



IMPLEMENTING AGENCY OF THE GOVERNMENT
OF MONGOLIA
DEPARTMENT OF HEALTH



HEALTH INDICATORS

2009

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List of acronyms

AR	Arkhangai
BO	Bayan-Olgii
BKH	Bayankhongor
BU	Bulgan
GA	Gobi-Altai
GS	Gobisumber
DG	Dornogobi
DO	Dornod
DU	Dundgobi
ZA	Zavkhan
OR	Orkhon
UV	Uvurkhangai
UM	Umnugobi
SU	Sukhbaatar
SE	Selenge
TU	Tuv
UVS	Uvs
KHO	Khovd
KHU	Khuvsgul
KHE	Khentii
Aimag	Aimag average
UB	Ulaanbaatar
Country	Country average
NSO	National Statistical Office
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

The Implementing Agency of the Government of Mongolia-Department of Health issues its yearbook with main health indicators essential for policy and decision-making. The indicators have been estimated based on routine health statistical reports and in accordance with international methodology.

The yearbook has been published in both Mongolian and English since 2001, and main health indicators have been estimated according to the different levels of health care for the last 3 years. Furthermore, the inclusion of child and maternal deaths, non communicable disease rates in the last 10 years, leading causes of the morbidity and mortality, and health economic indicators.

The current publication has included Health Profile of Mongolia for the Western Pacific Regional countries databank-2009 revision, and more evidence on gender, age-specific, regional and geographic morbidity and mortality indicators, as well as, world mortality trends until 2030.

During the 2005-2009 period infant and under 5 mortality rates has been reached at Millennium Development Goal of health which was taggetted by 2015.

We belive this publication would be a great assistance to health policy and decision-makers at all level as well as other information users in making sound evidence-based decisions, and we hope that readers will provide their comments and suggestions for the further improvement of the publication.

DIRECTOR



Ts.SODNOMPIL

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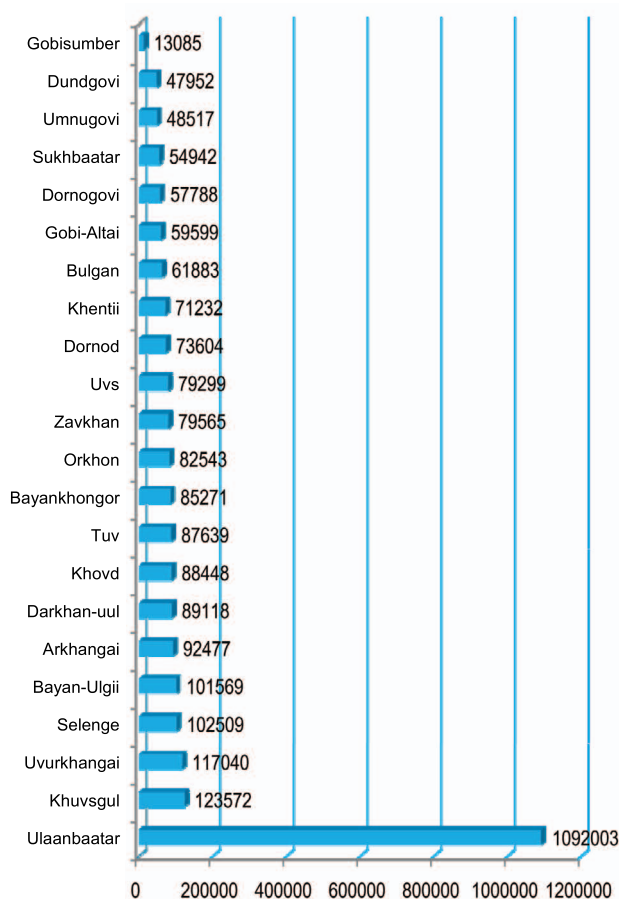
CHAPTER 1. POPULATION OF MONGOLIA

1.1. Population of Mongolia

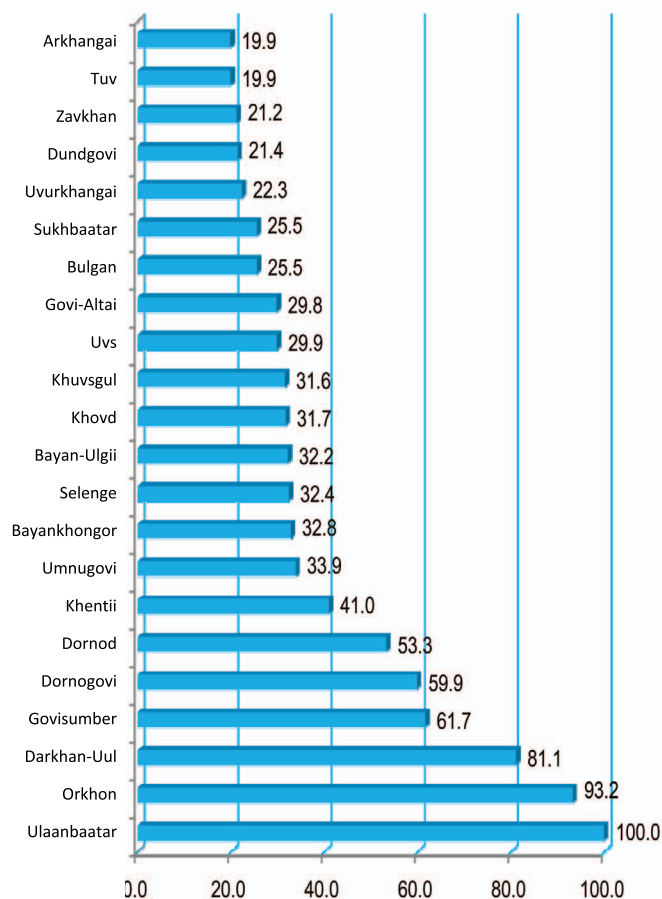
Administratively, Mongolia is divided into aimags and the capital city. Aimags are further divided into soums and soums into bags. The capital city is divided into districts and districts into khoroos. Presently, the country has 21 aimags, 329 soums, and 1564 bags. The capital city is Ulaanbaatar and it has 9 districts and 132 khoroos.

By the end of 2009, the population of Mongolia reached 2 million 735 thousands: an increase of about 52.3 thousand people or 1.9 percent, compared to 2008. Of the total population, 62.6 percent are living in cities, and the remaining 37.4 percent reside in rural areas. Moreover, 1 million 112.3 thousand people reside in Ulaanbaatar city. Male residents accounted for 48.9 percent of the total population, while females accounted for 51.1 percent. Around 27.6 percent of the population are under 15 years of age, 68.4 percent are between 15-64 years old, and 4.0 percent are 65 and over.

Picture 1.1
Mid-year population, by aimags, 2009



Picture 1.2
Proportion of urban population, by aimags, 2009



1.2 Average life expectancy

In 2009, the average life expectancy of the population was 67.96 years therefore Mongolia has a satisfactory average life expectancy, which is one of the criteria of human development. Gender specifications of the average life expectancy were 71.79 years in females and 64.33 years in males. In other words, women experienced a greater life expectancy than males by 7.5 years.

1.3 Selected Demographic indicators

Since 1990, Mongolia has been undergoing a demographic transition defined by a sharp reduction in fertility and death rates, and an increase in aging. For instance, the growth rate of the population has decreased from 2.7 percent in 1990 to 1.4 percent and 1.17 percent in 2000, and in 2003-2005 respectively. In 2007-2009 the crude birth rate reached 1.5-2.0, which showed a 0.3-0.8 percent increase in the last 3 years.

The crude birth rate per 1000 population was reduced by half from 35.3 in 1990 to 18.0 in 2003, and has been stable since 2004-2006. Between 2007-2009 it has increased to 21.7-25.30. Meanwhile, the total fertility rate (TFR), interpreted as the number of children a woman would have by the end of her childbearing years, was 4.3 in 1990. The total fertility rate (TFR) experienced a two-fold decline during the period of 2000-2003 and stayed at the same low level between 2004-2006 before increasing again to 2.3 -2.7 in 2007-2009.

In 2009, there were 68 762 live births. Of these, 671 births were twins (1,342 babies) and 9 births were triplets (27 babies). Of all live births, 48.7 percent were girls and 51.3 percent were boys. In other words for every 100 girls there were 105 boys.

Table 1.1. The demographic indicators by selected years

Indicators	1990	2000	2003	2004	2005	2006	2007	2008	2009
Total population (thousand)	2149.2	2407.5	2504.0	2533.1	2562.3	2594.8	2626.6	2683.5	2735.5
Urban population	54.6	57.2	58.5	59.1	60.2	60.9	61.0	61.4	62.6
Rural population	45.4	42.8	41.5	40.9	39.8	39.1	39.8	38.6	37.4
Age group (percent)									
0-15	41.5	33.7	32.6	32.6	32.6	28.6	28.9	28.1	27.6
15-64	54.4	62.8	63.9	63.9	63.9	67.3	67.3	67.8	68.4
65 and over	4.1	3.5	3.5	3.5	3.5	4.1	4.1	4.1	4.0
Demographic rates									
CBR	35.3	21.5	18.0	17.7	17.8	18.4	21.7	23.7	25.3
CDR	7.9	5.9	6.1	6.1	6.1	6.1	6.2	5.7	5.7
Growth Rate	2.7	1.5	1.2	1.16	1.17	1.23	1.55	1.8	1.9
TFR	4.3	2.2	2.0	1.9	1.9	1.9	2.3	2.6	2.7

As noted in 2009, 40.6 percent of the total population lives in Ulaanbaatar, the capital city, 21.6 percent in aimag centers, and the remaining residents are found in rural areas (soums and/or bags). Due to increased urbanization, rapid socio-economic development, and continued rural-to-urban migration, 42.8 percent of the total population resided in the rural areas in 2000 and by 2009, this figure had decreased to 37.8 percent.

CHAPTER 2. MILLENNIUM DEVELOPMENT GOALS AND HEALTH

The Heads of States representing 191 nations adopted the Millennium Development Goals (MDGs) at the United Nations Millennium Summit in September 2000 and agreed on global developmental priorities ranging from poverty reduction to sustainable development. These goals are based on the resolutions of UN Summits, and have grown into a measure of progress.

In 2005, Mongolia included verification of human rights and democratic governance development in the objectives of the Millennium Challenge Account. Thus, a total of 9 objectives with 22 activities were developed and approved by parliament. In order to implement these objectives some necessary programs, policies and measures were taken.

The following 5 health objectives were promoted in the framework of the Millennium Challenge objectives in Mongolia: to reduce infant mortality, to improve maternal health, fight against AIDS, tuberculosis and other diseases.

Objective 7

Reduce by two-thirds, between 1990 and 2015, infant and under-five mortality rates.

Table 2.1 Infant and Under-five Mortality Rates(live births), selected years

Indicator	1990	2000	2004	2005	2006	2007	2008	2009	2015
Infant mortality rate /per 1000 live births/									
Gender									
Male	-	-	25.9	22.8	22.1	19.2	22.4	22.6	
Female	-	-	19.6	18.6	17.3	16.4	16.6	17.6	
Residence									
Country average	63.4	31.2	22.8	20.8	19.8	17.8	19.6	20.2	22.0
UB city average	70.3	32.8	23.7	18.1	19.0	14.7	17.5	18.0	-
Aimag average	62.5	30.8	22.3	22.5	20.3	20.3	21.2	21.9	-
Under 5 mortality rate /per 1000 live births/									
Gender									
Male	-	-	32.5	28.4	26.8	23.3	26.4	25.9	
Female	-	-	25.6	23.6	21.1	20.8	20.2	21.2	
Residence									
Country average	87.5	42.4	29.1	26.1	24.0	22.1	23.4	23.6	29.2
UB city average	99.9	42.4	28.9	21.7	21.8	18.8	20.8	21.0	-
Aimag average	94.4	42.5	29.2	28.9	25.6	24.6	25.3	25.7	-

Data and statistics in above table shown that the last 20 years since 1990, infant and children under-five mortality rates have decreased significantly in Mongolia. Successful implementation of the comprehensive public health measures such as immunization programs and Intergated Child Disease Management, has resulted in reduction of the infant and under 5 mortality rate.

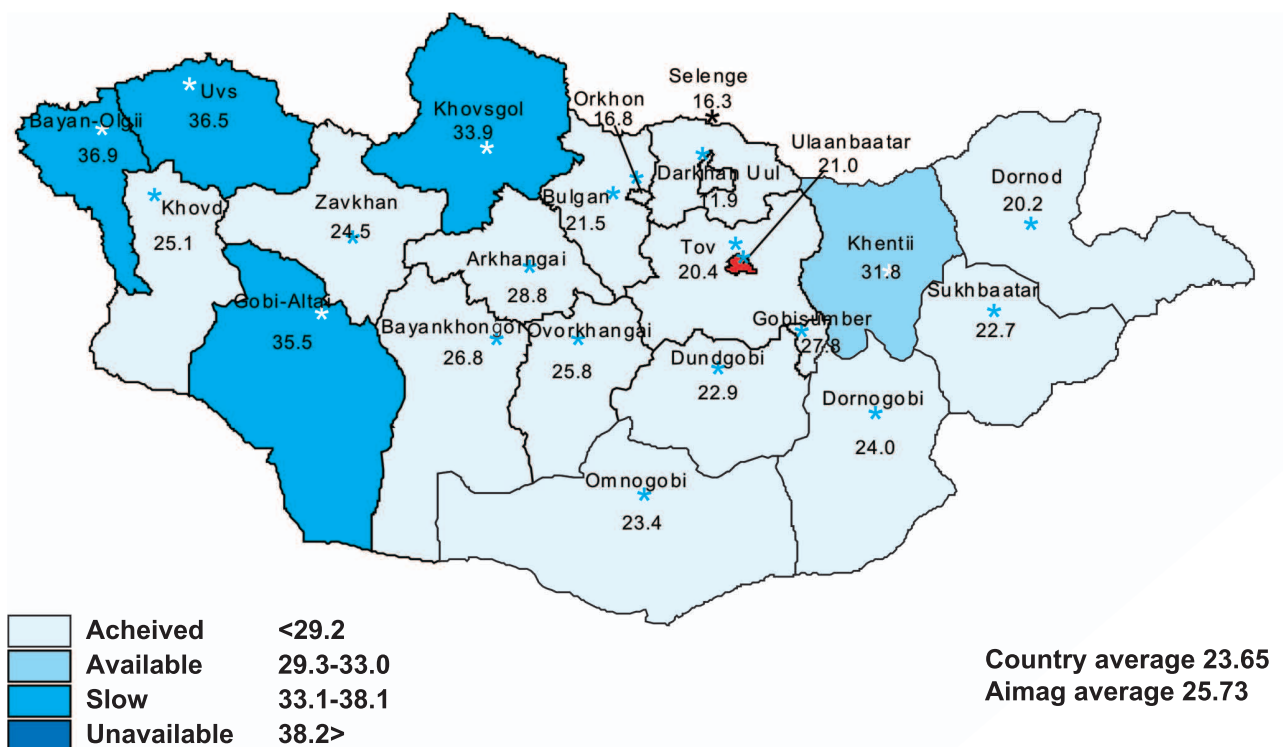
In 1990 the infant mortality rate per 1,000 live births was 63.4, this decreased by half in 2000 and three-fold between 2000-2009 and it has reached 20.2 in 2009. Accordingly, the under five mortality rate per 1,000 live births was 87.5 and dropped 2 and 3.7 times in 2000 and between 2000-2009 years respectively, and it has reached 23.6 in 2009.

Nationwide between 2005-2009, infant and under-5 child mortality rates reduced significantly and Mongolia reached its goals for 2015. Unfortunately, gains have not been uniform and when compared across aimags it is a different picture. (Picture 2.1)

The leading causes of infant mortality are certain conditions originating in the perinatal period, diseases of the respiratory and digestive systems, congenital malformations, and certain infectious and parasitic diseases. Moreover, there was considerable increase in mortality caused by certain conditions originating in the perinatal period and congenital malformation for the last 20 years. For instance, in 1998 certain conditions originating in perinatal period and congenital malformation accounted for 2.0 percent and 25.0 percent and then in 2009, it increased to 11.2 percent and 52.4 percent, respectively.

Data and statistics show a steady decrease in infant mortality caused by respiratory, digestive and infectious diseases. Unfortunately, there was a considerable increase in infant mortality originating during perinatal, neonatal and postnatal periods. There is a need for the improvement of neonatal and fetal diagnostics and treatment services, the introduction of new preventive care technologies, and the improvement of maternal health and prevention of complications during delivery.

**Picture 2.1 Infant and Under 5 Mortality Rates
(Per 1000 live birth), aimag, 2009**



Objective 8

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

Table 2.2. Maternal mortality ratio (per 100 000 live births) by selected years

Indicators	1990	2000	2004	2005	2006	2007	2008	2009	2015
Country average	199.0	158.5	98.6	93.0	69.7	89.6	49.0	81.4	50.0
UB city average	126	171.1	79.8	73.3	71.8	73.7	55.2	78.9	-
Aimag average	230	153.4	109.6	105.7	68.2	102.0	44.3	83.5	-

Mongolia had a high maternal mortality rate between 1990-2000 compared to other regional and developed countries

Successful implementation of the Second Phase of the National Reproductive Health Programme from 2002-2006 supported by UNDP and the government of Mongolia and its continued implementation has resulted in the reduction of maternal mortality rates, which have stayed at a relatively low level between 2004-2008 as reported by the Ministry of Health.

Even though in 2009, the maternal mortality rate was 81.4 per 100 000 live births. Compared to last year it is 1.5 times higher, which indicates that the maternal mortality rate has not decreased.

Objective 9

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

While the rate of HIV/AIDS among Mongolia's population is less than 1 percent, ranking it among the 5 countries with the lowest rate of spread in the East Asia and Pacific region, the number of registered HIV/AIDS has increased in recent years.

The first case of HIV was registered in 1992 and by end of 2009 this number reached 62 cases and 13 cases were registered in 2009.

Out of all 62 cases, there were registered 10 deaths from AIDS. Moreover 90 percent or 57 cases were registered between 2005-2009 years.

Out of the total registered HIV/AIDS cases 80.0 percent (49 cases) were males and 20.0 percent (12 cases) females. All registered cases were transmitted by sexual intercourse.

33 (54.1%) HIV cases were detected and registered through active epidemiology, 18 (29.5%) cases through routine medical check-ups and 10 (16.4%) cases when the patients were admitted to hospital due to other diseases.

Out of all 25 children who live in families affected by HIV/AIDS, three children were orphaned.

Objective 10

Have halted by 2015 and begun to reverse, the spread of tuberculosis.

Despite the fact that diagnosis and treatment of tuberculosis has improved and the number of deaths due to tuberculosis has been decreasing in Mongolia, incidence of TB is on the rise, which makes the attainment of the MDG target by 2015 quite challenging.

