II) stages of the disease among hospitalized cancer patients	26.7	16.9
11	Incidence of diseases of the circulatory system per 10,000 population	479.4	504.4
12	Proportion of children under 18 with intact teeth		**
13	Proportion of the elderly undergoing preventive check-up		**

^{**} Special survey needed

NATIONAL ORAL HEALTH PROGRAM

Indicator	Details
Approved by the Government Resolution	Resolution # 66 of 1999
Duration	2000-2005
Main objective	To improve oral health of the population by offering predominantly preventive, readily available and good quality dental health services

Nº	Indicators	1999	2003	2004	Target for 2005
1	Prevalence of dental decay	96%	62.80%	71.60%	86%
2	Dental decay intensity	5.8	1.98	3.1	4.8
	Proportion of children under 18 with intact teeth	62,5%	судалгаа	67.5	72.50%

NATIONAL COMMUNICABLE DISEASE CONTROL PROGRAM

Indicator	Details
Approved by the Government Resolution	Resolution # 129 of 2002
Duration	2002-2010
Main objective	To reduce communicable disease morbidity and mortality through effective mobilization of social resources.

Nº	Indicators	2003	2004
1. Immu	ınization coverage (percent)		
	BCG	98.5	97.7
	Hepatitis B	97.8	98.2
	DPT	97.6	98.9
	Measles	97.6	98.8
	Poliomyelitis	97.6	99.0
2. Incid	ence of vaccine-preventable diseases per 10,000 popular	tion:	
	Generalized TB in 0-15 year-old children	0.28	0.12
	Hepatitis B	3.0	3.1
	Diphtheria	0.004	0.0
	Pertussis	0.004	0.0
	Tetanus	0.0	0.0
	Measles	0.1	0.0
	Poliomyelitis	0.0	0.0
3. Labo	ratory confirmation of lung TB (percent)	67.5	69.6
4. Cure	rate of new smear-positive cases	83.0	83.8
5. Incid	ence of intestinal infections per 10,000 population		
	Typhoid fever	0.0	0.1
	Dysentery	8.3	8.9
	Hepatitis B	16.3	21.0
	Salmonellosis	0.8	0.8
6. Incid	ence of brucellosis per 10,000 population	3.1	2.5
7.Num	ber of cases of bubonic plague	11.0	3.0
8. Incid	lence of STIs per 10,000 population		
	Syphilis	7.0	7.1
	Gonorrhea	17.2	23.0
	Trichomoniasis	23.8	24.8
_ :-	ber of cases of congenital syphilis	31.0	27.0

NATIONAL FITNESS PROGRAM

Indicator	Details	
Approved by the Government Resolution	Resolution # 139 of 2002	
Duration	2002-2008	
Main objective	To reduce morbidity and mortality related to sedentary lifestyle	

Nº	Indicators	2001 (percent)	2003	2004	Target for 2008 (percent)
	Percent of population with proper level of physical development:				
1	pre-school children	51.4		**	60.0
	adolescents	49.9			70.0
	adults	47.4			60.0
2	Percent of people exercising regularly /at least 30 minutes daily/	6,1	7	**	50
3	Number of fitness cabinets and centers	135	140		250
4	Proportion of overweight individuals	31.8	**	**	20
5	Cardiovascular mortality per 10,000 population	21.1	24.4	23.1	14.7

NATIONAL INJURY PREVENTION PROGRAM

Indicator	Details
Approved by the Government Resolution	Resolution # 156 of 2002
Duration	2002-2008
Main objective	To reduce disability and mortality due to injuries

Nº	Indicators	2002	2004	Target for 2008
1	Incidence of injuries per 10,000 population	274.55	369.7	205.9
2	Hospital admissions due to injuries (per 10,000 population)	86.22	91.5	73.3
3	Injury mortality per 10,000 population	76.6	103.4	57

NATIONAL MENTAL HEALTH PROGRAM

Indicator	Details
Approved by the Government Resolution	Resolution # 59 of 2002
Duration	2002-2007
Main objective	To reduce the prevalence of mental health and behavioral disorders by upgrading mental health services in the country to conform to new trends in mental health.

Nº	Indicators	2000	2003	2004	Target for 2007
1	Mental and behavioral disorders (per 10,000 population)	77.43	104.2	113.8	70
2	Existence of integrated mental health database	Non- existent			Will be established
3	Clients receiving primary mental health services as percent of clients of soum hospitals and FGPs	0.13%	0.50%	0.40%	10%
4	Number of schools with mental health program	0	205	205	At least 90 a year
5	Number of enterprises with more than 50 staff, which implement mental health sub-programs or projects	0	597	602	At least 40 a year
6	Ratio of the number of hospital admissions due to mental and behavioral disorders to total morbidity	1.70%	2.23	2.3	1.50%
7	Average length of stay of mental hospital patients	27.5	22.6	21.5	23
8	Percent of FGPs and soum hospitals providing primary mental health services	*	65%	65%	100%
9	Percent of soum and family doctors and health workers trained in primary mental health services	30%	43.60%	*	70%
10	Suicide rate pr 100,000 population	17	13.8	17.5	12

NATIONAL PROGRAM ON DEVELOPMENT OF SPA RESORTS

Indicator	Details
Approved by the Government Resolution	Resolution # 251 of 2002
Duration	2003-2010
Main objective	To promote population health status through rational use of natural treatment factors and expansion of spa resort services

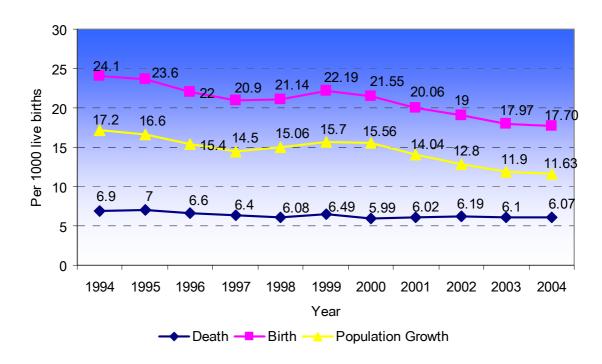
Nº	Indicators	2003	2004	Target
1	Number of national and regional spa resorts	9	9	11
2	Proportion of spa resorts with hygienic passports	6.70%	6.70%	100%
3	Proportion of accredited national spa resorts	0	9	100%
4	Proportion of spa resorts with hygienic demarcation	20%	20%	100%
5	Number of spa resorts where environmental impact assessment has been performed	3	3	11
6	Evaluation of the treatment quality of spa resorts	-	-	Evaluation criteria will be developed and endorsed
7	Assessment of short and long-term outcomes of spa treatment for common diseases	-	Baseline study conducted	
8	Development and approval of the standard on spa resort structure and performance, and treatment and services	-	Approved	
9	Number of accredited sanatoria	0	7	11
10	Number of spa resorts assessed for exploitation	5	5	8
11	Revision of the drinking mineral water standard	-	Standard was revised and approved	Will be revised
12	Number of new scientific studies on spa resorts	3	6	Number of scientific studies will increase

NATIONAL PROGRAM TO IMPROVE HEALTH TECHNOLOGY

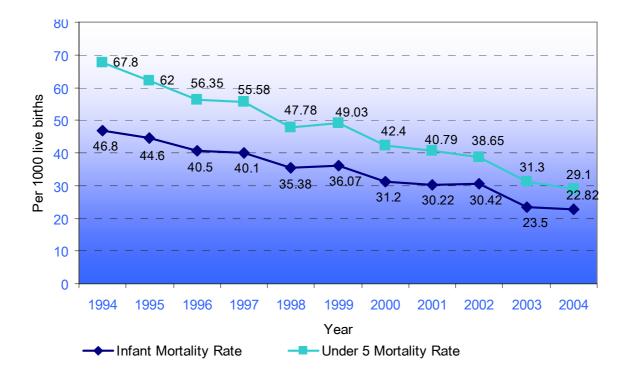
Indicator	Details
Approved by the Government Resolution	Resolution # 264 of 2002
Duration	2003-2008
Main objective	To improve the quality of health services to meet international standards through selective introduction of cost-effective and readily available health promotion, protection, diagnosis, treatment, rehabilitation and information technology

Nº	Indicators	2001	2003	2004	Target for 2008
1	Investments in medical equipment		3%		10%
	Expenses on medical equipment maintenance				3
2	Number of health organizations with LAN	0	1	6	25
3	Number of aimags with distance education, counseling and diagnostic services	0	6	8	10
4	Number of hospitals with EMR	0	1	1	5
5	Proportion of cancer patients diagnosed at stage I Liver cancer Lung cancer Breast cancer Stomach cancer Cervical cancer	14%	7.8 8.5 16.9 7.6 28.4	8.2 6.4 19.2 10 37.9	65%
6	Hospital mortality	30.9	25.4	24.3	27
7	Mortality within 24 hours of hospital admission	20.2	20.7	20.3	16
8	Post-surgical complications	0.39	0.3	0.5	0.25
9	Post-surgical mortality	0.56	0.37	0.3	0.4

Crude birth and Death Rates and Population Growth (1994-2004)

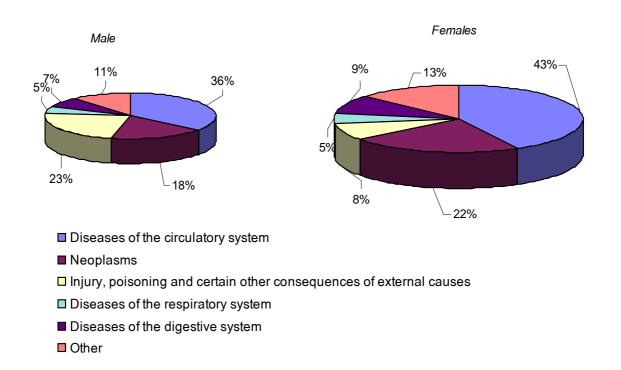


Infant and Under 5 Mortality Rates (1994-2004)

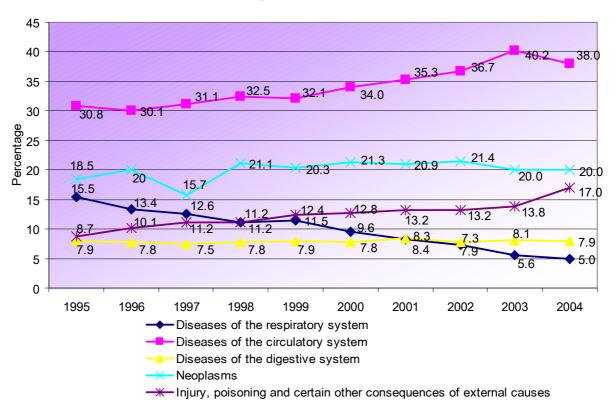


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Main Causes of Death, by Sex, 2004

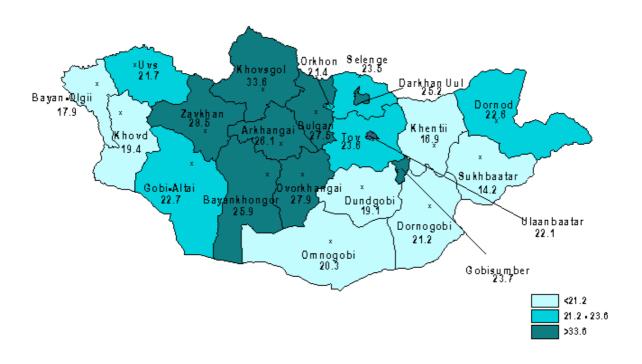


Five Leading Causes Of Death (1994-2004)

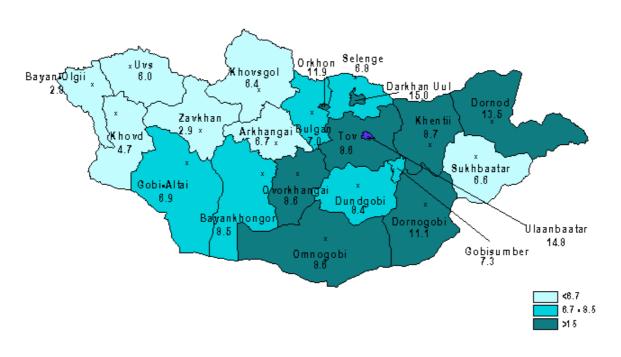


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Deaths of the Circulatory System per 10000 population, 2004



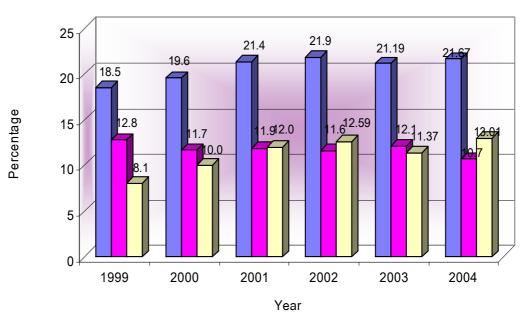
Death Injury-Poisoning and Certain other Consequences of External Causes per 10000 population, 2004



Infant Mortality, 2004

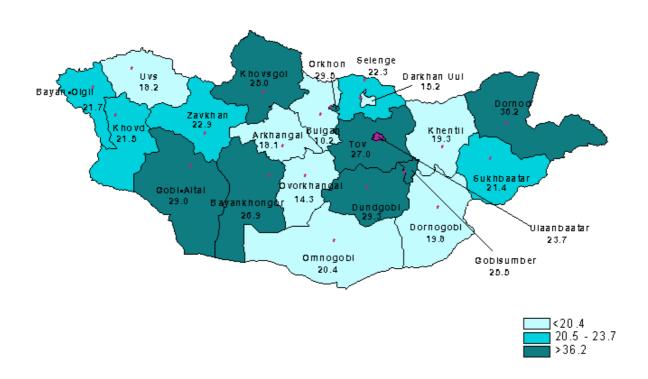
Causes	Rate
Infant mortality per 1000 live births	22.8
Early neonatal mortality per 1000 live births	11.1
Post neonatal mortality per 1000 live births	1.9
Neonatal mortality per 1000 live births	13.01
Still births per 1000 births	10.7
Perinatal mortality per 1000 births	21.67

Infant Mortality (1999-2004)