Mongolia is one of seven countries with high TB incidence in the Western Pacific Region. Rise in TB incidence could be largely attributed to socio-economic crises, such as inflation, unemployment, poverty and migration.

Table 2.3. Prevalence of tuberculosis (per 100 000 population) by selected years

Indicators	1990	2000	2004	2005	2006	2007	2008	2009	2015
Incidence of tuberculosis									
Country average	79	125	176	175	185	166	159	156	40
UB city average	85	180	264	264	259	225	227	213	-
Aimag average	63	99	129	123	132	123	115	113	-
Death rate of tuberculosis									
Country average	4.8	3.2	3.8	4.0	2.9	2.5	2.7	2.8	-
UB city average	5.4	2.5	3.3	3.3	3.3	2.3	3.2	2.7	-
Aimag average	3.9	2.0	4.5	4.3	2.5	2.6	2.4	2.9	-
Proportion of TB cases detected and cured under DOTS									
Country average	-	100/80	100/83	100/79	100/82.1	100/83.8	100/85.0	100/84.2	-
UB city average	-	100/84	100/84	100/74	100/78.4	100/80.6	100/83.2	100/80.2	-
Aimag average	-	100/81	100/87	100/84	100/87.1	100/88.0	100/87.2	100/88.0	-

Incidence rates of tuberculosis per 100 000 population was 79 in 1990 and it has increased by 1.5 and 2-2.3 in 2000 and 2004-2006 before it declined to 166 in 2007, 159 in 2008 and 156 in 2009.

The number of deaths due to tuberculosis has been decreasing year to year. There was an average of 121 deaths from tuberculosis in 1992-1995 and decreased by 113 deaths in 1996-1999, 75 deaths in 2000-2003 and 80 deaths in 2004-2009.

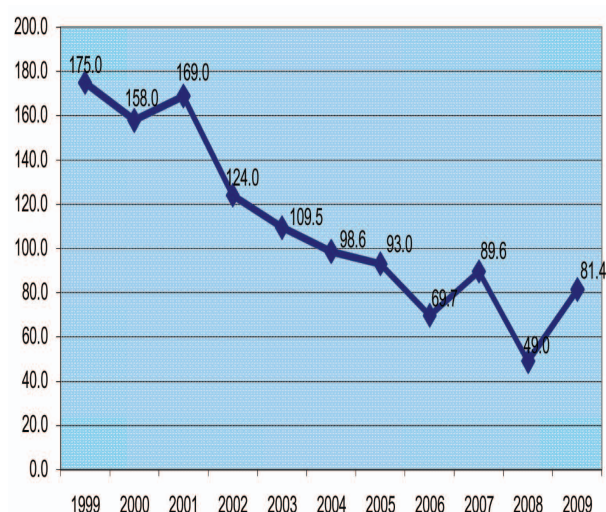
71.4 percent of the total TB cases occurred in 16-44 working age group. There was 50.9 percent males and 49.1 percent females.

CHAPTER 3. MATERNAL AND CHILD HEALTH

3.1 Maternal Health

- ◆ As stated in the population development policy of the Government of Mongolia, in order to increase population growth it is important to provide a healthy environment for the population to have an active, long and healthy life. Therefore, the following funds are provided by law: a fund for newborns and their mothers, a fund for newly married couples and a once per year cash support provided to mothers with many children.
- ◆ **In 2009**
In order to intensify the fifth objective of the MCA, the following programs were developed: “2005-2010 Strategy to Reduce Maternal Mortality” and “Third National Program on Reproductive Health 2007-2011”.

Figure 3.1 Maternal mortality per 100,000 population /1998-2009/



During the new epidemic of the H1N1 human influenza virus, pregnant women were categorized as a high risk group. Therefore, the following orders were approved by the Minister of Health Order No. 370 to “Improve quality of the health care service for pregnant women during H1N1 human influenza A epidemic” and order No. 149 on “Measures to reduce maternal mortality”.

A review of the national program on reproductive health concluded that state organizations, NGOs and the private sector had actively participated in its implementation and broadened their collaboration. Information and education activities on reproductive health were directed at target groups and population approaches were completed effectively.

This also positively influenced the quality of health care services, equitization of the maternity hospitals with required new equipment and the regular organization of capacity building seminars and courses to improve the knowledge and skills of doctors and health professionals.

There was also considerable improvement made in a regular supply of equipment and drugs for reproductive health due to the approval of the national strategy in 2009 on the safety and supply of equipment and drugs for reproductive health.

3.1.1 Antenatal Care

Effective birth control use will help prevent possible increased risks during pregnancy, birth and after birth. Women without complications should have no less than 6 visits during pregnancy.

The issues related with early detection of pregnancy, prenatal care, identification of pregnant women with risk and complications, their transfer to next level of health care, delivery of healthy women, antenatal care, infant care, family planning, regular work of pre-delivery rooms for women are considered a priority issue of the primary health care system in soums and family clinics.

In the framework of the health services provided to women before birth, order number 321 was approved by the Minister of Health on the 'provision of mineral supplements and vitamins to pregnant women. Early and regular antenatal care is also essential for an early diagnosis and treatment of associated diseases, and the reduction of prenatal complications.

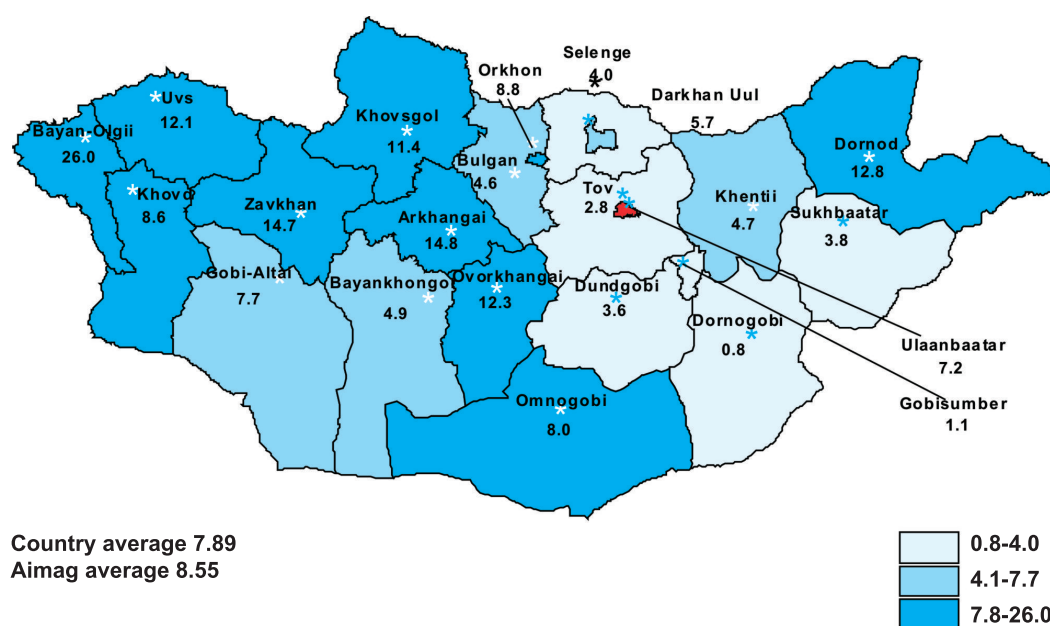
According to 2009 data 83.2 percent of all pregnant women had received antenatal care in the first 3 months of their pregnancy. Out of all women who gave birth in 2009 and attended antenatal care, 80.3 percent were in the city, and 85.5 percent were in the countryside, which showed a decrease in the of tendency to attend antenatal care in rural areas. On average, the percentage of antenatal and early antenatal care coverage in Ulaanbaatar city was lower than in the aimags.

Providing pregnant women with access to antenatal care and regular health visits will help to prevent and monitor possible complications relating to anemia, late pregnancy complications and kidney disease. In 2004, order number 197 was approved by the Minister of Health on "Procedures and rules to check HIV/AIDS status of pregnant women". In order to follow this rule, pregnant women should first give their approval.

Of all pregnant women receiving antenatal care, 91.5 percent have undergone general blood testing and, of these, 7.9 percent were anaemic.

In the year of 2009, 90.2 percent of pregnant women were tested for syphilis, of which 1.9 percent tested positive. The detection rate was even higher in Bayankhongor (5.5%), Orkhon (3.3%), Dornogobi (3.4%), Selenge (2.4%) aimags, and Ulaanbaatar city (2.2%). Moreover, 63.9 percent of all pregnant women have had an X-ray examination, and 90 active tuberculosis cases were detected. Of the later, 75.5 percent were from Ulaanbaatar city.

Figure 3.2 Percent of pregnant anaemic women, 2009



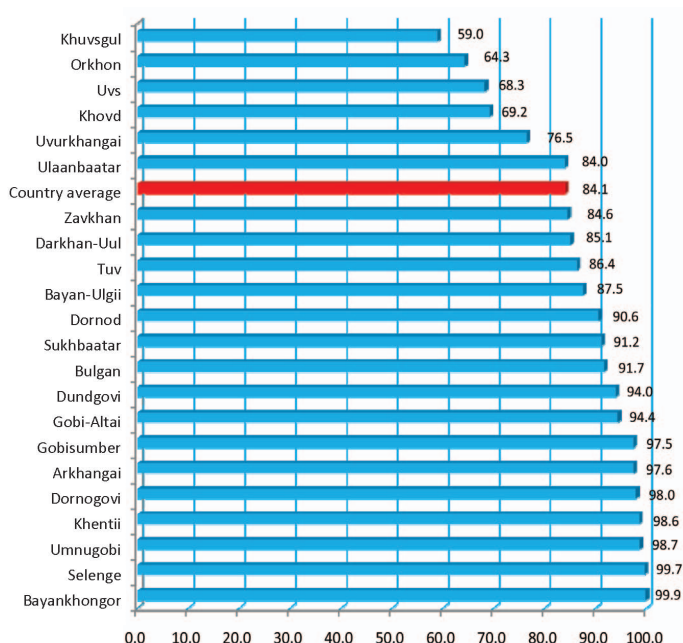
Maternity rest room is a unique health service of our country. This service has many advantages for pregnant women.

For example, it reduces home deliveries and prevents many complications which occur during birth, and provides information and education for mothers as well.

The main goal of the maternal rest room is to provide rest for pregnant women before the delivery and within 7 days after the delivery.

As of 2009, 336 maternity rest rooms were operating throughout the country. Of them, 310 were located in soum centers, 22 were in aimag centers, and 3 were in Ulaanbaatar city. The average length of stay at maternity rest rooms was 7.9 days.

Picture 3.3 Percent of women undergoing antenatal check-ups at least 6 times during last pregnancy, 2009



By 2009, the percentage of pregnant women who visited antenatal clinic six times and over reached 84.1percent. Although non-coverage percent was 0.2 which indicate an increase compared to previous year. This indicator was higher in Dornogobi, Dornod aimags and Ulaanbaatar city.

3.1.2 Birth, delivery health care and service

It is important to include pregnant women in antenatal care and diagnostics as early as possible, to provide sufficient and well educated feldshers (midwives) and other health professionals, and to increase hospital delivery.

The following pregnant women are required to deliver in fully equipped local hospitals, for example: first deliveries, twins, over 35 years of age, late inclusion to antenatal care, history of previous complications and still birth, malnutrition and women with chronic diseases. Of all pregnant women living in rural areas, only 40 percent deliver in local hospitals or come to Ulaanbaatar.

According to 2008 reproductive health research, the western region demonstrates the lowest number of transfers of pregnant women from soum to aimag and from aimag to Ulaanbaatar. As well, for all pregnant women living in Ulaanbaatar, 99 percent received professional medical help, and of these, 53 percent received obstetric help, which was higher in comparison to rural areas. In rural areas, 37 percent of pregnant women were assisted by a feldsher, this was 21 percent higher in comparison to the city.

In 2009, the number of women who gave birth totaled 68544. When compared to 2008, the birth number increased by 5457 births and in all aimags and Ulaanbaatar city.

Table 3.1 Number of births by type of health facility, 2009

Aimag, city	Total number of births	At home	Number of births in aimag hospitals	Number of births in rural general hospitals	Number of births in soum and intersoum hospitals	Number of births at bagh feldsher posts	State Research Center for Maternal and Child Health	Number of births in private hospitals
Arkhangai	2045	1	1181	0	862	1	0	0
Bayan-Olgii	2558	0	1739	0	819	0	0	0
Bayankhongor	2047	8	1571	0	468	0	0	0
Bulgan	1060	5	697	0	358	0	0	0
Gobi-Altai	1374	9	1018	0	345	2	0	0
Gobisumber	361	1	359	0	1	0	0	0
Darkhan-Uul	2592	16	2461	0	115	0	0	0
Dornogobi	1337	9	1028	225	75	0	0	0
Dornod	1927	12	1794	0	121	0	0	0
Dundgobi	1085	2	777	0	306	0	0	0
Zavkhan	1878	1	875	313	689	0	0	0
Orkhon	2489	17	2462	0	10	0	0	0
Uvurkhangai	2942	14	1693	336	860	9	0	30
Umnugobi	1280	5	1043	0	232	0	0	0
Sukhbaatar	1192	2	1051	0	139	0	0	0
Selenge	1848	3	891	620	334	0	0	0
Tuv	934	1	501	0	432	0	0	0
Uvs	2379	25	1493	0	860	1	0	0
Khovd	2227	4	1428	325	470	0	0	0
Khuvsgul	3149	3	1861	0	1285	0	0	0
Khentii	1560	3	1090	185	282	0	0	0
Aimag average	38264	141	27013	2004	9063	13	0	30
Ulaanbaatar	30280	127	1314	0	4	0	28685	150
Country average	68544	268	28327	2004	9067	13	28685	180

3.1.3 Postpartum health care service

Millennium development goal health indicators include antenatal care coverage, maternal rest home service and post partum maternal care within 42 days after delivery

Postpartum health care service embraces a wide range of activities, including post partum maternal care within 42 days after delivery, counseling and services related to newborn care, breastfeeding and family planning.

According to the Reproductive health research results of 2008, 46% of all mothers who gave birth had some kind of associated diseases. If compared to 2003, the above point increased by 0.4 and by 13 points since 1998.

According to 2009 health statistics, there were registered a total of 43623 cases of complications during pregnancy, birth and the postpartum period and 634.4 cases per 1000 live births. Out of all registered complications were:

- 35.6 percent during pregnancy complications
- 45.9 percent delivery related complications
- 1.5 percent postpartum complications
- 16.8 percent maternal diseases nonassociated with pregnancy and childbirth

Nearly in , every 3 mothers or 29.1 percent of the all women who gave birth in 2009 was reported with maternal disorders nonassociated with pregnancy and delivery. Three leading causes of maternal morbidity were :

- diseases of the genital-urinary system (39,2 percent)
- disease of blood and blood forming organs and certain disorders involving the immune mechanisms, (17,2 percent)
- diseases of the circulatory system (11,4 percent)

The Reproductive health research report showed that in 2008, the percentage of mothers who had medical consultation within the first 42 hours after delivery had significantly increased in comparison to the percentage in 2003. The report demonstrated that newborn care and breast feeding increased by 2 points, consultation on family planning by 6, and consultation on STIs by 11 points.

According to 2009 health statistics, coverage of active surveillance in postnatal period (within 42 days after delivery) was 84.2 percent, which is a increase by 6.0 percent compared to last year.

3.1.4 Breast feeding and children's health

As a result of many positive factors, such as, the successful implementation of policies to breastfeed every newborn child, to broaden immunization activity nationwide and the introduction of integrated child health care services, essential health indicators of children under-5 years old have improved. Also, infant and under-5 malnutrition levels and mortality rate have consistently lowered year by year.

Table 3.2 Data on newborns by regions, 2009

Regions	Number of newborns				Of all newborns,	
	Total	Male	Female	Sex ratio	percent with birthweight below 2500 g	percent of stillbirths
Western region	10387	5280	5107	103.4	4.4	12.3
Central region	9456	4825	4631	104.2	3.0	5.5
Khangai and Gobi region	13787	7070	6717	105.3	4.3	5.7
Eastern region	4695	2410	2285	105.5	3.6	7.4
Aimag total/average	38325	19585	18740	104.5	3.9	7.6
Ulaanbaatar	30437	15656	14781	105.9	4.5	6.2
Country total/average	68762	35241	33521	105.1	4.2	7.0

Nationwide a total of 68762 live newborns were registered, which was an increase by 8.7 percent or 5500 cases compared to the last year. Out of the total births 4.2 percent had a birth weight below 2500 gramm. The stillbirth rate per 1000 live births was 7.0 and out of the 480 total cases the highest rate was in the khangai-gobi region (26.5 percent). Interestingly, the share of male stillbirths was higher in the majority of regions. The sex ratio at birth was 105.1. There were 1342 sets of twins and 27 triplets among the total live newborns.

Furthermore, the coverage of active surveillance in children-under-one was 99.1 percent and that for children-under-five was 94.9 percent.

3.1.5. Maternal mortality

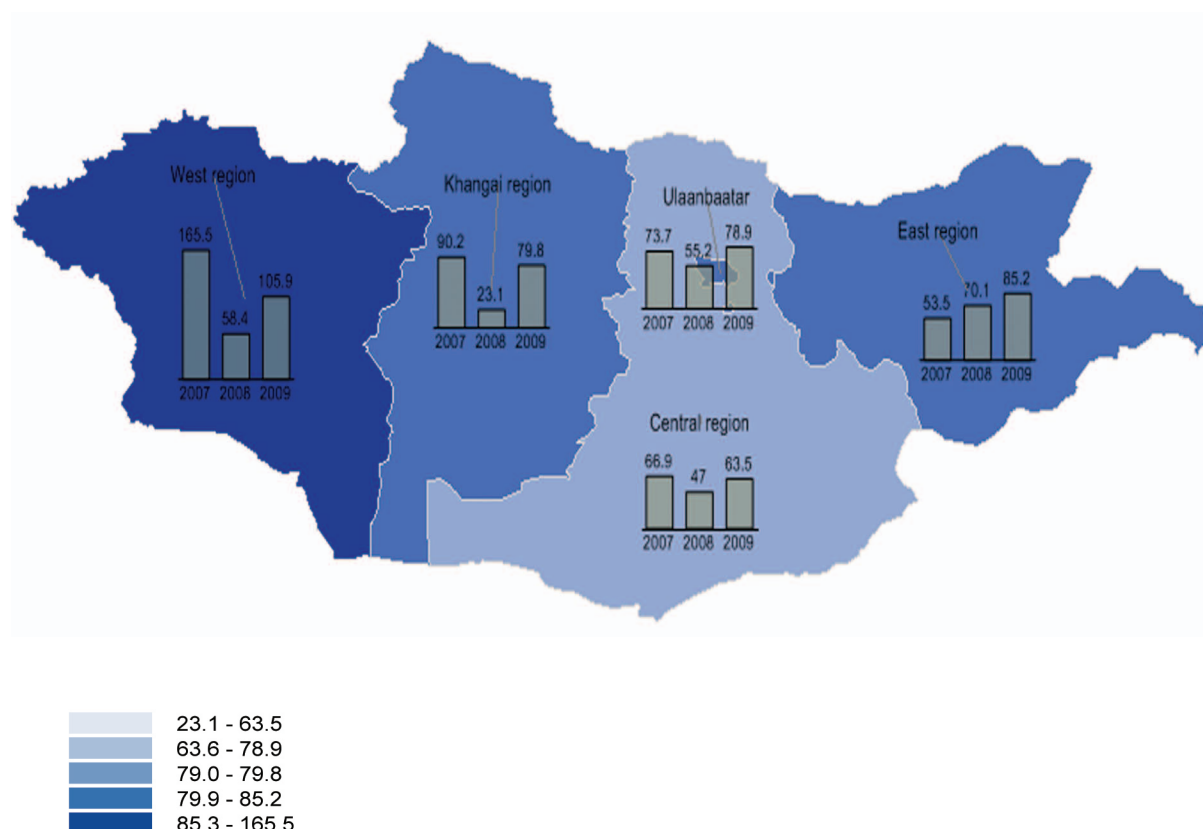
Order No. 149 on “activities to reduce maternal mortality” was approved by the Minister of Health in order to support and achieve the fifth objective of the MCA. Order No. 190 of 2005 “to reduce maternal mortality” was approved by the Minister of Health to reduce maternal mortality incidence to 50.0 per 100 000 live births by 2015. These orders continue to be implemented successfully.