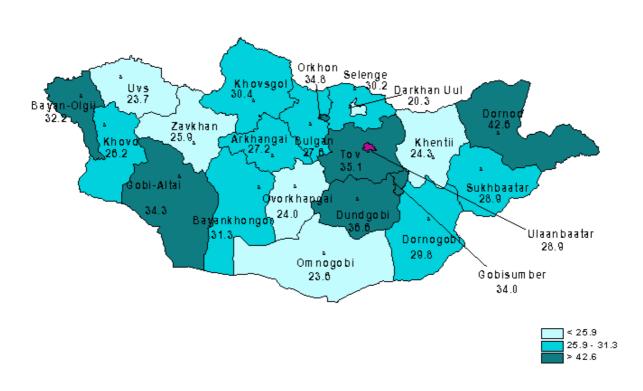


■ Perinatal Mortality per 1000 births ■ Still Births per 1000 births ■ Neonatal Mortality per 1000 live births

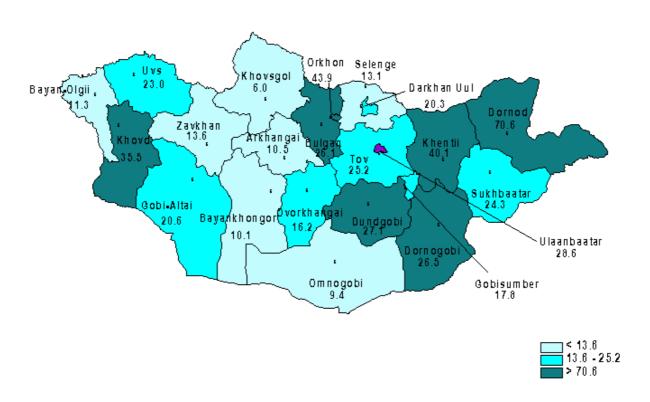
Infant Mortality Rate (per 1000 Live Births), 2004



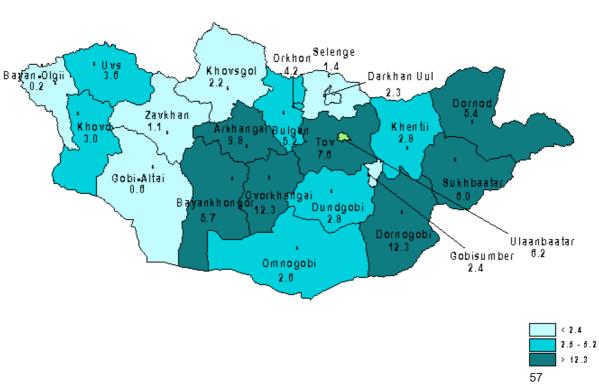
Infant Mortality Rate (per 1000 Live Births), 2004



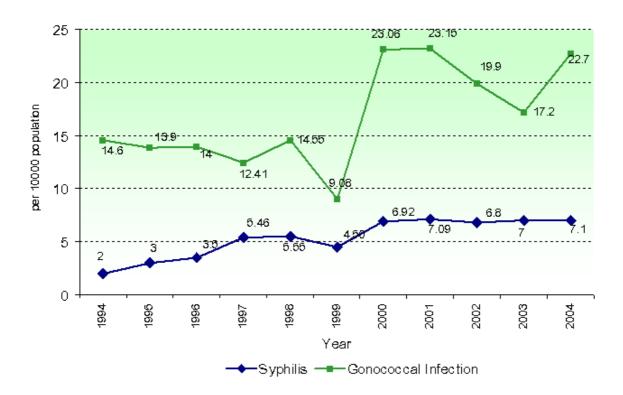
Incidence of Viral Hepatitis, per 10000 population, 2004



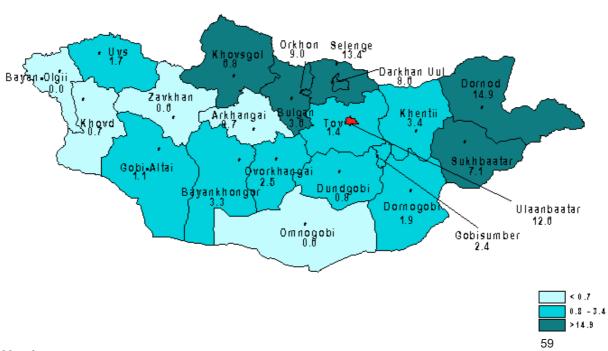
Incidence of Varicella, per 10000 population, 2004



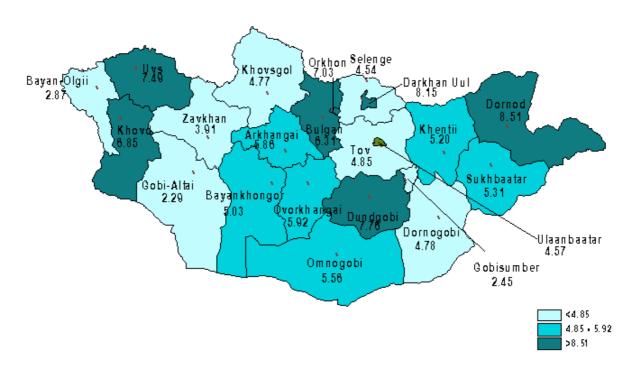
Incidence of Syphilis, per 10000 population, 2004



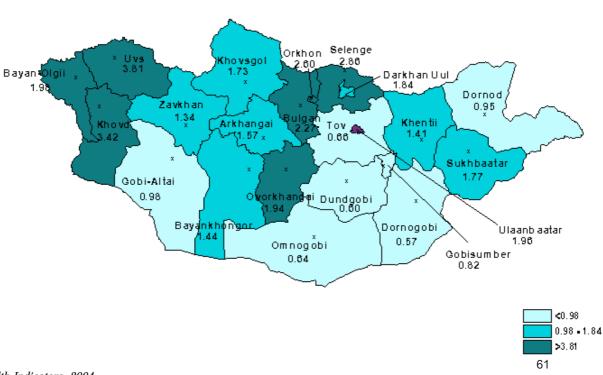
Incidence of Syphilis, per 10000 population, 2004



Incidence of Liver cancer, per 10000 population



Incidence of Stomach cancer, per 10000 population



Prevalence, Incidence and Deaths of Malignant Neoplasms, 2004(by aimag)

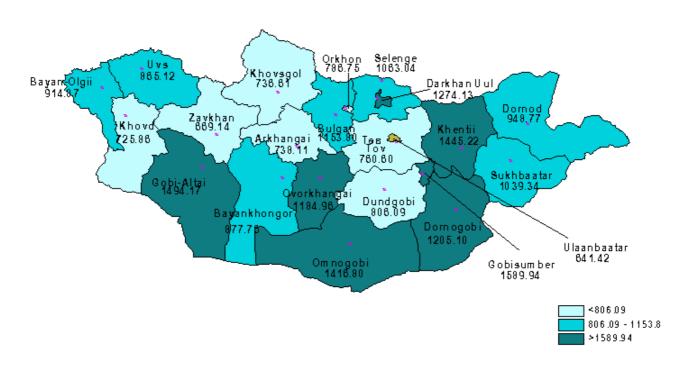
		Preva	alence		Incidence			Deaths	
№	Aimag and city	ıber	dod (per '	10000 popula	ation	per 1	10000 popula	ation
		Abs.number	per 10000 pop	Total	Males	Femals	Total	Males	Femals
1	Arkhangai	404	44.0	11.76	14.50	9.07	12.19	14.06	10.36
2	Bayan-Ulgii	195	19.7	10.59	14.57	6.64	8.17	12.35	4.02
3	Bayankhongor	234	27.8	11.39	14.28	8.61	8.78	11.86	5.81
4	Bulgan	230	40.6	18.16	21.00	15.37	14.11	18.16	10.13
5	Gobi-Altai	113	17.8	7.10	6.50	7.66	10.88	11.05	10.72
6	Gobi-Sumber	22	18.1	9.03	11.66	6.47	6.57	6.67	6.47
7	Darkhan-Uul	397	43.9	17.58	20.72	14.74	10.17	13.04	7.58
8	Dornogobi	201	38.9	14.71	12.72	16.59	11.03	9.94	12.06
9	Dornod	386	52.2	17.71	20.83	14.75	19.07	22.50	15.81
10	Dundgobi	149	29.8	16.60	15.79	17.40	12.80	12.95	12.66
11	Zavkhan	173	21.9	10.11	9.11	11.05	8.97	10.93	7.12
12	Orkhon	335	40.1	16.27	21.39	11.63	12.92	16.11	10.03
13	Uvurkhangai	425	39.2	14.56	15.33	13.82	8.85	10.47	7.27
14	Umnugobi	139	29.1	12.97	12.35	13.56	9.20	8.09	10.27
15	Sukhbaatar	119	22.1	14.28	13.33	15.22	24.10	31.48	16.71
16	Selenge	336	36.7	17.70	20.01	15.42	10.16	11.44	8.90
17	Tuv	322	36.3	13.31	10.18	16.44	8.80	10.63	6.98
18	Uvs	304	37.3	18.01	23.39	12.68	14.58	18.96	10.24
19	Khovd	248	27.0	15.26	18.58	12.03	9.37	11.06	7.73
20	Khuvsgul	288	23.3	11.72	13.02	10.47	8.49	10.22	6.82
21	Khentii	275	41.1	13.74	15.81	11.75	12.25	13.68	10.87
22	Aimag average	5295	33.3	14.04	15.76	12.39	11.25	13.52	9.07
23	Ulaanbaatar	3526	38.5	12.53	12.58	12.48	9.60	10.86	8.42
24	Country average	8821	35.2	13.49		12.42	10.65	12.56	8.83

^{*} Source: National Center for Cancer, 2004 report

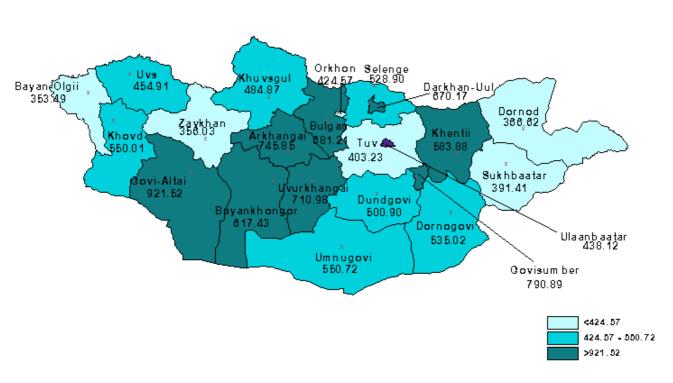
Main 5 Causes of Morbidity, 2004

			per 10000 population	1	
Aimag and city	Diseases of the respiratory system	Diseases of the digestive system	Diseases of the genito- urinary system	Diseases of the circulatory system	Injuiry, poisoning and certain other consequences of external causes
Arkhangai	738.11	910.31	1091.51	745.85	121.43
Bayan-Ulgii	914.87	619.03	650.32	353.49	77.35
Bayankhongor	877.76	884.95	1006.01	617.43	153.52
Bulgan	1153.80	792.08	968.00	681.21	152.94
Gobi-Altai	1494.17	1346.06	1353.42	921.52	162.66
Gobi-Sumber	1589.94	1240.61	1172.05	790.89	195.89
Darkhan-Uul	1274.13	969.22	784.81	670.17	370.43
Dornogobi	1205.10	1070.24	909.37	535.02	241.02
Dornod	948.77	1066.52	468.98	366.62	220.92
Dundgobi	806.09	908.02	774.64	500.90	112.88
Zavkhan	669.14	657.03	739.56	356.03	146.22
Orkhon	786.75	647.79	555.98	424.57	213.20
Uvurkhangai	1184.96	867.47	706.12	710.98	147.83
Umnugobi	1416.80	798.69	656.41	550.72	240.48
Sukhbaatar	1039.34	801.94	695.72	391.41	127.28
Selenge	1063.04	625.96	779.19	528.90	234.09
Tuv	760.60	355.39	597.90	403.23	120.37
Uvs	865.12	641.05	1119.65	454.91	96.38
Khovd	725.86	605.82	648.61	550.01	123.47
Khuvsgul	736.61	450.63	630.25	484.87	95.16
Khentii	1445.22	1058.26	860.36	583.88	270.86
Aimag average	983.05	777.62	791.56	541.93	167.06
Ulaanbaatar	641.42	676.70	496.20	438.12	727.27
Country average	859.48	741.11	684.73	504.38	369.69

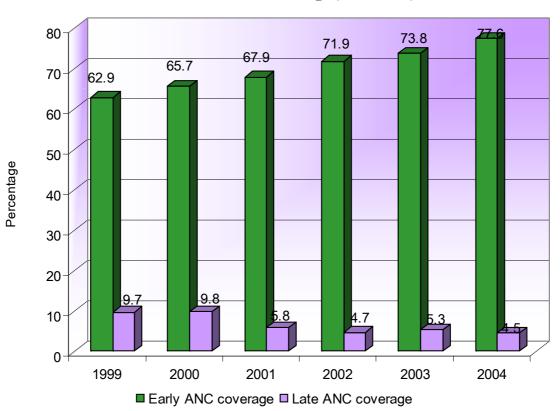
Diseases of the Respiratory System, per 10000 population, 2004



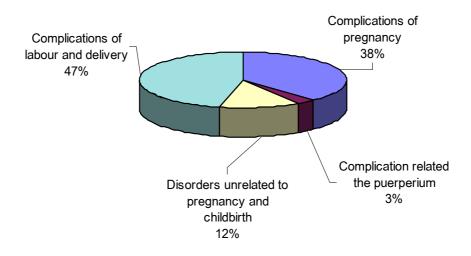
Diseases of the circulatory system, per 10000 population, 2004



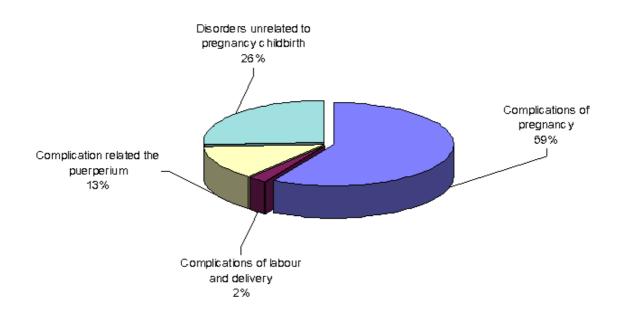
Antenatal Care Coverage (1999-2004)