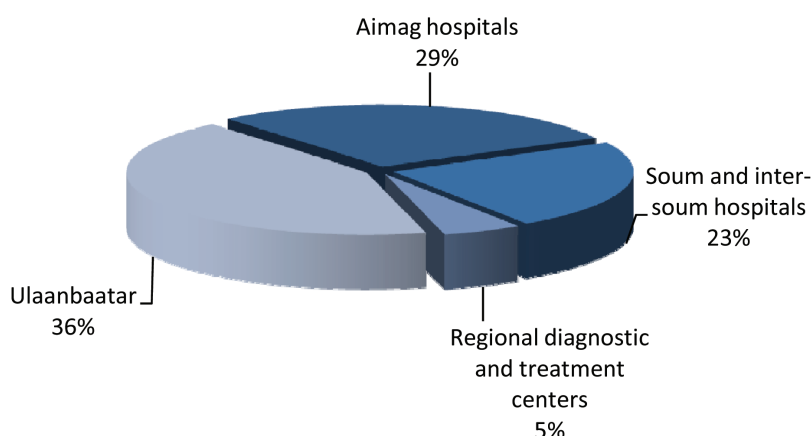
There are many intervention activities that have been implemented that have positively influenced the reduction of maternal mortality, for instance developing and implementing clinical guidelines on the improvement of RH services, transfer high risky mothers to tertiary care at early stages, improving knowledge, skills of medical professionals at bag, soum and family clinics, and provision of facilities and equipments. Yet, our maternal mortality rate is still higher in comparison with neighboring countries.

Maternal mortality rate have increased from 49.0 to 81.4 per 100 000 live births in 2009 compared to the last year. Nationwide there were 56 maternal mortality cases which is an increase by 25 cases and maternal deaths were not registered in Gobi-Sumber, Darkhan-Uul, Dornogobi, Dornod, Ubs aimags.

The following picture shows trends in maternal mortality rates per 100 000 live births by region in the last 3 three years.

Pictures 3.4 Maternal mortality rate by region per 100 000 live births , 2007-2009 year



Picture 3.5 Maternal mortality by levels of health care, 2009

33.9 percent of maternal mortality was due to pregnancy complications, 7.1 percent birth complications, 14.3 percent post delivery complications, and the remaining 44.6 percent due to maternal disorders nonassociated with pregnancy, childbirth and postpartum period. Compared to last year, the number of complications during pregnancy increased by 4.9 points and non pregnancy related disease complications increased by 12.3

points. As a result of the increasing number of causes relating to complications during pregnancy, there is a need for improvement in antenatal and postpartum health care services, early diagnostics and treatment of pregnancy associated diseases.

Out of the 56 maternal death cases 18.0 percent were among those aged 35 years of age and over, and 82.0 percent among women aged 20-34.

3.1.6 Abortion

Abortion levels are one of the most important criteria to show whether understanding and use of family planning is increasing and whether government policies are practical and health care services are equitable. Research from 2008 demonstrates low abortion levels, which are due to the successful implementation of national birth programs. Thus, for the last few years the number of births is increasing, showing women are more interested in having babies.

One of the challenges in the area of reproductive health in Mongolia is the persistent high level of induced abortion and at the same time, the incomplete reporting of aborted cases. A standard of integrated abortion care and services has been in place since 2005 and advanced techniques have also been introduced in adequate delivery of care and services.

In the meanwhile, health statistics for 2009 demonstrate the abortion ratio was 183.3 abortions per 1,000 live births and 15.3 abortions per 1,000 women of reproductive age. The abortion ratio per 1,000 live births in Darkhan-Uul, Orkhon aimags and Ulaanbaatar city is greater than the national average.

Abortion in later pregnancy was 4.1 percent, which in comparison with last year increased by 0.5 percent.

According to the age group, 6.2 percent of total abortions were among women under 20 years old, 70.1 percent among those aged between 20-34 years, and 23.7 percent among women aged 35 years old and over.

In comparison with last year, the abortion rate increased in all age groups. One third (30.6 percent) of all women who have undergone induced abortions have experienced abortion for the first time.

3.1.7 Contraception

Increased knowledge and usage of contraceptives in Mongolia has been allowing 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.

Modern methods of family planning include, condoms (female and male), IUD, norplant, pills, diaphragm, cervical cap, spermicide, and sterilization (male, female).

According to the 2009 health statistics, the percent using modern contraceptive methods in RH age women was 53.2 or 531.6 women per 1000 RH aged women. The most commonly used methods were condoms (35.4 percent), IUD (27.1 percent) and the pill (22.5 percent).

3.2 Child and Adolescent morbidity and mortality

The State Policy on Population Development holds that by 2015 infant mortality will be reduced by one third compared to 2000. Infant and under-five mortality rates, which are considered to be verifiable indicators of the effectiveness of actions in improving health status of the population, followed a trend towards consistent decline in the last 10-15 years in Mongolia. Infant mortality rates have dropped from 35.3 to 19.4 per 1000 live births. This indicates the successful implementation of health programs and policies over the last 15 years.

According to 2008 research, neonatal and infant mortality rates were higher in rural areas compared to urban areas, but oppositely under-five mortality rates were higher in the city than in rural areas.

According to research, under-five mortality rates varied by region, with the highest mortality rates in the western region and lowest mortality rates in the southern region

In 2009, infant and under-five mortality rates per 1000 live births were 20.2 and 23.6 respectively which was an increase of 0.2 and 0.6 cases per 1000 live births compared to the previous year. Although early neonatal mortality still remained high in infant mortality.

Infant and under 5 mortality rates were higher in Bayan-Ulgii, Uvs, Gobi-Altai, Gobi-Altai, Khovsgul, Khentii, Arkhangai, Bayankhongor aimags compared to the aimag and country average rates.

The infant mortality due to diseases of the respiratory system has been increasing in the last several years and it has increased by 1.9 percent compared to the previous year.

Table 3.3 Infant and 1-4 age mortality by cause and place of residence, 2009

	Infant		1-4 year-olds	
	Urban	Rural	Urban	Rural
Diseases of the respiratory system	11.1	24.5	25.0	38.5
Diseases of the digestive system	2.2	5.8	6.5	7.4
Certain conditions originating in the perinatal period	63.3	45.3	0.0	0.0
Congenital malformations, deformations and chromosomal abnormalities	14.4	9.2	8.7	2.7
Injury, poisoning and certain other consequences of external causes	4.9	8.6	41.3	33.1

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

Perinatal pathology was the leading cause of infant mortality in urban and rural areas. .

In comparison to 2008, under-5 child mortality rates increased by 6.8 points and infant mortality rates increased by 4.4 points. This was due to respiratory diseases related to H1N1 human influenza A.

Table 3.4 Infant and 1-4 age morbidity by cause and place of residency, 2009

	0-1 year-olds		1-4 year-olds	
	Urban	Rural	Urban	Rural
Diseases of the respiratory system	16.1	42.8	15.7	39.6
Diseases of the digestive system	5.1	9.0	3.9	8.8
Certain conditions originating in the perinatal period	3.3	1.0	0.0	0.0
Injury, poisoning and certain other consequences of external causes	1.2	0.6	3.8	1.1
Certain infectious and parasitic diseases	0.5	0.3	2.5	1.8
Diseases of the skin and subcutaneous tissue	2.4	2.7	5.0	3.3
Diseases of the ear and mastoid process	0.7	3.4	0.6	1.9

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

Disease of the respiratory system continues to increase and remains the leading cause infant and 1-4 years old child morbidity in urban and rural areas.

As a result of the H1N1 human influenza epidemic, the number of the under 5 children who visited an out- patient department increased significantly. The morbidity percentage of sore throat was 39.8 and cold and flu was 46.8, particularly among young children.

Table 3.5 Five leading morbidity causes of children and adolescents by age group, 2009

	1-4 year-olds	5-9 year-olds	10-14 year-olds	15-19 year-olds
Diseases of the respiratory system	3629.9	1093.6	878.0	664.3
Diseases of the digestive system	832.4	679.7	681.1	612.4
Certain infectious and parasitic diseases	282.9	211.0	120.8	153.8
Injury, poisoning and certain other consequences of external causes	384.3	255.2	304.8	359.3
Diseases of the genitourinary system	132.6	131.5	247.3	449.0
Diseases of the skin and subcutaneous tissue	546.1	291.3	320.3	390.2



Adolescent morbidity is mainly due to diseases of respiratory, digestive and genitourinary systems, injuries and poisoning. Each year adolescent morbidity increases due to injuries, poisoning and certain external caused diseases. This increase was 17.2 percent, especially among 10-14 year olds.

On the other hand the leading cause of adolescent mortality was injuries and poisoning in both urban and rural areas.

CHAPTER 4. MEDICAL SERVICES

The health care system in Mongolia is characterized by three levels of care and services and its prevailing principle is to deliver equitable, accessible and quality health care and services for every person.

- ☐ Primary care and services are mainly placed in family practice facilities in UB city, and in soum and inter-soum hospitals in aimags
- ☐ Secondary care and services take place in district general hospitals in UB city, and aimag general hospitals in aimags
- ☐ Tertiary care and services are placed in major hospitals and specialized professional centers in UB city

By 2009, 16 specialized hospitals, 4 regional diagnostic and treatment centers, 17 aimags general hospitals, 12 district general hospitals, 6 rural general hospitals, 35 inter-soum hospitals, 277 soum hospitals, 226 family group (FGP) practices and 160 private hospitals and 922 clinics have been delivering health care services to the Mongolian population.

Table 4.1 Health facilities by the level of care

Health care providers	Number
Primary level hospitals	556
Family hospitals	226
Soum hospitals	277/18
Intersoum hospitals	35
Secondary level hospitals	35
District hospitals	12
Rural general hospitals	6
Aimag general hospitals	17
Tertiary level hospitals	20
Regional Treatment and Diagnostic centers	4
Specialized Centers and Hospitals	16
Maternity hospitals	3
Other hospitals	49
Private hospitals with beds	160
Private hospitals for outpatients	922
Hot spring	13
Drug supply companies	144
Drug manufactures	57
Drug stores	636
Other	60
Total	2655

4.1. FGP Services

In 2002, within the framework of the Second Health Sector Development Program, FGPs have been established in Ulaanbaatar city and in aimag centers.

As of 2009, there were 226 FGPs, of which 124 provided primary medical care and public health services to 1 112.7 thousands residents of Ulaanbaatar and 102 served 609.9 thousands residents of 21 aimag centers.

Table 4.1.1 Quality and accessibility indicators of health care and services in FGPs

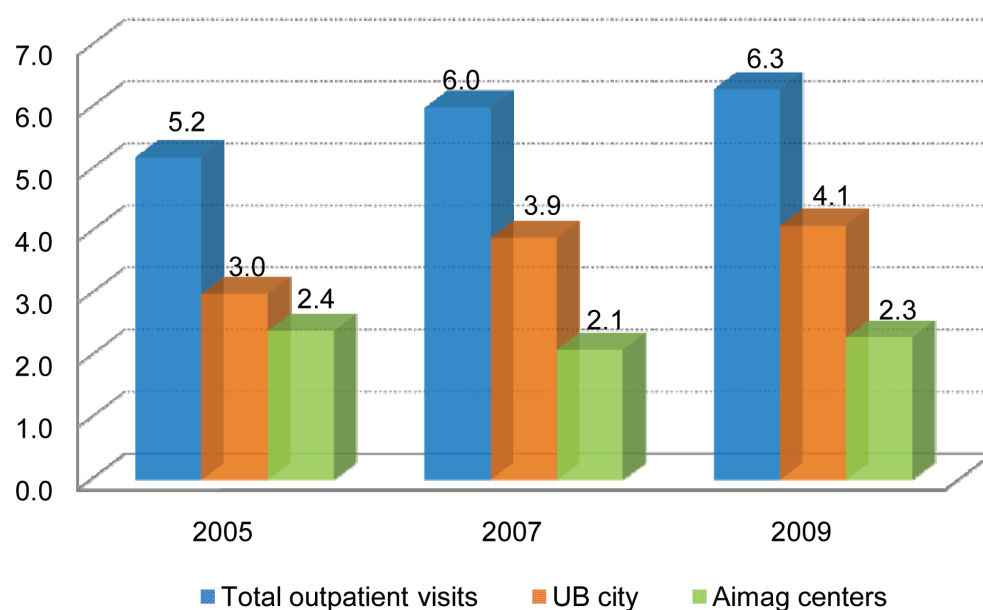
Indicators	Family hospitals		Total
	UB city	Aimag centers	
Number of FGP	124	102	226
Number of physicians	503	303	806
Number of nurses	436	346	809
Number of outpatients	4 108 498	2 228 091	6 336 589
Percentage of preventive medical check-up	40.3	36	38.8
Number of visits person per year	3.7	3.6	3.7
Number of outpatient visits per physician	8167.2	7353.4	7760
Percentage of an early antenatal care coverage	82.8	80.6	81.7

There were a total of 2115 health professionals working in FGPs, including 806 physicians, 809 nurses and other health workers.

At a family general practice (FGP) in 2009, each resident visited 3.7 times in a year for primary health or public health services and approximately 6.3 million medical examinations were performed in 2009.

Out of all medical examinations performed in out-patient departments, the percentage of preventative medical examinations at a FGP level in Ulaanbaatar was 40 percent and in Aimags was 36 percent.

Picture 4.1.1 Outpatient visits performed by the FGPs (million)



The total percentage of medical examination performed in FGP at the UB city level increased from 3.0 million in 2005 and 3.9 million in 2007 to 4.1 million in 2009. The number of medical examinations performed by one family doctor in UB was 8167.2. This was higher by 815 medical examinations compared to a doctor practicing in a rural area. Due to a rising number of people who migrate from rural areas to UB, birth and population figures are increasing considerably and therefore the health care system is overburdened.

4.2. Soum and Inter-soum Hospital Services

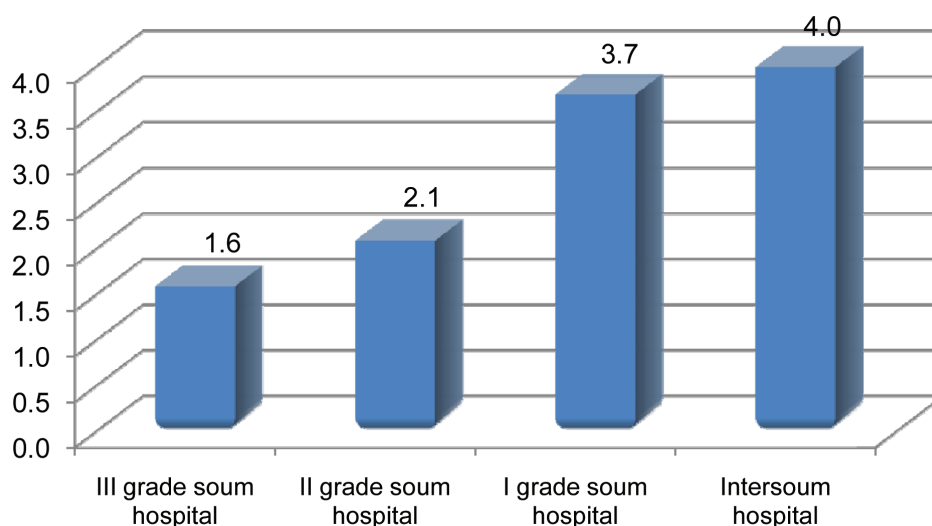
According to the structural and operational standards of soum hospitals approved in 2001, soum hospitals are divided into three categories depending on the size of their catchment population. The first category includes soum hospitals which deliver health care and services for 4500 residents and have at least seven physicians. The second category includes those hospitals which cover between 3001-4500 people and have a minimum of three physicians. Finally, the third category includes soum hospitals which deliver health care and services to a population of up to 3000 people with one physician.

Table 4.2.1 Average number of doctors per soum and intersoum hospitals compared to the requirements of the Structure and Performance Standard, 2002

Grade	Number of hospital	Average number of doctors per hospital	Number of physicians required by the standard	Hospitals that meet the requirement		Hospitals failed to meet the standard	
				Number	Percentage	Number	Percentage
I grade	33	3.7	7	2	6.5	31	93.9
II grade	75	2.1	3	21	28.0	54	72.0
III grade	180	1.6	1	173	96.1	7	3.9
Average	-	-	-	193	67.7	92	32.3
Intersoum hospital	35	4	8	2	5.7	33	94.3

The above table demonstrates a shortage of physicians by percentage, which was set in the standard, 1st level hospital by 6.5%, 2nd level hospital by 28% and 3rd level hospital 96.1%. Currently out of 180 3rd level hospitals, 4 hospitals operate without physicians, 97 hospitals (53.8%) have 1 physician and 79 hospitals (43.8%) have more than 2 physicians.

Picture 4.2.1 Average number of physicians per soum and intersoum hospitals, 2009



According to the standard, 1st level soum hospitals should have a minimum of 7 physicians. Unfortunately, current data indicate that the average number of physicians is 3.7, 1.5 to 2 times lower than the recommended standard.