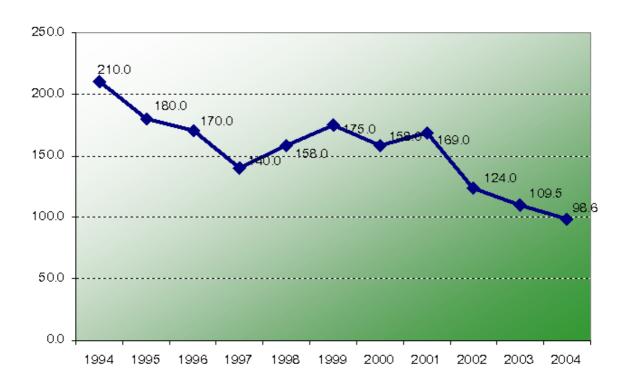
Complications of Pregnancy, Delivery and Puerperium, 2004



Maternal Deaths by Causes, 2004

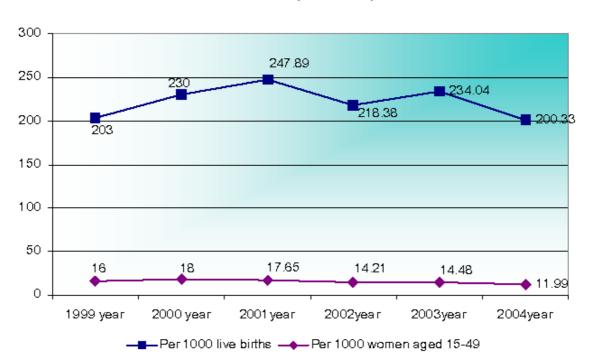


Maternal Mortality Ratio, per 100000 live births (1994-2004)

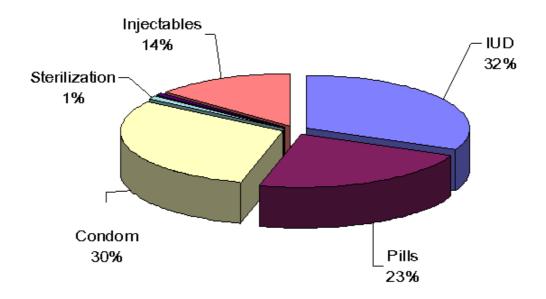


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Abortion (1999-2004)



Contraceptive methods, 2004



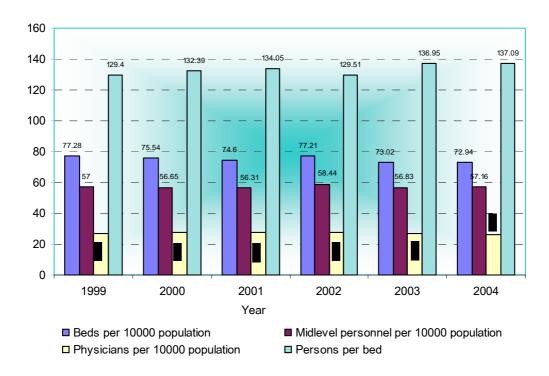
Maternal Care During Delivery or Childbirth (by Aimag),2004

				Delivery b	y percent					
№	Aimag and city	Aimag and city hospital	Private hospital	Rural general hospital	Soum hospital	Feldsher post	At home	Deliveries by nontrained personnel	Percent of deliveries under 20 age	Percent of deliveries avobe 35 age
	A	1	2	3	4	5	6	7	8	9
1	Arkhangai	46.3	0.0	0.0	53.3	0.0	0.4	0.0	7.8	7.9
2	Bayan-Ulgii	45.9	0.0	0.0	54.0	0.0	0.1	0.0	0.9	11.2
3	Bayankhongor	59.9	0.5	0.0	39.3	0.0	0.3	0.0	8.8	7.1
4	Bulgan	58.0	0.0	0.0	40.8	0.4	0.7	0.0	6.8	7.5
5	Gobi-Altai	43.7	0.0	0.0	54.8	0.6	0.9	0.4	6.8	8.5
6	Gobi-Sumber	99.1	0.0	0.0	0.9	0.0	0.0	0.0	7.7	7.7
7	Darkhan-Uul	92.3	0.0	0.0	6.3	0.0	1.4	0.0	8.7	10.1
8	Dornogobi	67.9	0.0	0.0	31.4	0.0	0.7	0.0	11.1	8.7
9	Dornod	87.3	0.0	0.0	12.3	0.0	0.4	0.0	9.1	9.8
10	Dundgobi	62.6	0.0	0.0	37.0	0.0	0.4	0.0	10.0	7.2
11	Zavkhan	39.5	0.0	14.8	45.7	0.0	0.0	0.0	4.9	7.4
12	Orkhon	97.1	0.0	0.0	1.9	0.0	1.0	0.9	7.1	10.5
13	Uvurkhangai	51.8	0.8	9.3	37.7	0.1	0.3	0.0	11.4	7.8
14	Umnugobi	68.2	0.0	0.0	31.4	0.0	0.4	0.1	10.3	16.7
15	Sukhbaatar	62.6	0.0	0.0	37.0	0.0	0.4	0.0	9.5	5.3
16	Selenge	48.4	0.0	17.7	33.1	0.0	0.8	0.1	7.1	11.2
17	Tuv	47.7	0.0	0.0	52.3	0.0	0.0	0.0	7.1	8.4
18	Uvs	44.3	0.0	0.0	53.6	1.9	0.3	0.0	2.6	12.9
19	Khovd	52.4	0.0	0.0	46.7	0.0	0.9	0.0	3.2	11.4
20	Khuvsgul	49.3	0.0	0.0	50.4	0.2	0.0	0.0	10.1	7.5
21	Khentii	49.1	0.0	0.0	49.8	0.3	0.8	0.0	9.7	9.7
22	Aimag average	57.6	0.1	2.2	39.5	0.2	0.5	0.1	7.2	9.5
23	Ulaanbaatar	97.5	1.2	0.0	0.0	0.0	1.3	0.8	7.8	9.6
24	Country average	72.2	0.5	1.4	25.1	0.1	0.8	0.3	7.4	9.5