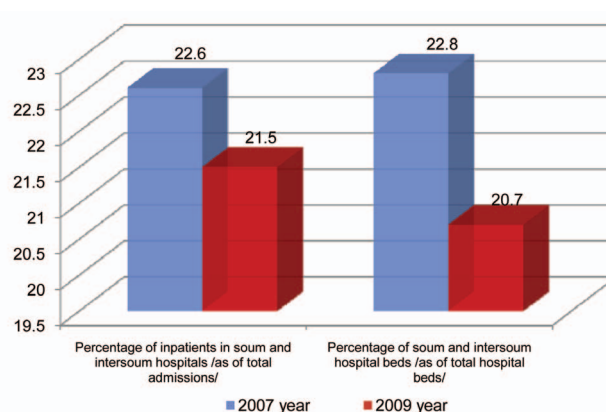
Out of all inter soum hospitals only 2 hospitals as instructed in the standard have 8 physicians and the remaining 33 hospitals, on average, have 4 physicians which is lower than recommended in the standard. In other words 94 percent of all inter soum hospitals are in shortage of doctors. This indicates the need for specialized doctors in soum and intersoum hospitals.

Table 4.2.2 Quality and accessibility indicators of health care and services in soum and inter-soum hospitals

Indicators	2007 year			2009 year		
	Soum hospital	Intersoum hospital	Total	Soum hospital	Intersoum hospital	Total
Number of hospital beds	3172	932	4104	3038	624	3662
Number of physicians	528	144	672	562	149	711
Number of nurses	1411	239	1650	1373	246	2992
Average length of stay	7.7	7.9	7.9	7.8	6.4	7.1
Number of in-patients	116 959	23 938	140 897	114 836	25110	139 946
Number of out-patients	2 320 840	418 063	2 738 903	2 246 335	362 549	2 608 884
Percentage of preventive medical check-up	45.7	42.2	43.9	39.8	40.8	39.9
Number of visits per person per year	3.1	3.2	3.1	3	2.8	3
Percentage of en early antenatal care coverage	88.3	85.6	87.9	87.4	89.4	87.6
Maternal Mortality Ratio /per 100000 live births	193.2	49.95	158.6	136.5	175.7	143.6
Infant Mortality Rate /per 1000 live births	32.8	22	25.7	42.2	29.9	39.9

As of 2009, soum and inter-soum hospitals accounted for 20.6 percent of the total number of hospital beds. This represents a decrease of 442 beds or 10.7 percent compared to 2007. The number of in-patients of soum and intersoum hospitals was 140.0 thousand. In 2009, this figure increased in intersoum hospitals by 5 percent while in soum hospitals decreased by 2 percent compared to the 2007.

Picture 4.2.2 Selected indicator for the soum and intersoum hospitals



Furthermore, the average length of stay in soum hospitals was 7.9 days in 2007 and decreased to 7.1 days in 2009. Furthermore, the average number of outpatient visits in soum and intersoums hospitals has decreased from 3.2 in 2007 to 3.0 in 2009.

The percentage of early antenatal care coverage at soum and inter-soum hospitals was 87.6 in 2009.

23.2 percent (13 cases) of maternal deaths occurred in soum and inter-soum hospitals in 2009. Moreover, the maternal mortality rate per 100 000 live births in 2007 was 49.9 and increased 3 fold in 2009.

In 2009, infant and under 5 mortality rates per 1000 live births increased to 42.2 and 29.9, respectively.

4.3. Secondary level medical service

By 2009, there was a total of 4506 health personnel, including 863 physicians, 1545 nurses and 2116 mid-level health staff; a total of 2531 health personnel, including 711 physicians, 727 nurses and 1035 mid-level health staff working in the working in the general hospitals of 17 aimags and district general hospitals of 9 aimags, respectively .

In 2001, the structure and activities of the aimag general hospital MNS 5095-2001 standard were approved. This standard is also followed by all district general hospitals.

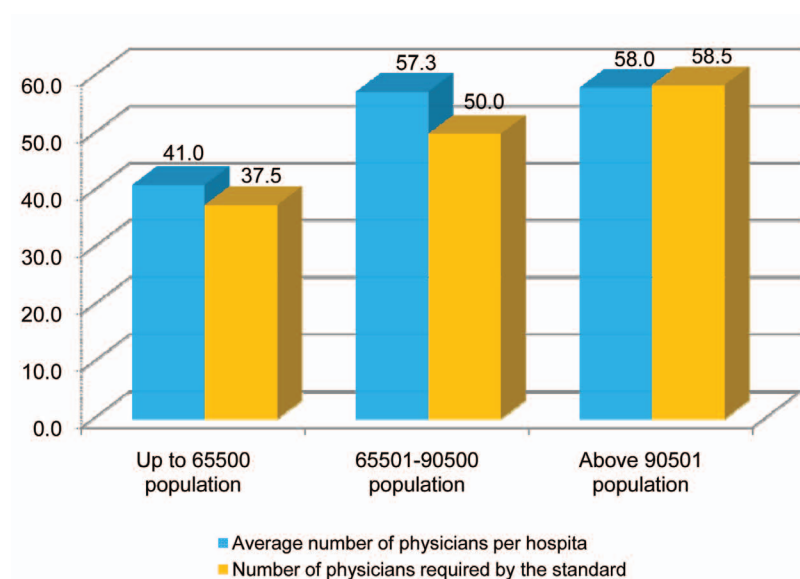
In this standard, the number of physicians is set according to local population levels. By 2009, 6 hospitals had not met the above standard. This accounts for 40 percent of all hospitals.

Table 4.3.1 Average number of physicians per aimag hospital compared to the numbers required by the Structure and Performance Standard, 2002

Population	Average number of physicians per hospital	Number of physicians required by the standard	Hosptais that meet the requirement		Hospitals failed to meet the standard	
			Number	Percentage	Number	Percentage
Up to 65500	41	37.5	5	71.4	2	28.6
65501-90500	57.3	50	4	66.6	2	33.3
Above 90501	58	58.5	2	50	2	50
Average	-	-	11	62.60%	6	37,4%

As indicated in the above table, aimags with a population of 65 500 and 65 501-90 501 have exceeded the number of physicians in general hospitals as indicated in the standard. But aimags with a population of 95 501 and above are in shortage of medical staff. Therefore, there is a need to review the standard on supply of physicians and other medical staff of the aimag general hospital.

Picture 4.3.1 Average number of physicians per aimag hospital compared to the numbers required by the Structure and Performance Standard, 2002



Aimag general hospitals accounted for 18 percent of the total hospital beds which is a result of the implementation of the policy to decrease aimag general hospital hospital beds.

As of 2009, the number of beds in aimag general hospitals had reached 3209 and followed by a decrease of 154 beds or 5.0 percent compared to 2007.

For the last few years no particular policy followed to reduce hospital beds, however district general hospital beds accounted for 8 percent of the reduction. In 2007, 58 thousand patients were treated in hospitals and 65 thousand in 2009, increasing the number of treated patients by 7 thousand people.

Pisture 4.3.2 Selected indicators for the secondary and tertiary level hospitals

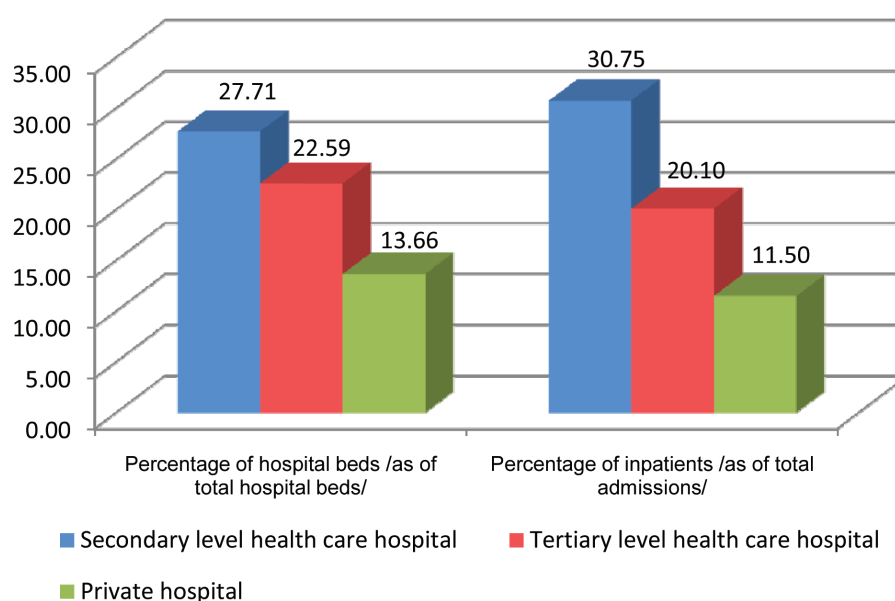


Table 4.3.2. Quality and accessibility indicators of health care and services in aimag and district general hospitals

Indicators	2007 year		2009 year		Average for the last 3 years	
	Aimag general hospital	District general hospital	Aimag general hospital	District general hospital	Aimag general hospital	District general hospital
Number of hospital beds	3363	1328	3209	1353	3307.7	1344.7
Number of physicians	838	697	863	711	877.3	709.3
Number of nurses	1525	661	1545	727	1529.7	694
Average length of stay	8.5	8.2	8.1	8	8.3	8.1
Number of in-patients	118 098	58 801	122 352	65 509	121 803	62 606
Number of out-patients	30.2		30.5	29.3	30.8	28.9
Percentage of preventive medical check-up	1 354 233	1 768 400	1 535 327	1 860 310	1 508 149	1 836 642
Number of visits per person per year	44.7	46.3	43.3	44.5	43.8	46.1
Percentage of en early antenatal care coverage	55.1	-	75.9	-	59.2	-
Maternal Mortality Ratio /per 100000 live births	21.2	-	17.2	-	18.2	-
Infant Mortality Rate /per 1000 live births	34.6	-	31.2	-	30.2	-

The average length of stay in aimag general hospitals was 8.5 days in 2007, however, this figure has since gone down to 8.1 days in 2009. The percentage of deaths occurring within 24 hours in aimag and district general hospitals was 30 percent which indicate nearly the same level during the 2007-2009 period.

The number of outpatients in aimag and district hospitals has increased from 1.3 million and 1.7 in 2007 to 1.5 million and 1.8 million in 2009, respectively. Although the percentage of preventive medical check ups decreased in aimag and district hospitals and remained at the same as level the last 3 years average.

For the last three years, 34.6% of in-patients treated in aimag general hospitals were referred from soum and inter-soum hospitals. In 2008, number inpatients treated in aimag general hospitals referred from soum and in soum hospitals were decreased by 5.1 percent compared to previous year.

In aimag general hospitals the infant mortality rate per 1000 live births has been consistently decreased in last 3 years and it has reached 18.2 in 2009.

The maternal mortality ratio per 100 000 live births has reached the lowest level (55.1-37.5) for the 2007-2008 year, however the MMR at aimag general hospitals has increased to 75.9 in 2009. Nationwide, 47 percent of maternal deaths in 2005 occurred in aimag general hospitals, unfortunately, this decreased by 36 percent in 2007, unlike the reduction of MMR that occurred in UB city.

In the last 3 years, the number of inpatients referred from soum and intersoum hospitals accounted for 31.2 percent of the total inpatients in aimag general hospitals. Compared to 2007, in 2009 the number of inpatients referred from soum and intersoum hospitals decreased by 3.4 percent.

4.4. Tertiary level medical services

Two of three regional diagnostic and treatment centers (RDTC) effectively functioning at the national level are situated in Dornod, Orkhon, Uvurkhangai, and Khovd aimags.

By 2009, a total of 1501 health personnel, including 282 physicians, 551 nurses, and 739 mid-level medical staff were working in three regional diagnostic and treatment centers (RDTC).

Picture 4.4.1 Quality and accessibility indicators of health care and services in RDTCs

Indicators	Years			Average for the last 3 years
	2007	2008	2009	
Number of hospital beds	1108	1108	1117	1111
Average length of stay	8.7	8.5	8.3	8.5
Percentage of death occurred within 24 hours	33.6	33.2	28.9	31.7
Number of in-patients	39 039	40 941	41 820	40 600
Number of out-patients	471 592	469 581	447 241	462 805
Maternal Mortality Ratio (per 100000 live births)	25.6	22.2	26.8	24.9
Infant Mortality Rate (per 1000 live births)	10.9	14.6	10.6	12.1
Number of in-patients referred from lower level of care	36	35.3	28.7	31.8

There were 39.0 thousand in-patients admitted to RDTCs in 2007 and 41.8 thousand, or an increase of 2800 patients, in 2009.

On average, 12000 patients have been treated annually at each RDTC referred from soum, inter-soum hospitals and regional aimags which account for 28.5 percent of the total in-patients. Likewise, on average 2300 in-patients were treated annually in each aimag general hospital referred from a lower level of care, whereas on average, 3200 in-patients, or about 900 more in-patients, were treated in the average RDTC.

The average length of stay at RDTCs decreased from 8.7 in 2007 to 8.3 in 2009. Moreover, the percentage of total deaths occurring in hospitals, within 24 hours of admission was 33.6 in 2006 and decreased to 28.9 in 2009.

Infant mortality rate per 1000 live births has been at a relatively low point at the national level and it has reached 12.1 for the period of 2007-2009 in RDTCs. There was one case of maternal death in Orkhon, Eberkhangai and Khovd aimags.

Major hospitals and specialized centers in UB city deliver tertiary health care and services. By 2009, a total of 5833 health professionals, including 1183 physicians, 1875 nurses, and 2384 mid-level staff were employed in 16 tertiary level hospitals and specialized centers.

One fourth of all hospital beds as well as one fifth, or 25.0 percent of in-patients were accounted for by tertiary level hospitals in UB city.

The average length of stay in tertiary level hospitals was 10.6 in 2007, while it has slightly decreased to 10.2 in 2009. Furthermore, the percentage of total in-hospital deaths occurring in less than 24 hours after admission increased from 22.4 in 2007 to 19.8 in 2009. The average over the last three years is 21.4 percent.

Table 4.4.2 Quality and accessibility indicators of health care and services in tertiary level hospitals in UB city

Indicators	Years			Average for the last 3 years
	2007	2008	2009	
Number of hospital beds	3970	3983	4005	3986
Number of physicians	1169	1232	1183	1195
Number of nurses	1790	1878	1875	1848
Average length of stay	10.6	10.5	10.2	10.4
Percentage of death occurred within 24 hours	22.4	21.9	19.8	21.4
Number of in-patients	125 850	128 873	131 068	128 597
Number of out-patients	1 050 966	1 116 979	1 191 925	1 119 957
Number of in-patients referred from lower level of care (from rural areas)	31,802	34,498	30,727	32,342

Annually, on average, 25.0-30.0 percent of approximately 128 thousand in-patients were referred to these hospitals from rural areas. Compared to 2007, in 2009 the total number of in-patients and in-patients from rural areas have increased by 13.4 and 3.3 percent, respectively.

Picture 4.4.1 Percentage of inpatients in specialized hospitals and centers referred by the low level hospitals

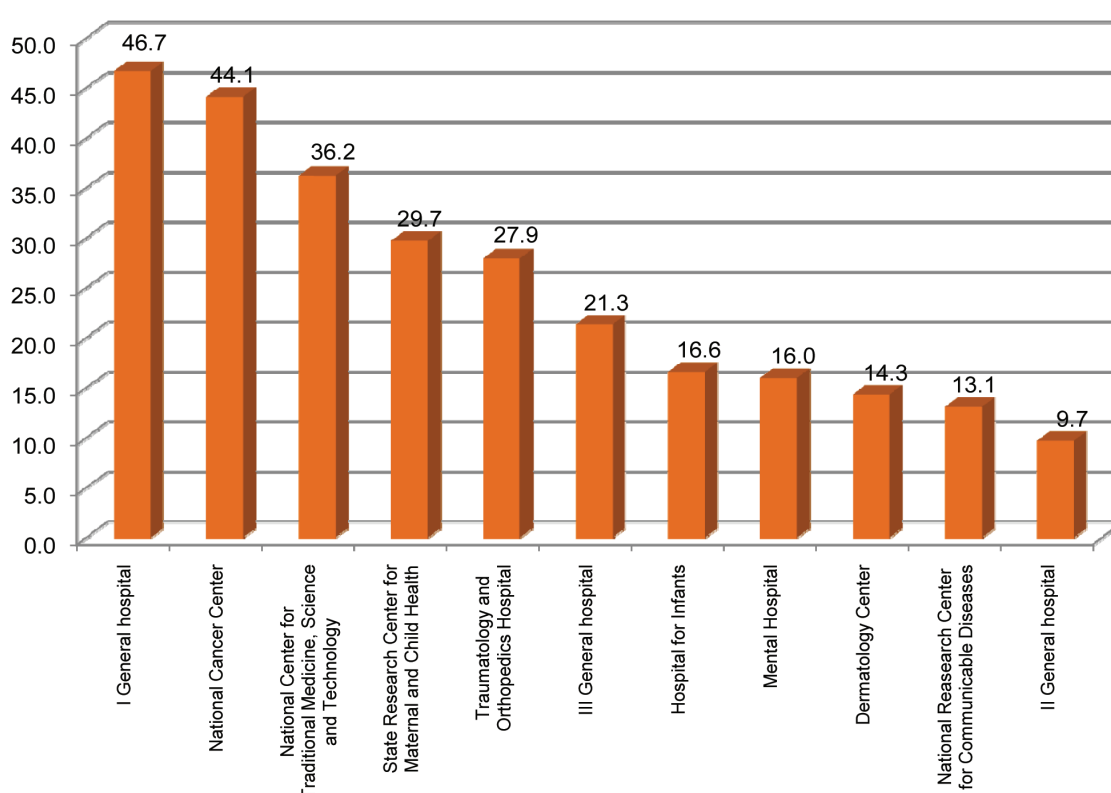


Table 4.4.3 Selected indicators for the tertiary level hospitals and centres

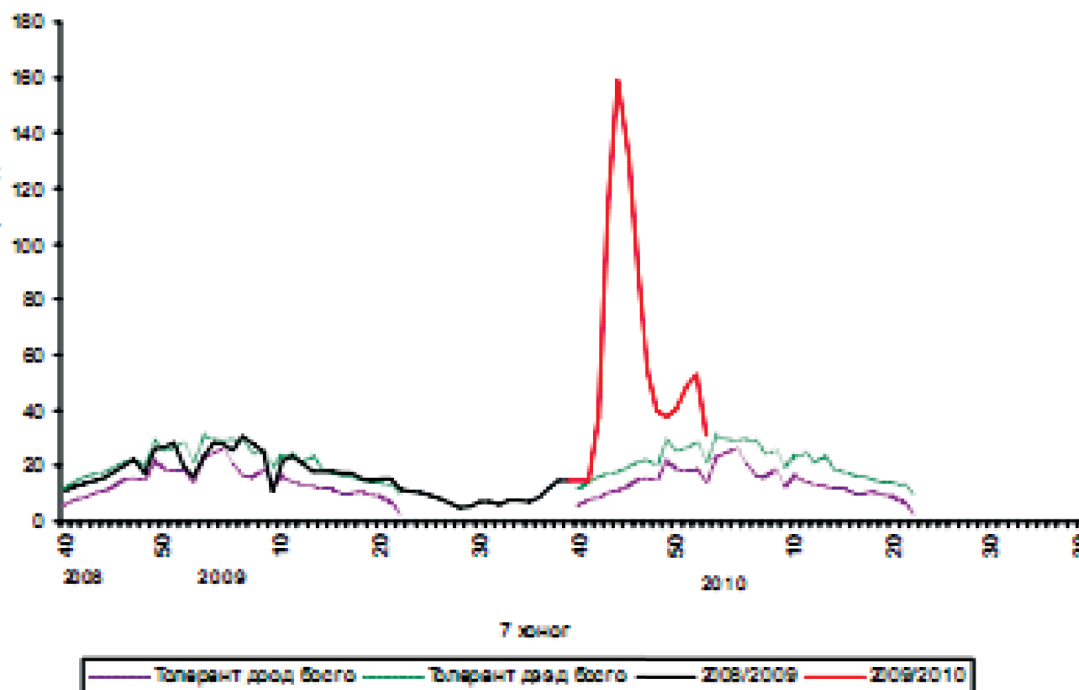
Hospitals	Number of Outpatient visits	Number of Hospital admissions	Average length of Hospital stay	Hospital death within 24 hours
I General Hospital	177361	20432	8,9	26,0
II General Hospital	96150	6786	9,1	20,0
III General Hospital	133686	15653	8,9	15,5
State Research Center for Maternal and Child Health	163399	33099	6,5	15,9
National Cancer Center	72007	6660	9,7	1,6
National Research Center for Communicable Diseases	104165	11043	15,0	17,3
Traumatology and Orthopedics Hospital	74626	11183	13,4	28,9
Dermatology Center	86975	4986	10,8	0,0
Mental Hospital	43460	5885	27,8	9,1
Hospital for Infants	-	314	8,0	-
National Center for Traditional Medicine, Science and Technology	20356	3305	9,8	-
Pathology and Forensic medicine	13808	-	-	-

CHAPTER 5. EPIDEMIOLOGY OF THE H1N1 HUMAN INFLUENZA

The first case of the H1N1 human influenza virus infection was registered on October 12, 2009. Consequently, Mongolia became the 197th country with an epidemic.