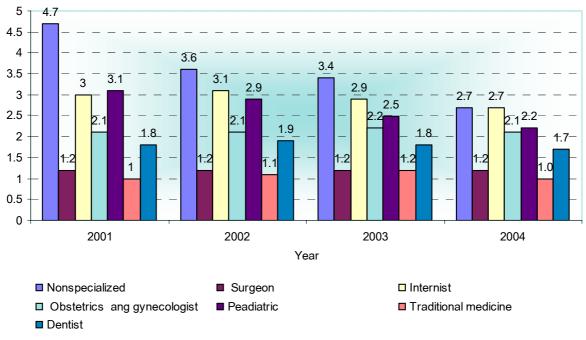
Health Humanforce

					-								1					
Health organitions	<u>•</u> И нйиqөМ	Total physicians	From: female	Pharmacists	Other highlevel personnels	Feldshers	Dental technician	Laboratory technician	X-ray technicion	Midlevel pharmacisi	Nurses	əliwbiM	Sterilisation assistan	Other midlevel personnels	Midlevel personnels(total)	Nurse assistant	Other workers	All workers
	9	1	2	3	4	7		6	10	11	14	15	16			19	20	21
	_	1368	1184	9	44	1462	1	99	7	122	2338	331	23	20	4420	1116	2183	9137
Family hospitals	2	962	759	0	25	71	0	0	0	0	723	2	0	2	798	158	248	2025
Intersoum hospitals	3	108	69	က	4	177	0	18	4	14	200	46	7	9	472	121	260	896
Soum hospitals	4	461	354	3	15	1194	7	48	က	108	1391	278	16	62	3101	823	1647	6050
Physician's post with beds	2	3	2	0	0	4	0	0	0	0	11	3	0	0	18	7	7	35
Feldsher's posts with beds	9	0	0	0	0	16	0	0	0	0	13	2	0	0	31	7	21	29
	7	1600	1281	27	124	364	4	280	69	25	2293	136	87	132	3422	1003	991	7167
Rural general hospitals	8	22	35	-	2	47	-	7	3	3	86	18	2	19	201	99	47	372
Aimag general hospitals	6	882	657	4	71	207	2	198	42	35	1557	86	49	99	2244	739	292	4517
District hospitals	10	663	589	12	51	110	-	75	24	19	638	20	33	22	977	198	377	2278
	11	1332	896	43	209	147	16	198	25	53	2034	26	94	84	2739	939	1083	6345
Regional Treatment and diagnostic centers	12	199	154	4	13	46	2	36	0	11	368	17	16	80	513	94	227	1050
Specialized Centers and hospitals	13	1133	814	39	196	101	41	162	48	42	1666	39	78	92	2226	845	856	5295
	14	93	74	4	10	9	0	5	_	7	66	42	6	4	173	22	126	428
	15	282	213	10	38	104	2	26	7	15	365	7	13	28	267	209	126	1232
Private hospitals with beds	16	380	268	3	32	41	3	12	2	9	376	6	7	33	489	166	237	1307
Private hospitals for outpatients	17	268	459	2	29	20	84	21	4	2	186	16	47	17	397	83	80	1159
Medical universities and collegies	23	347	220	21	118	8	2	4	2	2	20	0	0	13	51	40	140	717
Drug supply companies	25	0	0	146	12	0	0	0	0	225	0	0	3	6	237	18	428	841
	26	0	0	33	0	0	0	0	0	75	0	0	0	0	75	0	424	532
Revolving drug founds	27	0	0	8	0	0	0	0	0	167	2	0	0	2	171	2	20	204
	28	0	-	582	2	2	0	0	0	964	0	0	0	2	968	47	514	2113
Other organizations		620	498	28	237	184	3	85	3	3	202	19	33	154	989	92	630	2296
	30	6590	5166	913	855	2338	115	269	152	1698	7915	616	316	548	14395	3743	6982	33478
	20	naco	qqı.ç	913	ggg	2338	CLL	180	701	QAQI	CIB)	QIQ	3.10	248	14395	3/43		

Health Facilities, 1999-2004



Physicians, by specialities, per 10000 population (2001-2004)



Health Indicators, 2004

Utilization of Hospital Beds, 2004

			Tota	al		Aimag	g, city ger	neral hos	spitals		Soum h	ospitals	
	Aimag and city	Utilization of bed fund	Percentage of bed fund	Average length of stay	Number of patients per bed per year	Utilization of bed fund	Percentage of bed fund	Average length of stay	Number of patients per bed per year	Utilization of bed fund	Percentage of bed fund	Average length of stay	Number of patients per bed per year
Α	Б	4	5	6	7	11	12	13	14	18	19	20	21
1	Arkhangai	294.71	80.74	8.15	36.15	309.70	84.85	9.15	33.86	272.70	74.71	7.23	37.70
2	Bayan-Ulgii	326.00	89.32	8.49	38.42	304.14	83.33	8.41	36.14	340.32	93.24	8.39	40.58
3	Bayankhongor	306.02	83.84	9.05	33.80	291.23	79.79	9.76	29.83	339.92	93.13	8.31	40.92
4	Bulgan	296.53	81.24	9.80	30.27	285.70	78.28	10.53	27.14	298.55	81.79	9.25	32.26
5	Gobi-Altai	273.38	74.90	8.57	31.90	222.36	60.92	9.39	23.68	317.16	86.89	8.28	38.29
6	Gobi-Sumber	297.30	81.45	9.95	29.87	255.24	69.93	10.28	24.83	315.70	86.49	8.45	37.35
7	Darkhan-Uul	293.03	80.28	9.37	31.27	284.21	77.87	9.53	29.82	298.59	81.81	8.32	35.91
8	Dornogobi	270.42	74.09	9.07	29.80	250.31	68.58	8.75	28.62	260.21	71.29	8.67	30.01
9	Dornod	320.43	87.79	10.07	31.83	313.19	85.81	11.29	27.74	337.66	92.51	7.96	42.45
10	Dundgobi	225.98	61.91	8.87	25.47	220.01	60.28	8.82	24.95	229.84	62.97	8.80	26.11
11	Zavkhan	195.50	53.56	8.99	21.74	188.19	51.56	9.65	19.50	185.08	50.71	8.04	23.01
12	Orkhon	317.13	86.88	9.91	32.01	304.80	83.51	9.97	30.56	302.29	82.82	9.00	33.57
13	Uvurkhangai	315.79	86.52	9.06	34.84	300.19	82.24	9.64	31.14	312.81	85.70	8.25	37.94
14	Umnugobi	232.21	63.62	7.30	31.82	242.40	66.41	7.13	34.00	216.03	59.19	7.38	29.25
15	Sukhbaatar	311.83	85.43	10.12	30.83	289.02	79.18	10.82	26.72	329.55	90.29	9.47	34.81
16	Selenge	260.86	71.47	9.75	26.74	261.83	71.73	11.02	23.75	273.96	75.06	9.42	29.08
17	Tuv	245.88	67.36	9.63	25.53	274.55	75.22	11.32	24.26	245.49	67.26	8.86	27.70
18	Uvs	264.95	72.59	9.26	28.62	258.28	70.76	9.15	28.22	275.43	75.46	9.35	29.44
19	Khovd	311.21	85.26	8.85	35.15	353.80	96.93	9.59	36.89	276.99	75.89	8.02	34.56
20	Khuvsgul	285.85	78.32	8.40	34.01	345.00	94.52	9.77	35.32	244.67	67.03	7.52	32.53
21	Khentii	318.30	87.20	9.29	34.26	316.81	86.80	10.30	30.76	321.24	88.01	8.63	37.21
22	Aimag average	282.65	77.44	9.08	31.14	283.55	77.69	9.72	29.18	278.22	76.22	8.39	33.18
23	Ulaanbaatar	310.20	84.99	10.56	29.37	327.34	89.68	11.42	28.66	0.00	0.00	0.00	0.00
24	Country average	294.39	80.65	9.69	30.39	283.55	77.69	9.72	29.18	278.80	76.38	8.40	33.20