The exclusivity of the H1N1 human influenza first epidemic in Mongolia was associated with the epidemic of the seasonal flu. In 2009, weekly morbidity for the common flu increased significantly on the 42nd and 43rd week of the seasonal flu season and on the 44th week it reached its peak.

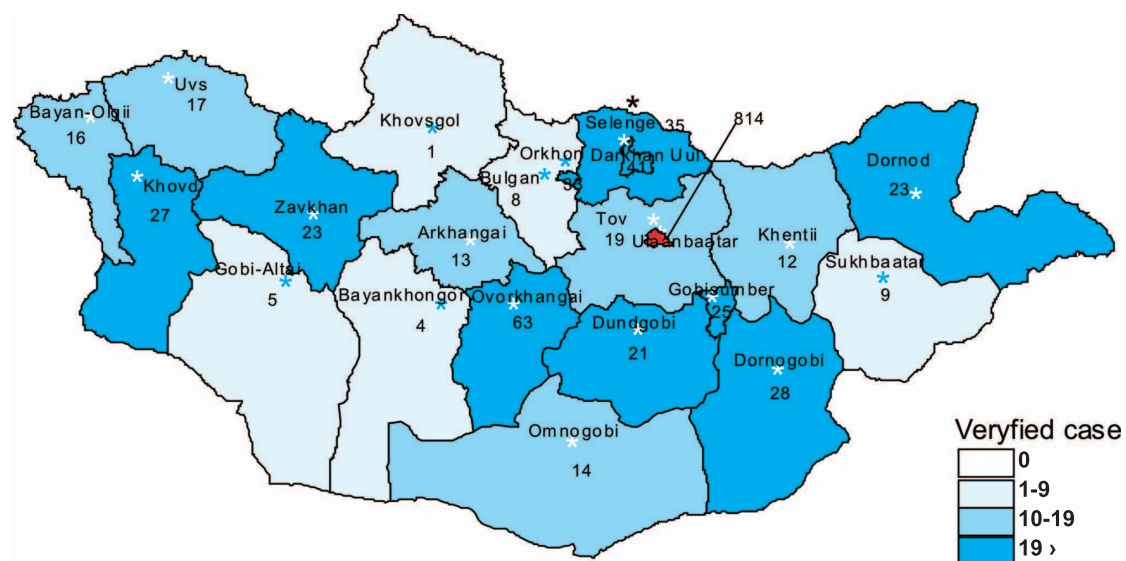
Picture 5.1.1 Registered seasonal flu morbidity rate per 10 000 population



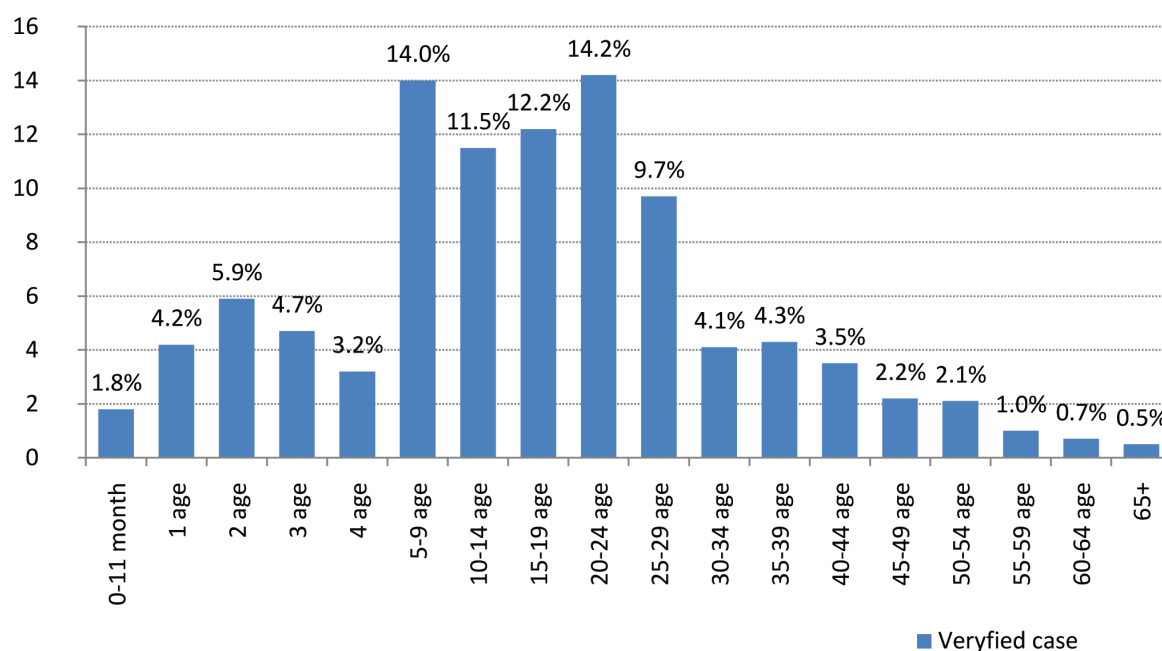
Эх сурвалж: ХӨСҮТ-ийн Томуу, томуу тест өвчний тандалт судалгааны албаны 2008, 2009 оны 7 хоногийн мэдээ

Between October 12, 2009 and January 3, 2010, 1251 laboratory confirmed cases of the H1N1 human influenza infection were registered nationwide. Out of all cases, 437 (34.9%) cases were registered in 21 aimags and 814 (65.1%) cases in Ulaanbaatar. Gender specifications of the registered cases were 664 (53.1%) females and 584 (46.7%) males.

A total of 13 cases in Arkhangai, 16 in Bayanulgi, 4 in Bayankhongor, 8 in Bulgan, 5 in Gobi Altai, 25 in Gobi Sumer, 41 in Darkhan Uul, 28 in Dornogobi, 23 in Dornod, 23 in Zavkhan, 33 in Orkhon, 63 in Uvurkhangai, 14 in Umnugobi, 9 in Sukhbaatar, 35 in Selenge, 19 in Tuv, 17 in Uvs, 27 in Khovd, 1 in Khuvsgul, 12 in Khenti and 814 laboratory confirmed cases were registered in Ulaanbaatar.

Picture 5.1.2 Laboratory confirmed H1N1 human influenza cases by aimags, 2009

Age group specifications were 248 (19.9%) among 0-4 year olds, 175 (23.7%) among 5-9 year olds, 296 (23.7%) among 10-19 year olds, 514 (41.2%) among 20-59 year olds and 15 (1.2%) among those aged 65 and over.

Picture 5.1.3 Laboratory confirmed H1N1 human influenza cases by age group, 2009

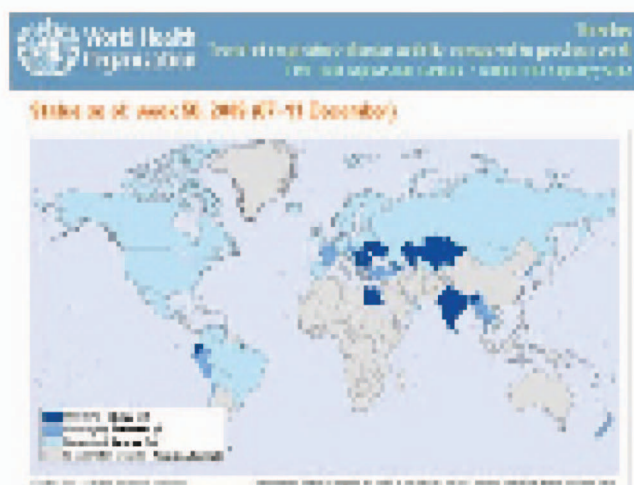
In Mongolia, the first laboratory confirmed (H1N1) A virus infection death was registered on October 21, 2009, 10 days after the first case was registered.

As of January 3, 2010 a total of 28 (H1N1) A virus deaths were registered; 14 in Ulaanbaatar, 5 in Uvurkhangaï, 2 in Dornodgobi and Umnugobi and 1 in Arkhangai, Bulgan, Sukhbaatar, Dundgobi and Bayanulgi.

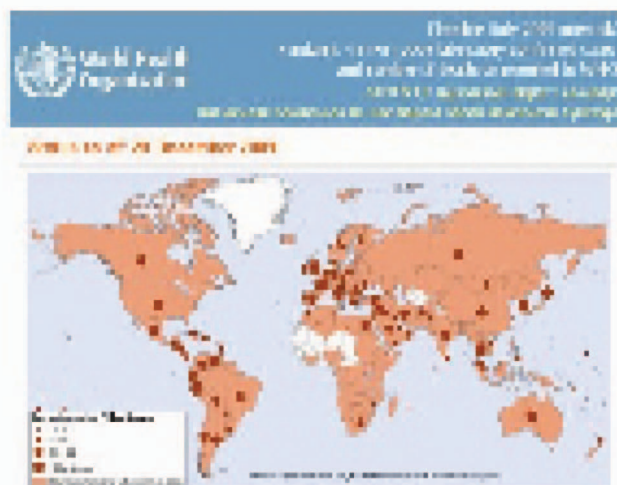
As of January 3, 2010 (H1N1) A virus mortality percentage was 2.2. No seasonal flu deaths were registered and the mortality percentage was as low as 0.01 in Mongolia for the last few years.

According to December 27, 2009 WHO records, 12220 deaths were registered in 208 countries with (H1N1) A virus infection. (Picture) The epidemic in the East Asian regions tends to be lower in Japan, North and South China, Taipei, Mongolia and Hong Kong but unfortunately in South Asian countries, such as, India, Bangladesh, and Sri Lanka, the epidemic tends to increase. (Picture)

Picture 5.1.4 World trend of seasonal influenza as of week 50, 2009



Picture 5.1.5 World Pandemic (H1N1) laboratory confirmed cases and deaths as reporting WHO, 2009



CHAPTER 6. COMMUNICABLE DISEASES

6.1 Total communicable diseases

In 2009, a total of 38859 cases of 35 different communicable diseases were reported in Mongolia, which was lower than in 2008 by 18.6 per 10000 population or 4934 cases.

In 2009, the incidence rate of communicable diseases in 21 aimags and UB city decreased except Orkhon and Bayankhongor aimags. There was an increase of 11.5 and 109.2 per 10 000 population in Orkhon and Bayankhongor aimags compared to the previous year.

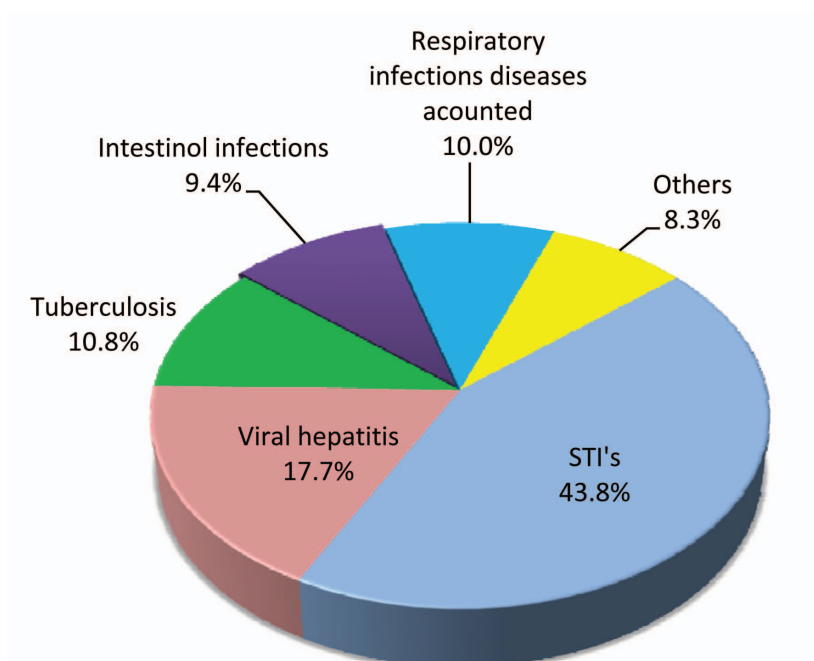
The incidence rate of the viral hepatitis A and the hand, foot and mouth disease decreased by 1.6- 13.3 cases per 10 000 population, which resulted in a decrease of the total registered communicable diseases per 10 000 population compared to the previous year.

6.1 Registered communicable diseases

The incidence of acute infectious diseases in Bayankhongor, Bulgan, Dornogobi, Dornod, Sukhbaatar, Khebsgel aimags and UB city were higher compared to the national average in previous and particular years. 47.7 percent of the total registered communicable disease were in Ulaanbaatar city.

As of 2009, STI's accounted for 43.8 percent, viral hepatitis 17.7 percent, tuberculosis 10.8 percent, intestinal infections 9.4 percent, respiratory infections diseases 10.0 and others 8.3 percent of the total registered communicable diseases.

Picture 6.1 Total registered infections diseases by percent, 2009



6.2 Intestinal Infections

There were 9543 cases of 7 different intestinal infections (such as, viral hepatitis A, typhoid fever, dysentery, salmonellosis, food poisoning and infectious diarrhoea) reported in 2009. These infections were 24.6 percent of all communicable diseases. 4546 cases or 47.6 percent of the total registered intestinal infections were in Ulaanbaatar city.

Among intestinal infections 61.7 percent viral hepatitis A, 32.5 percent shigellosis, 2.8 percent hand, foot and mouth disease, 1.3 percent foodborne infections, 1.3 percent salmonella, 0.5 percent diarrhoea infection, 0.07 percent typhoid fevers took place.

6.2.1 Viral Hepatitis

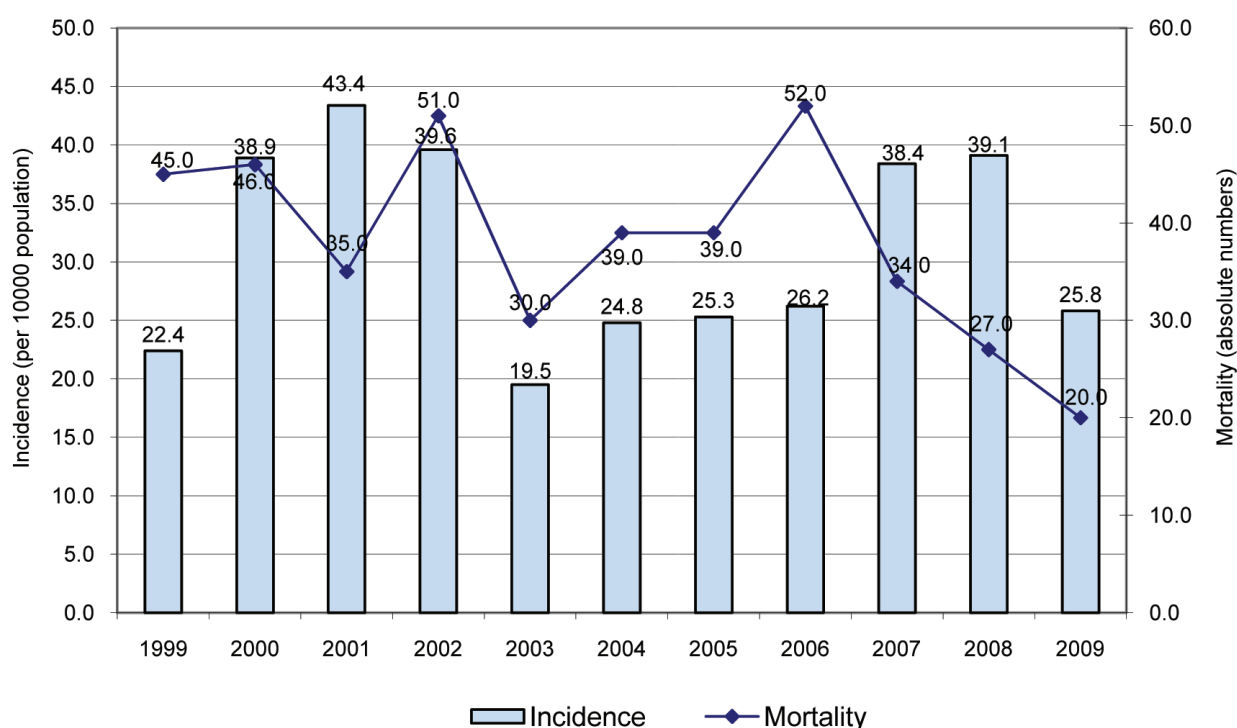
A total of 6865 cases of viral hepatitis were reported which comprised 17.2 percent of communicable diseases and was decreased by 3539 cases compared to the previous year. Viral hepatitis A, B and C were 85.7 percent, 10.9 percent and 1.9 percent of all intestinal infectious diseases.

The incidence rate of viral hepatitis per 10 000 population in Bayan-Ulgii, Bulgan, Dornogobi, Orkhon, Sukhbaatar, Khebsgel aimags were higher by 14.2-50.6 cases than national average rate. The viral hepatitis epidemic were reported in Sukhbaatar aimag (76.4 per 10000 population).

Hepatitis A were occurred among children 0-9 years old, hepatitis B were occurred in 15-29 age group, and hepatitis C occurred in 20-39 age group.

Hepatitis A occurred mostly frequently in 2-9 year old children, Hepatitis B in the 15-29 age group, and Hepatitis C in 20-44 year olds.

Picture 6.2.1 Viral hepatitis incidence and mortality trend, 1999-2009



6.2.2 Typhoid Fever

A total of 7 cases of typhoid fever were reported in 2009 and accounted for 0.02 percent of total registered communicable diseases. Out of them 3 cases were reported in Darkhan-Uul and 2 cases in Tuv and Ulaanbaatar city, respectively.

6.2.3 Other bacterial foodborne intoxications

As of 2009, a total of 92 cases of foodborne intoxications were reported and decreased by 715 cases compared to previous year. Food poisoning was reported in the following aimags: in Arkhangai (8 cases), Darkhan-Uul (12 cases), Dornod (5 cases), Uvurkhangai (4 cases), Khuvsgul (2 cases) aimags and Ulaanbaatar city (92 cases).

6.2.4 Diarrhoea infection

A total of 46 cases of diarrhoea infection were reported and there were no deaths due to any of the cases, 24 cases in Bayankhongor, 16 cases in Orkhon, 4 cases in Dornod, 2 cases in Darkhan-Uul aimags. Diarrhoea infection compared to 2008, by 10 cases number of disease increased and was 0.2 per 10000 population in 2009.

6.2.5 Dysentery

In 2009, a total of 3099 cases of dysentery were reported (11.7 per 10000) which was an increase by 746 cases compared from the previous year. The 76.8 percent of reported cases were in Ulaanbaatar.

The incidence rates of the disease in Gobi-Sumber, Dornogobi aimags and Ulaanbaatar were higher by 4.1-6.3 cases than the national average. The majority of dysentery cases were in children aged 0-4 years and comprised half all cases.

6.3 Respiratory Infections

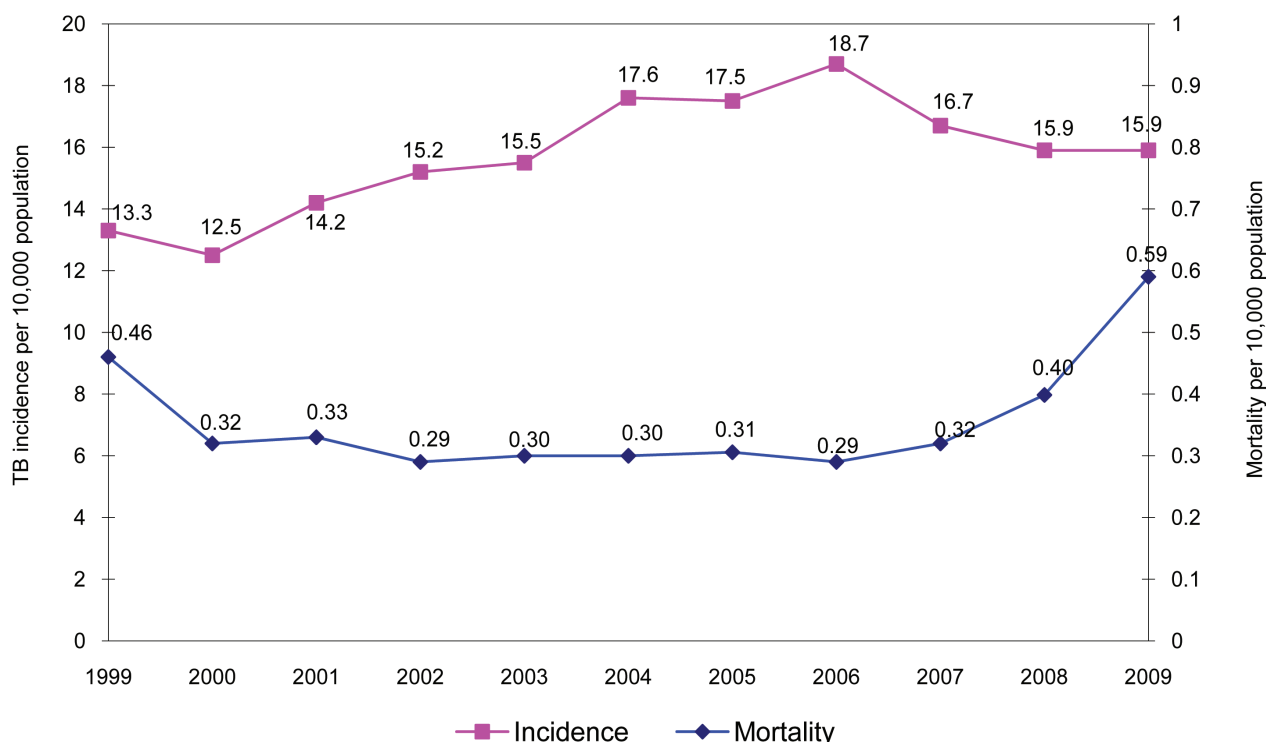
A total of 3892 cases of 9 different respiratory diseases were reported in 2009 which were 10.0 percent of the all infectious diseases. The majority were varicella 42.5 percent, and mumps 51.1 percent.

6.3.1 Tuberculosis

In 2009, 4218 new tuberculosis cases were reported and this was 10.9 percent of all infectious diseases. 2390 new cases (55.9%) were notified in the capital city of Ulaanbaatar and accounted for 56.7 percent of the total newly registered tuberculosis cases.

1809 new smear positive pulmonary tuberculosis cases were notified in 2009 and decreased by 29 cases compared with 2008.

60.1 percent of pulmonary tuberculosis, 39.9 percent extra pulmonary cases and childhood tuberculosis were 10.3 percent (436 cases) out of all notified new cases.

Picture 5.2 TB incidence and mortality trend (1999-2009)

71.4 percent of all new cases patients with 16-44 years old, male 50.9 percent, female 49.1 percent, sex ratio was 1:1.0

2.7 % were migrants from rural area and 1.2 % were homeless out of new notified cases in Ulaabaantar city.

In 2009 case detection rate was 74.1 % and cure rate 84.2%. Detection and cure rates decreased by 2.3 % and 0.8 % compared with 2008.

6.3.2 Meningococcal Infection

In 2009, a total of 38 cases were reported and the incidence rate was 0.1 per 10 000 population which decreased by 33 cases or 0.2 cases per 10 000 population. 28.9 percent of the total cases were reported in Ulaanbaatar.

The mortality rate of meningococcal infection ranked third place and comprised 7 percent of all infectious disease deaths which decreased by 7 deaths. A total of 4 cases of death due to meningococcal infection were reported only 2 cases in Umnugobi aimag, and 1 case in Ubs aimag and Ulaanbaatar city, respectively.

84.2 percent of the meningococcal infection cases occurred high in 0-19 agegroup compared to others. 52.6 percent were males and 47.4 percent females.

6.3.3 Mumps

There were a total of 1990 cases of the mumps (7.5 per 10000 population). Compared to the previous year, the incidence rate of mumps increased 1430 cases or 5.4 cases per 10 000 population. 72.1percent of the total cases reported in Ulaanbaatar city. There were no cases reported in Bayan-Ulgii and Khovd aimags.

The majority of mumps cases were children aged 2-19 years. There were 54.5 percent males and 45.5 percent females.

6.3.4 Varicella

There was a total of 1654 cases of varicella (6.2 per 10,000 population) reported in 2009, which was less than in the previous year by 407 cases.

Incidence of Varicella was higher than the national and last 5 years' average in Dornod (28.4), Dornogobi (12.7), Ubs (20.9) , Khovd (12.3) aimags.

6.3.5 Scarlet fever

In 2009, a total of 20 cases of scarlet fever (0.1 per 10000 population) reported and decreased by 2 cases than the previous year. There was 1 reported case in Darkhan-Uul, 2 cases in Khentii aimags and 16 cases in Ulaanbaatar city (0.2 per 10000 population), while no cases were in other aimags.

6.3.6 Rubella

In 2009, 9 cases of rubella (0.03 per 10000 population) reported in 5 aimags and Ulaanbaatar city and decreased by 158 cases . The rubelle were reported in Bulgan (1case), Darkhan-Uul (case10, Dundgobi (2 cases), Zabkhan(1 case), Uberkhngai (1 case) aimags and Ulaanbaatar (3cases) city while no cases were in other aimags.

6.4 Sexually Transmitted Infections

A total of 17029 cases of 3 different sexually transmitted infections (STIs) were reported and comprised 43.8 percent of all reported communicable diseases, which was lower than in the previous year by 619 cases. Trichomoniasis, gonorrhea and syphilis accounted for 33.9, 23.9, and 28.8 percent of all reported STIs, respectively. The incidence rate of syphilis, trichomoniasis decreased by 0.2-2.9 and gonorrhea decreased by 0.8 , and it was 18.5, 21.7 and 23.9 per 10000 population, respectively.

In 2009, a total of 19 cases of congenital syphilis were reported. It was increased by 2 cases compared to 2008. Congenital syphilis was reported in the following aimags such as in Uberkhngai (7 cases), Orkhon (4cases), Dornogobi (3cases), Bayankhongor (1cass) and Ulaanbaatar city (4cases).

As of 2009, a total of 13 cases of HIV have been reported in Ulaanbaatar among the age group of 15-44 years old.

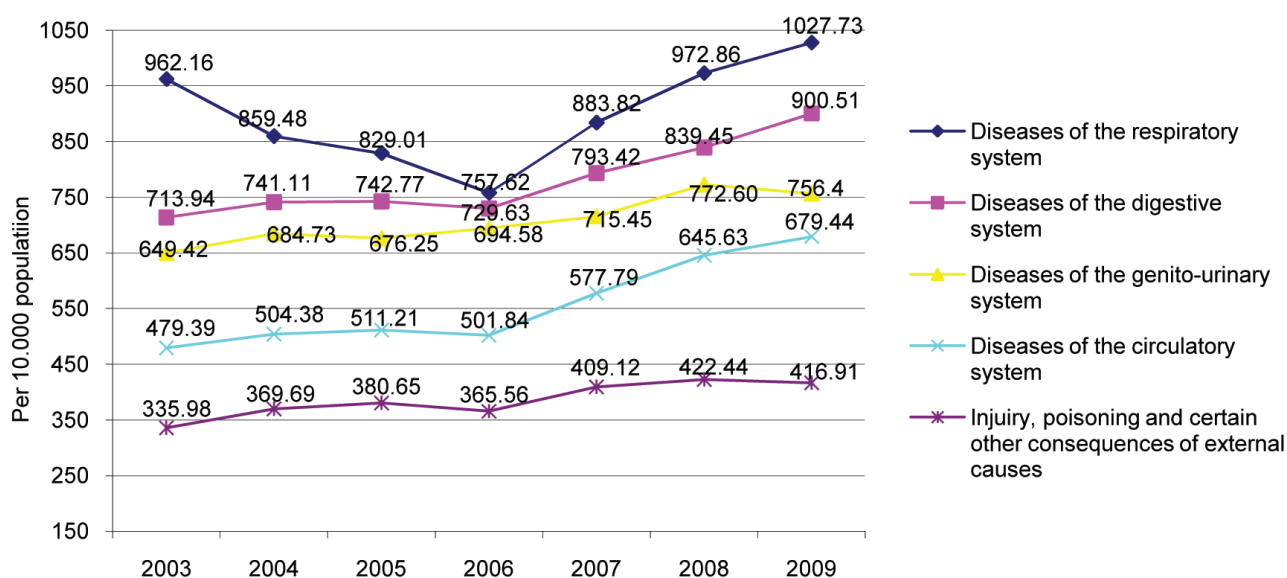
In 2009, a total of 70867 health screenings were conducted among pregnant women, 1423 (2.0 %) were with syphilis; 837 (1.2%) were with gonorrhea; 1508 (2.1%) were with trichomoniasis.

CHAPTER 7. NON-COMMUNICABLE DISEASES

7.1 Outpatient Morbidity

Due to transitions in surveillance, changes have taken place with regard to population morbidity and mortality rates since 1990. Consequently, circulatory system diseases, now called “life style and behaviour dependent diseases”, cancer, and injuries causing morbidity have become the leading causes of morbidity and mortality.

Picture 7.1.1 Five leading causes of the outpatient morbidity, 2009



As of 2009, the rates of diseases of the respiratory, digestive, genito-urinary and circulatory systems, and injuries and poisoning were 1027.73, 900.51, 756.40, 679.44 and 416.91 per 10000 population respectively. This is a 25-40 percent increase compared to 2000.

The above-mentioned diseases have been persistently increasing for the last 5 years. The following were the leading causes of population morbidity in 2009:

- Diseases of the respiratory system – 1027.73 per 10,000population
- Diseases of the digestive system – 900.51 per 10,000population
- Diseases of the genitourinary system – 756.40 per 10,000population
- Diseases of the circulatory system – 679.44 per 10,000population
- Injuries and poisoning - 416.91 per 10,000 population

When the incidence of the five leading causes of population morbidity was stratified by the place of residence (urban vs. rural), the overall morbidity was higher in urban settings. For instance, the incidence of diseases of the respiratory system were 860.15, 836.66 per 10.000 in the urban population and 1140.85,per 10.000 in the rural population and the incidence of diseases of the digestive system were 880.07per 10.000 in the urban population and 914.30 per 10.000 in the rural population. The respective rates for diseases of the genitourinary system were 631.00, and 841.05. Similarly, the incidence rates of diseases of the circulatory system in urban and rural areas were 679.77and 679.21, respectively.

Table 7.1.1 Five leading causes of the outpatient morbidity, 2009

	All causes	Diseases of the respiratory system	Diseases of the digestive system	Diseases of the genitourinary system	Diseases of the circulatory system	Injury, poisoning and certain other consequences of external causes
Gender						
Male	4700.35	987.19	745.77	352.91	527.84	545.00
Female	7219.42	1066.45	1048.31	1141.80	824.24	294.56
Age group						
Up to 20	4555.52	1785.21	765.06	248.39	50.33	324.70
20-44	5528.01	473.29	719.77	1021.19	377.71	497.00
45-65	9116.25	69.15	1524.37	1196.18	2088.00	448.46
Above 65	13663.93	1129.49	1914.84	1226.40	4706.02	378.78
Residence						
Urban	6600.99	860.15	880.07	631.00	679.77	763.31
Rural	5575.45	1140.85	914.30	841.05	679.21	183.07
Region						
Western region	4648.68	958.14	726.91	792.45	585.88	115.57
Khangai region	5738.44	1057.13	939.42	896.32	738.16	171.28
Central region	6342.08	1448.23	1001.75	902.86	819.87	299.73
Eastern region	5981.71	1373.92	1124.07	694.7	500.30	230.82
Total	5988.75	1027.73	900.51	756.40	679.44	416.91

Source: NSO, by region, aimags and the Capital

Western region aimags: Bayan-Ulgii, Gobi-Altai, Zavkhan, Uvs, Khovd

Khangai-Gobi region aimags: Arkhangai, Bayankhongor, Bulgan, Uvurkhangai, Khuvsgul, Orkhon

Central region aimags: Dornogobi, Dundgobi, Umnugobi, Selenge, Darkhan-Uul, Tuv, Gobi-sumber

Eastern region aimags: Dornod, Sukhbaatar, Khentii

In comparison to females, males received out-patient services 1.5 times more frequently, whereby females accounted for more outpatient care and services. Outpatient morbidity rate due to injuries, poisoning and other externally caused diseases were 2 times higher for males in comparison to females. However, for other diseases were 1.5-3.0 times lower for males than females.

The incidence rates of the 3 leading causes of morbidity by region were as follows: Western Region - diseases of the respiratory system (958.14), genitourinary system (792.45) and digestive system (726.91); Khangai-gobi Region - diseases of the genitourinary system (896.32), diseases of the respiratory system (1057.13), and digestive system (939.42); Central and Eastern Regions respectively - diseases of the respiratory system (1284.48 6a 1197.27), diseases of the digestive system (918.17 6a 1002.81) and diseases of the genitourinary system (883.63 6a 658.02).

Compared to other regions, the incidence rates of diseases of the respiratory system were highest in the central and eastern regions, rates of diseases of the genitourinary system were highest in the western, khangai-gobi and central regions, rates of diseases of the circulatory system were highest in the central and khangai-gobi regions, and rates of injuries and poisonings were highest in the central and eastern regions.

As of 2009, the following were the five leading causes of inpatient morbidity:

- ◆ Diseases of the respiratory system - 338.14per 10,000 populations
- ◆ Diseases of the digestive system - 337.26 per 10,000 populations
- ◆ Diseases of the circulatory system - 328.28 per 10,000 populations
- ◆ Diseases of the genitourinary system - 312.12 per 10,000 populations
- ◆ Diseases of the nervous system - 175.20per 10,000 populations

Table: 7.1.2 Five leading causes of the inpatient morbidity, 2009

	All causes	Diseases of the respiratory system	Diseases of the digestive system	Diseases of the genitourinary system	Diseases of the circulatory system	Diseases of the nervous system
Gender						
Male	1761.36	344.72	305.61	166.80	269.37	161.27
Female	3003.19	331.85	367.50	450.93	384.56	188.52
Age group						
Up to 20	1528.94	603.44	241.72	111.30	25.09	90.21
20-44	2358.39	129.49	267.64	380.73	153.97	160.90
45-65	3618.33	223.77	634.12	523.89	986.23	354.15
Above 65	6798.23	511.08	927.25	741.47	2650.83	492.61
Residence						
Urban	2672.55	329.21	398.07	268.63	347.36	204.62
Rural	2210.16	344.16	296.22	341.48	315.40	155.34
Region						
Western region	2352.00	368.39	331.44	392.88	330.36	150.47
Khangai region	2117.37	277.96	290.61	336.81	331.26	146.93
Central region	2302.43	398.35	291.52	333.59	348.50	151.82
Eastern region	2309.21	398.86	309.70	285.69	257.24	156.31
Total	2396.50	338.14	337.26	312.12	328.28	175.20

Hospital admission rates were 1761.36 per 10 000 in males and 3003.19 per 10 000 in females. In other words one third of the inpatients were males. Inpatient admission rates per 10 000 people were 1.5 times higher in males than females.