10sis,2004

sisongsib

difference in main Percentage of

10.0

Post Operational Complications and Deaths, 2004

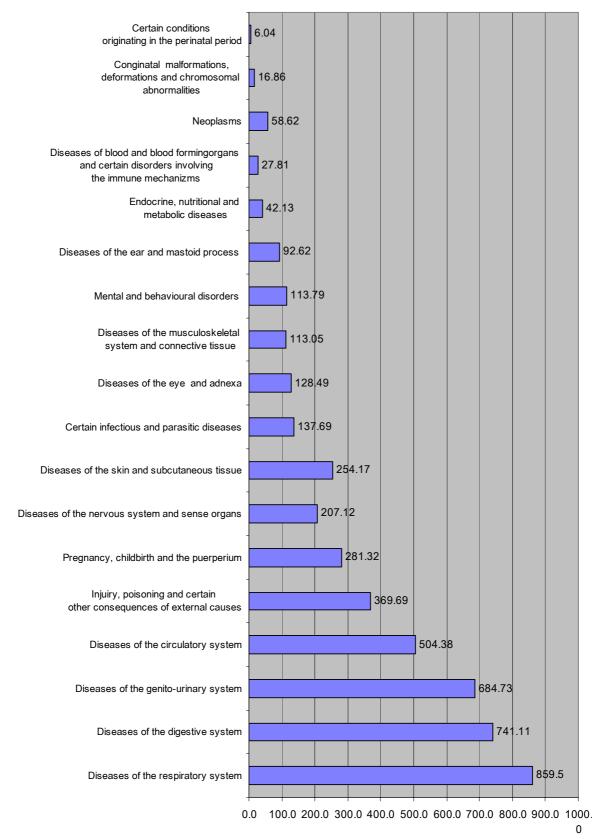
Percentage of deaths	5	90.0	0.39	0.64	0.23	0.21	0.00	0.05	0.22	0.34	0.00	0.08	0.13	0.11	0.00	0.30	0.00	0.00	0.00	0.00	60.0	0.28	0.16	0.42	0.31
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Percentage of	4	90.0	00.00	0.64	0.82	0.56	00.00	0.10	82.0	0.45	1.10	00.00	0.61	0.16	0.26	0.15	00.00	00.00	00.00	0.77	0.53	1.68	0.44	0.49	0.47
Number of operations	1	1738	1774	777	855	1427	128	1971	006	1785	730	1241	2301	1877	1155	663	919	452	1062	1436	1135	1783	26109	34892	61001
Aimag and city	Б	Arkhangai	Bayan-Ulgii	Bayankhongor	Bulgan	Gobi-Altai	Gobi-Sumber	Darkhan-Uul	Dornogobi	Dornod	Dundgobi	Zavkhan	Orkhon	Uvurkhangai	Umnugobi	Sukhbaatar	Selenge	Tuv	Λv_{s}	Khovd	Khuvsgul	Khentii	Aimag average	Ulaanbaatar	Country average
Ž	Α	1	2	3	4	5	9	7	8	6	10	11	12	13	14	15	16	17	18	19	20		22	23	

Pathologic An	Anatomy Difference	ence in Diagno	=
Aimag and city	sdinsob Io.oV	Percentage of saleopsics	
Б	1	3	
khangai	43	93.0	
yan-Ulgii	25	3.5	
yankhongor	52	46.1	
lgan	27	70.3	
bi-Altai	41	41.4	
bi-Sumber	20	0.0	
ırkhan-Uul	68	75.2	
vrnogobi	37	78.3	
ornod	132	67.4	
ındgobi	26	65.3	
vkhan	33	57.5	
khon	127	74.0	
urkhangai	73	8.08	
nnugobi	23	5.69	
khbaatar	23	52.1	
enge	41	58.5	
V	36	58.3	
·s	44	6.06	
ıovd	45	48.5	
nuvsgul	78	96.1	
ıcntii	36	58.3	
mag average	1083	65.2	
aanbaatar	1206	81.8	
untry average	2289	74.0	

Ž

P	Injuiry, poisoning and certain other consequences of external causes	\sim	69.51	50.71	61.07	60.53	88.77	70.19	105.35	81.30	102.22	52.96	61.25	79.05	77.41	68.89	51.34	63.58	45.75	54.15	57.40	46.43	96.14	67.82	158.09	100.47
,	Symptoms, signs and abnormal clinical and aboratory findins, not elsewhere classified		0.94	8.02	0.00	1.13	0.16	0.00	1.15	0.19	1.89	1.99	2.08	0.39	0.80	0.00	1.95	0.20	0.44	1.72	0.00	1.40	0.56	1.33	2.09	1.60
•	Conginatal malformations, deformations and shromosomal abnormalities	\sim	1.78	12.18	4.55	2.59	6.54	0.82	3.10	2.87	4.73	5.18	4.52	6.38	5.57	4.07	4.07	2.07	0.99	6.26	6:39	11.94	1.97	5.13	20.27	10.61
	Certain conditions originating in the perinatal		0.21	1.09	0.36	1.94	2.29	00.0		2.87	3.92	09.0	3.55		2.03		0.00	1.28	99.0	0.61	0.34	0.74	0.84	1.23	12.27	5.23
	Pregnancy, childbirth and the puerperium	16	247.47	355.07	270.51	163.14		297.91		5 287.31	298.16	241	_				210.13	192.72	128.86	317.15	315.86	249.35	5 225.74	254.69	305.77	273.17
	Diseases of the genito-urinary system		7 574.60	9 351.11	8 492.89	9 400.41	0 383.02	5 510.12	8 300.89	5 393.86	8 261.43	7 309.78	7 416.54				6 320.78		8 344.47	5 557.80	3 326.70	4 418.03	1 295.45	0 374.33	9 317.59	2 353.81
90	Diseases of the musculoskeletal system and someorive tissue	14	43.97	3 83.99	3 75.68	3 41.59	7 49.70	8 78.35	1 48.08	6 106.35	90.07	0 72.07	9 36.07	5 51.57	4 43.12		5 66.56	3 35.15	3 67.68	9 61.15	6 100.53	5 63.14	1 102.61	4 62.80	.48 84.99	3 70.82
on,20	Diseases of the skin and subcutaneous tissue	H	.68 27.64	21 59.33	75 111.73	<i>19</i> 69	Į	04 99.58	49 55.31	03 60.06	.84 73.19	97 42.60	03 57.59		.02 68.04		97 75.95	.67 36.53	.91 73.63	71.09	77 91.06	56 47.2	.45 103.3	.66 67.94	41 68	97 68.13
10000 population, 2004	Diseases of the digestive system	H	.55 388.68	.04 320.21	.81 310.75	.47 239.	.12 474.90	.70 355.04	401.64 246.49	.38 311.03	.08 256.84		.37 300.03		347.54 236.02	_	.20 326.97	.08 235.67	177	.34 240.78	362.19 261.	.69 252.	79 339	351.38 282.	355.	338.10 308.97
0 pop	Diseases of the circulatory system	H	382.19 269.55	201.65 400.04	306.80 317.81	295.21 370.47		476.66 720.70	224.69 401	264.36 325.38	221.19 371.08	256.22 334.06	.25		277.99 347	_	176.32 268.	244.26 437.08	34 360.02	1.55 327.	330.58 362	5.24 357.	248.37 405.	267.16 351	319.41 314.67	286.06 338
1000	Diseases of the ear and mastoid process	H	1.77 38.	18.62 20	17.84 300	13.60 29:	11.93 38:	26.12 470	10.56 224	8.03 26	17.15 22	6.97 250	14.06 223	8.34 202.	16.88 277	-	24.61 170	32.98 24	13.56 249.	11.05 211.	23.96 330	4.86 306.	40.90 248	16.76 26'	14.98 319	16.12 280
/ per	Diseases of the eye and adnexa		5.65 2	22.58	40.95	14.57	9.81	7.35	8.15	8.42	56.31		4.28				11.86 2	7.50 3.	3.42	24.56	11.64 2	3.05	20.66	13.51	45.81	25.19
bidity	Diseases of the nervous system and sense organs	7	40.17	83.49	120.83	145.66	91.22	101.21	94.33	204.87		45.99	91.94	56.91	74.23	117.25	148.35	97.35	30.29	102.28	135.11	105.12	131.84	107.17	51.18	123.09
Inpatient Morbidity per	Mental and behavioural disorders	9	33.81	36.65	48.74	35.12	35.96	37.54	95.48	37.68	93.18	24.69	11.74	32.95	19.97		74.00	21.42	13.45	27.75	29.10	32.02	16.87	36.27	76.21	50.72
tient	Endocrine, nutritional and metabolic diseases	5	9.84	21.20	30.78	8.58	17.98	13.06	11.02	14.16	11.07	13.14	11.37	14.72	29.51	20.33	15.05	5.92	13.56	15.59	20.08	12.60	14.90	15.72	27.90	20.13
Inpa	Diseases of blood and blood formingorgans and certain disorders involving the immune	4	10.05	26.15	11.62	5.66	15.53	4.90	5.51	11.86	7.70	12.54	18.46	7.42	7.25	15.40	22.66	4.34	6.28	14.49	16.09	20.50	12.37	12.50	11.67	12.20
	Neoplasms	3	17.59	21.99	10.42	18.13	29.92	3.26	21.57	12.24	32.41	9.16	14.79	19.14	26.16	12.41	15.93	8.29	12.57	27.38	37.31	16.22	20.38	19.38	76.71	40.12
	Certain infectious and parasitic diseases	2	79.66	28.82	33.65	62.63	51.17	177.11	113.95	86.08	146.38	55.94	48.42	117.86	62.03	49.42	86.74	44.13	88.74	67.04	68.81	44.54	146.32	73.18	143.30	98.54
	Total	1	2,325.08	2,102.91	2,266.97	1,947.98	2,406.53	2,979.92	1,963.12	2,218.91	2,098.60	1,755.72	1,835.51	1,684.07	1,810.76	2,147.89	1,901.47	1,877.38	1,731.63	2,139.73	2,194.92	1,993.66	2,224.47	2,030.96	2,506.79	2,203.07
	Aimag and city	A	Arkhangai	Bayan-Ulgii	Bayankhongor	Bulgan	Gobi-Altai	Gobi-Sumber	Darkhan-Uul	Dornogobi	Dornod		Zavkhan	Orkhon	Uvurkhangai	Umnugobi	Sukhbaatar	Selenge	Tuv	Uvs	Khovd	Khuvsgul	Khentii	Aimag average	Ulaanbaatar	Country average
	Š		1	2	3	4	5	9	7	8	6	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24