Table 7.1.3 Inpatient Morbidity per 10 000 population, 2009

Disease classification	Soum population morbidity	Aimag population morbidity	UB population morbidity	Total
Diseases of the genitourinary system	314.61	383.81	263.71	312.12
Diseases of the respiratory system	290.64	431.92	323.19	338.14
Diseases of the digestive system	182.49	486.81	390.79	337.26
Diseases of the circulatory system	262.93	401.45	341.01	328.28
Diseases of the nervous system	73.32	293.39	200.88	175.20
Injury, poisoning and certain other consequences of external causes	34.00	134.42	125.04	93.97
Infectious and parasitic diseases	28.81	157.25	88.33	82.01
Diseases of the musculoskeletal system and connective tissue	51.85	110.24	93.61	82.44
Diseases of the skin and subcutaneous tissue	41.64	102.27	71.02	67.55
Mental and behavioural disorders	9.22	69.34	55.99	41.84
Neoplasms	13.47	47.42	88.44	51.91
Diseases of the eye and adnexa	2.00	36.97	49.64	29.34
Endocrine, nutritional and metabolic diseases	12.13	28.44	28.67	22.66
Diseases of the ear and mastoid process	9.10	26.04	18.36	16.74
Other	200.66	677.39	484.98	417.04
All causes	1505.65	3387.17	2623.67	2396.50

There were differences in the leading causes of hospital admissions between urban and rural settings. For instance, the predominant causes of hospitalization in soum and aimag hospitals were diseases of the genitourinary and digestive systems. In contrast, the residents of Ulaanbaatar were mainly admitted because of diseases of the digestive and circulatory systems.

As of 2009, the 5 leading causes of hospitalization were as follows: of hospitalized patients with diseases of the genitourinary system, 66.6 percent had nephritis; 38.3 percent of patients with diseases of the respiratory system suffered from pneumonia; 25.7 percent of those with diseases of the digestive system had liver problems; and 34.4 and 29.5 percent of patients with diseases of the circulatory system suffered from hypertension and ischemic heart diseases.

Nephritis accounted for 56.7 percent of diseases of the genitourinary system in 2000. This percentage increased to 65.4 in 2004 and 66.6 (or an increase of 10.0 percent) in 2009 compared to 2000.

Table 7.1.4 Inpatient Morbidity by percentage, 2009

Diseases classification	Leading cause	Percent of total									
		2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
Diseases of the genitourinary system	Pyelonephritis (N10-N16)	56.70	55.76	59.03	63.14	65.41	69.06	69.7	67.8	69.1	66.6
Diseases of the respiratory system	Pneumonia (J12-J18)	46.75	42.69	41.01	42.67	43.24	39.83	38.6	40.5	41.9	38.8
Diseases of the digestive system	Liver diseases (K70.K73. K74.K71-K73. K75-K77)	18.90	19.30	21.52	21.82	23.73	25.66	24.9	25.1	25.6	25.7
	Appendicitis (K35-K38)	26.57	24.33	22.22	22.66	21.43	20.22	19.4	18.6	17.0	16.9
	Diseases of gallbladder (K80-K81)	14.64	14.50	14.92	16.45	15.84	15.57	15.3	13.97	13.7	14.2
Diseases of the circulatory system	Hypertensive diseases (I10.I11-I15)	34.66	34.66	34.44	32.64	32.3	31.30	32.6	32.1	33.2	34.4
	Ischemic heart diseases (I20.I23-I25)	19.19	20.29	20.91	23.46	25.73	26.28	26.3	29.3	30.1	29.5
Diseases of the nervous system	Disorders of neural radices and plexuses (G50-59)	18.09	19.21	19.71	20.92	20.5	23.40	21.7	22.1	24.3	26.0
	Epilepsy (G40-G41)	11.69	10.78	11.35	12.63	12.99	12.35	12.5	11.7	11.2	10.9

Pneumonia accounted for 46.7 percent of diseases of the respiratory system in 2000. This percentage went down to 43.2 in 2004 and 38.8 in 2009, a decrease of 8.0 percent compared to 2000.

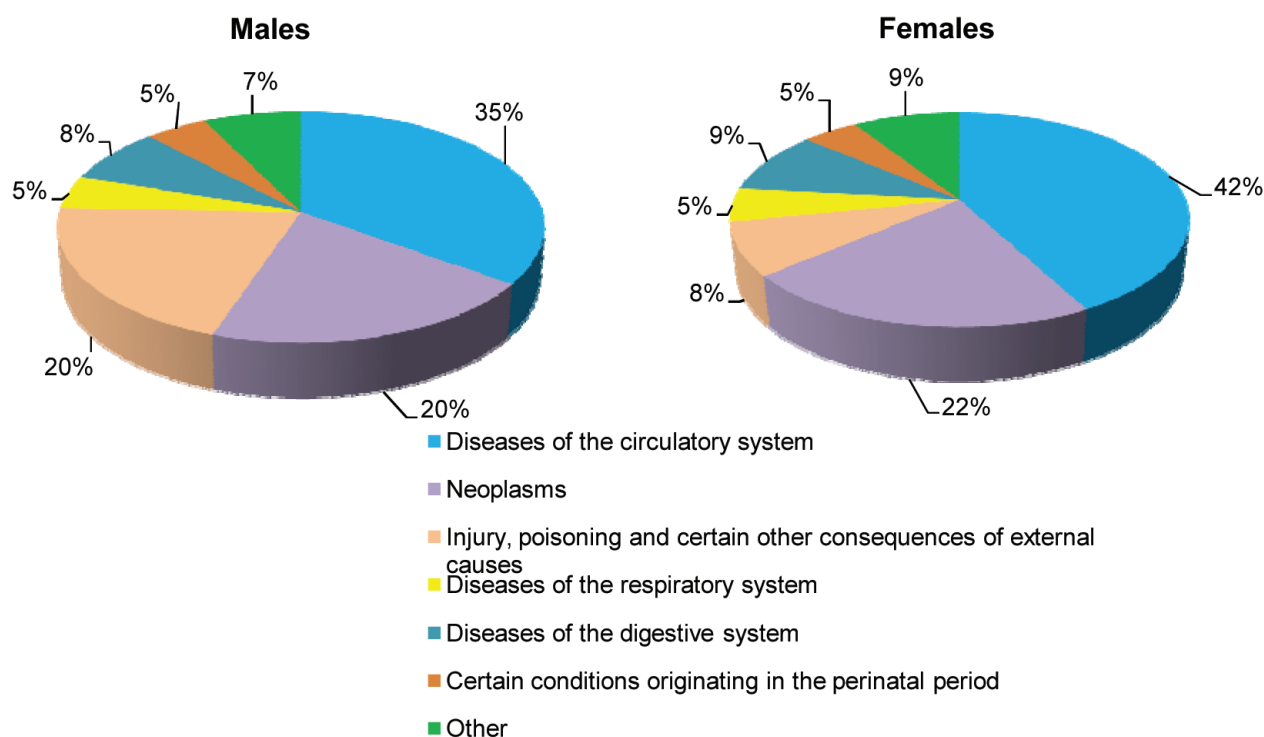
In 2000, liver problems and cholecystitis accounted for 18.9 and 14.6 percent of diseases of the digestive system, respectively. These figures increased to 25.7 and decreased 16.9 percent in 2009. Meanwhile, appendicitis accounted for 26.6 percent of diseases of the digestive system in 2000. This percentage decreased to 21.4 in 2004 and to 16.9 in 2009.

Ischemic heart diseases accounted for 19.2 percent of diseases of the circulatory system in 2000, 25.7 percent in 2004 and 29.5 percent in 2009, a 10.9 percent increase compared to 2000.

CHAPTER 8. POPULATION MORTALITY

Diseases of the circulatory system, neoplasms and injuries remain the leading causes of population mortality since 1995 and the number of deaths due to these diseases has been increasing every year.

Picture 8.1 Leading causes of mortality by sex, 2009



In 2009, disease of the circulatory system accounted for 38.0 percent, cancer and injuries and poisoning accounted for 20.8 and 15.2 percent of the population mortality causes, respectively. In other words, above mentioned leading three causes of the population mortality accounted for 75 percent of the total deaths.

On average, every year 5500 persons or one third all deaths were due to diseases of the circulatory system, 3200 persons or one in five deaths from cancer and 2300 persons or one in seven deaths from injury and poisoning.

The following were the leading causes of population mortality in 2009:

- ◆ Diseases of the circulatory system - 21.74 per 10,000 population
- ◆ Neoplasms - 11.89 per 10,000 population
- ◆ Injuries and poisoning - 8.71 per 10,000 population
- ◆ Diseases of the digestive system - 4.84 per 10,000 population
- ◆ Certain conditions originating in the perinatal period - 2.78 per 10,000 population

Mortality rates were 69.11 per 10 000 in males and 45.99 per 10 000 in females.

In 2008, WHO announced that by 2030 the following 5 diseases will be the leading causes of mortality in the world: ischemic heart disease, brain vascular disease (stroke), chronic obstructive pulmonary disease, respiratory infections and traffic injuries. (Table 8.3)

Table 8.1 Five leading causes of the mortality, 2009

Indicators	Total death	Diseases of the circulatory system	Neoplasms	Injury, poisoning and certain other consequences of external causes	Diseases of the digestive system	Diseases of the respiratory system
Gender						
Male	69.11	24.19	13.95	14.01	5.35	3.23
Female	45.99	19.41	9.92	3.65	4.36	2.34
Age group						
Up to 20	19.99	0.27	0.41	3.93	0.93	3.78
20-44	25.01	5.01	2.71	11.08	2.04	0.82
45-65	116.08	48.25	32.28	14.42	12.31	2.64
Above 65	540.88	306.10	143.63	8.96	44.43	14.81
Residence						
Urban	58.85	18.60	12.55	11.69	5.27	2.46
Rural	56.23	23.87	11.44	6.70	4.56	2.99
Region						
Western region	56.11	23.97	11.91	5.48	4.12	4.53
Khangai region	58.28	26.21	11.05	7.66	4.06	2.45
Central region	52.27	21.22	10.34	7.63	4.73	1.91
Eastern region	57.73	19.78	13.77	6.22	7.36	2.80
Total	57.28	21.74	11.89	8.71	4.84	2.78

8.1 Mortality due to Cardiovascular diseases

Cardiovascular disease remains the leading cause of population mortality in Mongolia. One in three people or approximately 5500-6000 people die every year.

In 2009, cardiovascular mortality rates were 24.19 per 10 000 males and 19.41 per 10 000 females. The highest mortality rates were among people aged 65 years or older and there was a sharp increase among 45-65 year olds. (Table 8.1)

The cardiovascular mortality rate was highest in khangai and western regions, and lowest in eastern aimags.

The main causes of mortality compared by gender and by age group are: Ischemic heart disease (24.69), stroke (29.38) and hypertension (4.11) per 10 000 in males aged 45-65. Ischemic heart disease is 3 times higher, hypertension is 1.8 times higher and stroke is 1.5 times higher in men when compared to women of the same age group. (Table 8.2)

In 2009, the ischemic heart disease mortality rate was 8.7 per 10 000 and remains the leading cause of death among the male population in Mongolia.

In 2008, mortality rates of ischemic heart disease and stroke were in close proximity but in 2008, ischemic heart disease mortality rate is higher.

In 2004, ischemic heart disease accounted for 12.2 percent of all deaths and is the leading cause of mortality in the world. WHO predicts that by 2030 ischemic heart disease will account for 14.2 percent of all deaths and will remain the leading cause of mortality (Table 8.3)

Table 8.1.1 Cause-specific cardiovascular disease mortality rates by age group /per 10 000 population/

	Diseases of the circulatory system	Cerebral infarction	Hypertensive diseases	Ischemic heart diseases
Total death	21.74	8.65	1.38	8.72
Up to 20	0.27	0.03	0.01	0.06
20-44	5.01	1.85	0.23	1.93
45-64	48.25	23.89	3.29	15.92
Above 65	306.10	106.79	19.66	136.59
Male	24.31	9.32	1.49	10.39
Up to 20	0.29	0.04	0.02	0.08
20-44	6.48	2.13	0.23	2.90
45-64	64.92	29.38	4.11	24.69
Above 65	335.61	115.73	21.92	154.73
Female	19.53	8.10	1.29	7.21
Up to 20	0.26	0.02	0.00	0.04
20-44	3.64	1.59	0.22	1.02
45-65	33.29	18.96	2.55	8.04
Above 65	283.50	99.93	17.92	122.70

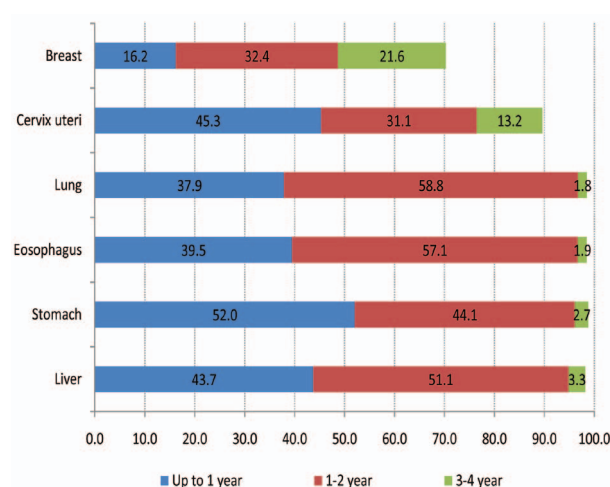
8.2 Cancer mortality

Since 1990, cancer remains the second leading cause of population mortality in Mongolia. In 2009, cancer related mortality rates were 13.95 per 10 000 in males and 9.92 per 10 000 in females.

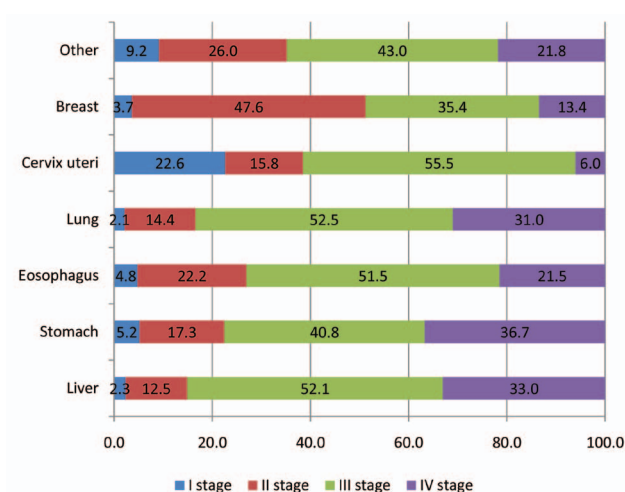
The leading causes of cancer in males in Mongolia are, in order of importance: liver, stomach, lung, esophagus, and prostate. The leading cause of cancer in females are liver, cervical, uterine, stomach, esophagus and lung.

In 2009, the overwhelming majority (76.9%) of new cancer cases were diagnosed in late stages (III and IV) of the disease, and 43.8 percent of cancer cases survived for less than a year after the diagnosis.

Picture 8.2.1 Leading causes of cancer mortality by survival years after the diagnosis



Picture 8.2.2 Leading causes of cancer morbidity by the stage of the diagnosis



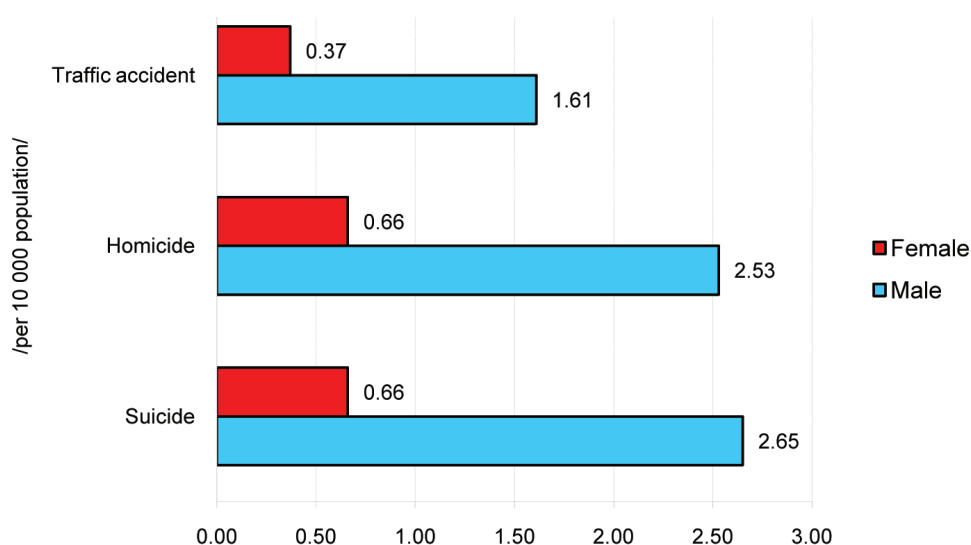
8.3 Mortality due to injuries and poisoning and certain other consequences of external causes

Mortality due to injuries and poisoning has increased sharply within the last few years. It was ranked as the fifth leading cause of population mortality in 1990, moved up to fourth place in 1994 and has been ranked third since 2000.

Moreover, mortality rate due to injuries and poisoning was 6.0, 7.6 and 11.69 in 1995, 2000 and 2007 and 2 times higher than in 2000. Although, the mortality rate due to injuries and poisoning decreased to 9.33 and 8.72 per 10000 populations in 2008 and 2009 which was the lowest rate in the last 10 years.

The main cause of age specific mortality rates for males between 20-44 years of age were injuries and certain other consequences of external caused diseases. The mortality rate in this group was 11.08 per 10,000 people.

Picture 8.5. Injury, poisoning and certain other consequences of external causes per 10000 population, 2009



Mortality due to traffic accidents, suicide and homicide accounted for 18.1, 18.8 and 11.4 percent of injury mortality, respectively. Other types of injuries comprised 52.0 percent of mortality due to injuries.

In comparison with women, per 10 000 people suicide rates are 4 times higher for men, homicide rates by 4.4 times, and traffic accident rates by 3.8 times.