Outpatient Morbidity per 10000 population



16	Percent of pregnant women with anaemia	14.4	2004
		14.4	2004
	Immunization coverage for infants (in %) - BCG	97.7	2004
17	- BCG - DPT3	98.8	
	- DP13 - OPV3		2004
		98.8	2004
	- Measles	98.8	2004
	- Tetanus II		
	- Hepatitis B III	98.2	2004
	MCH coverage (pregnancies, deliveries, infant care)		
18	- pregnant women cared for by trained personnel (in %)	98.0	2004
	- deliveries attended by trained personnel (in %)	99.7	2004
	- % of pregnant women immunized with tetanus toxoid (TT2)		
19	Percent of women in the reproductive age group using modern		
	contraceptive methods	51.28	2004
	Percent of population with access to local health services	NA	
20	- Total	NA	
20	- Urban	NA	
	- Rural	NA	
21	Percent of population covered by PHC	NA	
	Percentage of population with access to safe water		
22	- Total	41.5	2002
22	- Urban	69.0	2002
	- Rural	27.5	2002
	Percent of population with adequate excreta disposal facilities		
	- Total	40.2	2002
23	- Urban	45.3	2002
	- Rural	37.5	2002
24	Human development index	0.679	2002
	Per capita GDP at current market prices (US\$)	447.4	2002
	Rate of growth of per capita GDP (in %, base year-2000)	10.6	2004
	Health Expenditure	10.0	2004
	- amount (in mln US\$)	64.09	2004
27	- amount (in min 03\$) -total health expenditure on health as % GDP	5.1	2004
	•	23.57	
Щ	- per capital total expenditure on health (in US\$)	23.57	2004
	Government expenditure on health	45.00	2002
	- amount received (in mln US\$) general government expenditure on health as % of total expenditure on	45.62	2003
	health	71.3	2003
	general government expenditure on health as % of total government		
	expenditure	9.74	2003
28	External source of government health expenditure		
	external resources for health as % of general government expenditure on health	***	2003
	Private health expenditure		
	private health expenditure on health as % of total expenditure on health	7.4	2003
	Exchange rate in US\$ of local currency is: 1 US\$ =		2003
	Health Insurance expenditure (as % of total expenditure on health)	24.2	
	• • • • • • • • • • • • • • • • • • • •		0000
29	health insurance coverage as % of total population	89	2003

	Cases and deaths for six diseases under the WHO-EPI	Nun	nber of C	2020	Nun	nber of De	aths
	- Diphtheria	0	0	0	0	0	0
	- Pertussis (whooping cough)	0	0	0	0	0	0
	- Tetanus	0	0	0	0	0	0
32	- Neonatal tetanus	0	0	0	0	0	0
	- Poliomyelitis	0	0	0	0	0	0
	- Tuberculosis (all types)	4405	2293	2112	301	119	182
	- Measles	0	0	0	0	0	0
	Cases and deaths for selected communicable diseases	Nun	nber of C	ases	Nun	aths	
	Hepatitis viral	6164	3296	2868	40	27	13
	Type A	5236	2760	2476	NA	NA	NA
	Type B	782	457	325	NA	NA	NA
	Туре С	142	61	81	NA	NA	NA
	Unspecified	4	1	3	NA	NA	NA
	Cholera	0	0	0	0	0	0
33	Typhoid fever	14	9	5	1	0	1
33	Encephalitis	67	43	24	0	0	0
	Meningitis	70	40	30	8	5	3
	Plague	3	1	2	2	1	1
	Syphilis	1775	723	1052	9	4	5
	Gonorrhoea	5730	3171	2559	0	0	0
	Leprosy	0	0	0	0	0	0
	Malaria	0	0	0	0	0	0
	Dengue/ DHF	0	0	0	0	0	0
34	Acute respiratory infections	152264	62761	89503	491	280	211
35	Diarrhoeal diseases	16107	8247	7860	115	62	53
	Cancers	Nun	nber of C	ases	Nun	nber of De	aths
	All cancers	3381	1788	1593	2669	1537	1132
	- Trachea, bronchus, and lung	345	264	81	331	262	69
	- Stomach	469	311	158	394	253	141
36	- Colon and rectum	76	43	33	55	20	35
	- Lip, oral cavity and pharynx	49	30	19	39	23	16
	- Liver	1312	756	556	1175	681	494
	- Cervix	264	0	264	82	0	82
	- Leukaemia	22	14	8	24	15	9