Table 8.2.1 The projection of mortality of world population, 2030

2004 Disease or injure	Deaths (%)	Rank	Rank	Deaths (%)	2030 Disease or injure
Ishaemic heart diseases	12.2	1	1	14.2	Ishaemic heart diseases
Cerebrovascular diseases	9.7	2	2	12.1	Cerebrovascular diseases
Lower respiratory infections	7	3	3	8.6	Chronic obstructive pulmonary diseases
Chronic obstructive pulmonary diseases	5.1	4	4	3.8	Lower respiratory infections
Diarrhoeal diseases	3.6	5	5	3.6	Road traffic accidents
HIV/AIDS	3.5	6	6	3.4	Trachea, bronchus, lung cancers
Tuberculosis	2.5	7	7	3.3	Diabetes mellitus
Trachea, bronchus, lung cancers	2.3	8	8	2.1	Hypertensive heart diseases
Road traffic accidents	2.2	9	9	1.9	Stomach cancer
Prematurity and low birth weight	2	10	10	1.8	HIV/AIDS
Neonatal infections and other	1.9	11	11	1.6	Nephritis and nephrosis
Diabetes mellitus	1.9	12	12	1.5	Self-inficted injures
Malaria	1.7	13	13	1.4	Liver cancer
Hypertensive heart disease	1.7	14	14	1.4	Colon and rectum cancers
Birth asphyxia and birth trauma	1.5	15	15	1.3	Oesophagus cancer
Self-inficted injures	1.4	16	16	1.2	Violence
Stomach cancer	1.4	17	17	1.2	Alzheimer's disease
Cirrhosis of the liver	1.3	18	18	1.2	Cirrhosis of the liver
Nephritis and nephrosis	1.3	19	19	1.1	Breast cancer
Colon and rectum cancers	1.1	20	20	1	Tuberculosis
Violence	1	21	21	0.9	Neonatal infections and other
Breast cancer	0.9	22	22	0.9	Prematurity and low birth weight
Oesophagus cancer	0.9	23	23	0.7	Birth asphyxia and birth trauma
Alzheimer's disease	0.8	24	24	0.4	Malaria

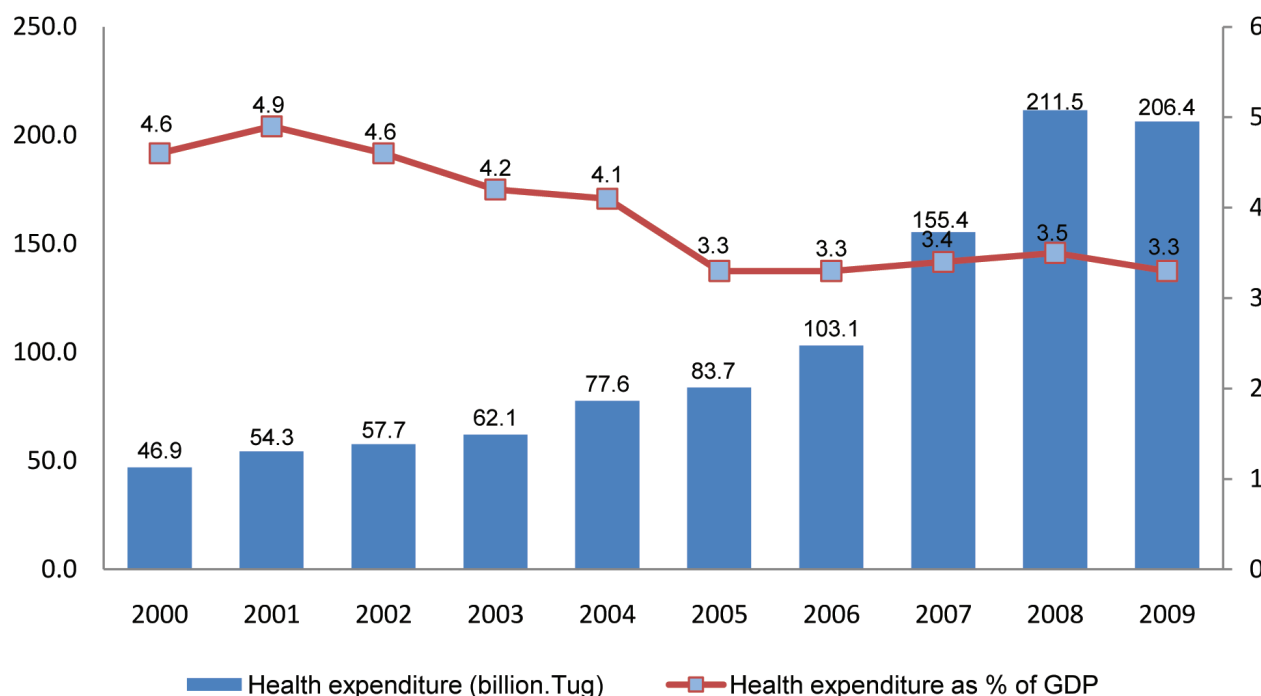
Source: WHO, 2008

CHAPTER 9. HEALTH FINANCING INDICATORS

9.1. Main health financing indicators¹

Health finance indicators were presented within the health package of the Minister of Health. Actual health indicators for the period 2000-2009 were calculated by expenditure.

Picture 9.1.1 Health expenditure as percent of GDP



Source: Finance and Investment Division of MOH in 2009

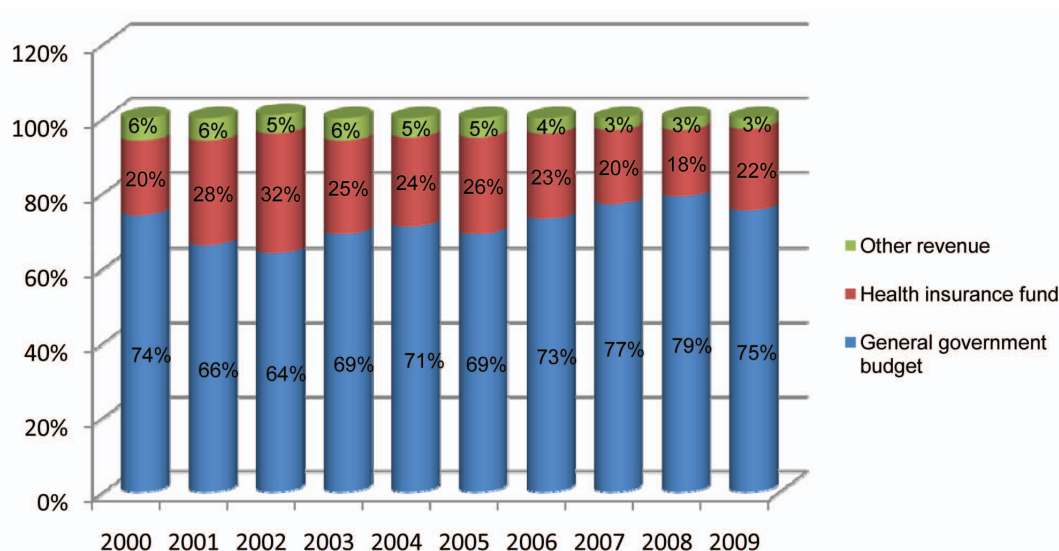
In comparison to last year the budget package of the Health Minister's expenditures has decreased by 2.4 percent and the budget by 3.5 percent.

Total health expenditure in GDP decreased by 0.2 percent.

The 2009 Health Minister's budget package by category: 44.9 percent of the total expenses for salary, 15.7 percent for drugs and food expenses; 10.0 percent for investment; 7.3 percent for utilization and regular expenses; 22.1 percent for stationary, transport, appointments and postal expenses.

When the above expenses were compared to 2008, services and other expenditures decreased by 22.2 percent, as well as, salary by 0.3 percent. Regular expenses increased by 0.9 percent, followed by an increase in investment by 30.7 percent, drug expenses by 9.1 percent and food expenses by 18.9 percent.

¹ Calculated by Health Minister Package

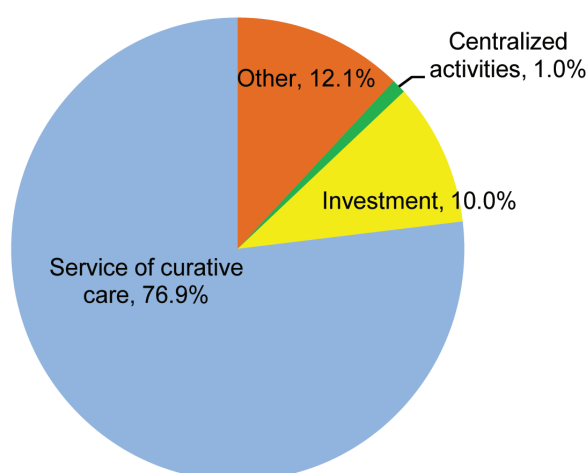
Picture 9.1.2 Source of financing of health expenditure (percent)

Source: Finance and Investment Division of MOH in 2009

From Picture 9.1.2 you will see that total health expenses increased by 4.0 percent and financing decreased by 3.7 percent in Health Insurance. The budget financing decreased due to the decline in the economy during 2009.

Compared to last year, in 2009 Health Insurance financing increased by 17.9 percent and the following areas also increased: state budget financing by 7.9 percent, paid service and other income by 8.9 percent.

See attachment for financing sum by sources.

Picture 9.1.3. Structure of health expenditure

Most of the expenses of HI or 76.9 percent were spent on hospital services, 10.0 percent on investment, 1.0 percent on planned activities and the remaining 12.1 percent on management, sports and other expenses.

Health service expenses by level of health care: 48.7 billion or 23.6 percent of the total expenses for primary health services, 65.4 billion or 31.7 percent of the total expenses for secondary health services and 44.7 billion or 21.7 percent for tertiary level health services.

Investment expenses were 10.0 percent of total health expenses and 58.9 percent of the investment expenses were for new and transferring construction, 26.6 percent for maintenance and 14.5 percent for renewing equipment and vehicles. (Table 9.1.1)

Table 9.1.1 Investment expenditure of the health sector

Investment	2005		2006		2007		2008		2009	
	Number	Mln.tug	Number	Mln.tug	Number	Mln.tug	Number	Mln.tug	Number	Mln.tug
Ongoing building work	4	1408.8	8	2350	11	2746.6	15	7378.8	27	12156.9
Renovation expenses	7	390	7	560	29	3856.9	38			
New building	32	1088.1	35	750	97	1756.5	80	4593.2	73	5434.9
Automobile and equipment	-	545.6	-	2800	-	2486.1	-	3786.7	-	2999.6
Total investment		3432.5		6460		10846.1		15758.7		20591.4

Source: Finance and Investment Division of MOH in 2009

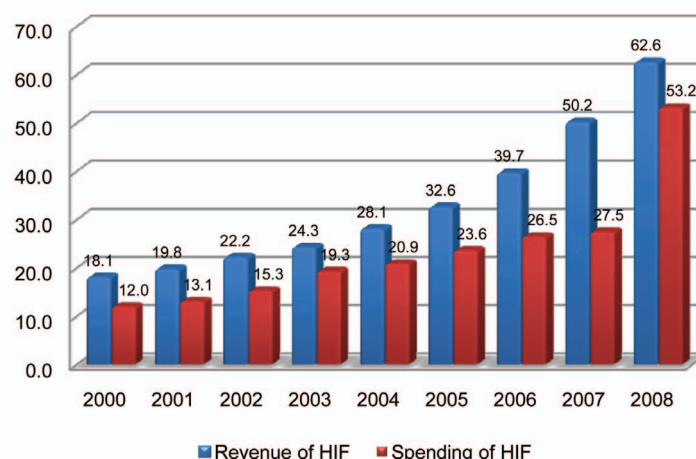
9.2. Health Insurance (HI)

Since Mongolia disseminated its Social Health Insurance system income clearance fund, its spending mechanisms were integrated into current situations and based on the circumstances, which upgraded continuously. As a result, revenue and spending of the health insurance fund increases each year. Reports show that even though HI financing increases there is not much improvement in the quality of health care.

9.3. Revenue and spending of Health insurance fund

In 2009, 70.6 billion tugrik accumulated in the HI fund. With the objective to spend the accumulated 58.4 billion on insured health services, attention was given to the following activities such as broaden coverage, complete planned income clearance and grant health services expenses within the approved budget and advertise social insurance services to the public.

Within the period, a total of 2122.9 million insurers were included in HI and 72.3 billion tugriks were accumulated from income deduction fees. A total of 56.9 billion tugriks were spent on health services for 1736.6 million insurers and 2.4 billion tugriks were spent on investment and on other HI activities

Picture 9.3.1 Revenue and spending of HIF (billion tugrik)

Source: Department of Health Insurance inspection and financing, SSIGO 2009

Compared to last year, 2009 Health insurance deduction income increased by 12.1 percent and expenses by 11.6 percent.

The Health insurance fund was created by the following deductions: 43.6 percent - deduction paid from insurer, 39.9 percent – deduction paid from employer, 11.2 percent – paid by the government from state budget, 5.3 percent – interest fee on the remaining amount which was placed in the bank, undue loss for late payment of the deduction fee and other sources

Table 9.2.1 Income clearance of the Health insurance

Income clearance	2008		2009	
	Number of coverage (per 1000 population)	Total amount (Mln.tug)	Number of coverage (per 1000 population)	Total amount (Mln.tug)
Deduction paid from insurers	880.5	28,484.3	887.9	31,577.7
Deduction paid from employers	539.7	25,980.6	546.0	28,852.4
Deduction paid by government from state budget	1,353.2	8,094.3	1235.0	8,094.3
Interest fee on the remaining amount which was placed in the bank		1,841.0		3,569.6
Undue loss for last payment of the deduction fee		70.3		74.1
Other sources		88.3		191.3
Total amount	2,233.7	64,558.8	2,122.9	72,359.4

Source: Department of Health Insurance inspection and financing, SSIGO 2009

As seen in figure 9.2.1, there was a decrease in the total number of people covered although an increase in the total amount. Its related that the total population covered by the government allocation on behalf of the subgroups to HIF declined but there wasn't a change in the total income. The insurance premium to subgroups which benefited by government subsidy was calculated on the average population of the financial year. The variance in debt and accounts depends on the registration in SSIGO.

The insurance premium from all employers and insurers was composed as followed: 85% in total amount and 45.2% in service of curative care. And, the all insurance premium from the government subsidy to subgroups was put together as followed: 11.2% in total amount, 54.8% of the total HIF's expenditure.

Table9.2.2. Spending of HIF (by function)

Spending of HIF	2008		2009	
	Number (per 1000 population)	Total amount (Mln.tug)	Number (per 1000 population)	Total amount (Mln.tug)
1. Health insurance expenditures to insurers	1,617.9	50,840.4	1,736.6	56,942.6
Outpatient care	920.1	8,605.5	853.7	6,306.3
Inpatient care	356.0	39,981.0	340.1	47,500.5
Day care	4.6	178.8	3.7	145.6
Sanatoriums	31.2	1,190.8	36.7	1,507.6
Discounted drugs	306.0	884.3	502.4	1,482.6
2. Health insurance expenditures by production factors / activities		2,273.0		2,352.7
3. Other		0		0
Total amount	1,617.9	53,113.4	1,736.6	59,295.3

Source: Department of Health Insurance inspection and financing, SSIGO 2009

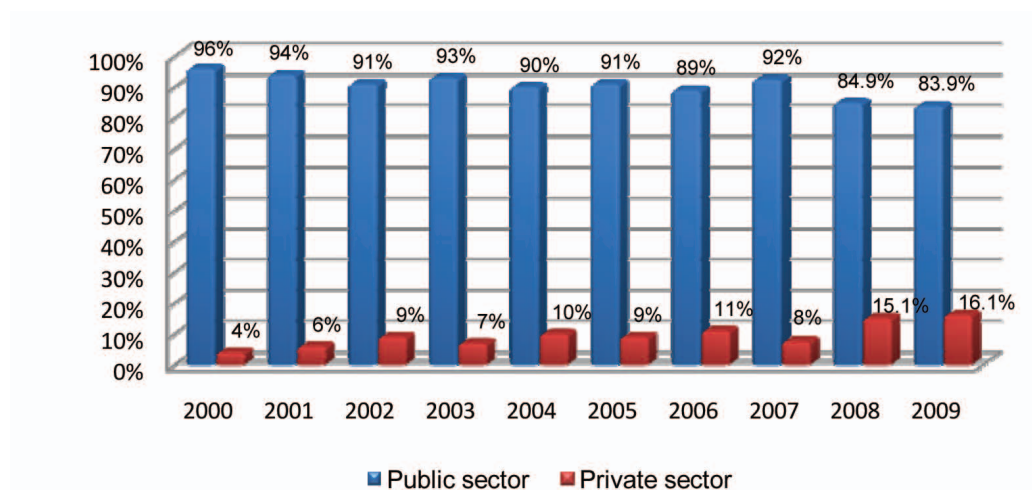
As showed in table 9.2.2, the insurance expenditures depend directly on the number of population who received health care. For inpatient care, there was an inverse relation between the number of population who received care and spending. In other words, the number of inpatients decreased by 15.9 thousand people and the spending increased by 7519.5 mln. tug. On the one hand, an increase in inpatient care rates which was based on the DRG per insurer and HIF was financing the operational costs for care of surgical diseases, injuries in inter-sums hospitals and traditional medical units in aimag center.

On the other hand, the percent of the high rate of health care services was big among the insurers, who received inpatient care service, that's why there was an inverse relation between population who received care and spending.

9.4. Spending of HIF by sector

In 2008, total health service expenditure for insurant were spent 86.5% (44 billion tugrik) for public sector and 13.5% (6.9 billion tugrik) spent by private sector.

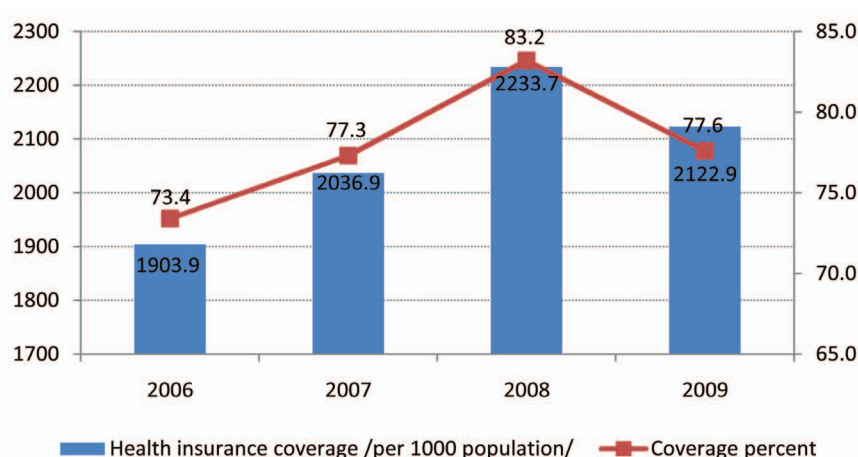
Picture 9.2.3 Spending of HIF by sector (percent)



Source: Department of Health Insurance inspection and financing, SSIGO 2009

According to the expenditures of health insurance fund by sectors, percentage of private sector expenditures was increased in total health insurance funds. In 2008, 7,671.7 mln tug were spent for 423.9 thousands patients and in 2009, 9,156.7 mln tug were spent for 634.3 thousands patients who were served by the private sector.

Picture 9.2.3 Spending of HIF by sector (percent)



Health insurance coverage decreased by 5.6 percent compared to the previous year and in 2009 reached 77.6 percent. As shown in figure 9.2.1, a decline in health coverage was associated with a decrease in the subgroups who were insured by government benefits. But, we don't understand why subgroups who should receive government subsidy,

couldn't covered 100 percent. If the subgroups who were subsidized by government, can be demonstrated as follows: in 2008, 955.6 thousands children under age 16 (if studying in secondary school, children are under age 18) were insured and it declined 858.2 thousand in 2009; in 2008, 285.6 thousand persons with pensions and no other source of income were insured and decreased 282.4 thousand in 2009; in 2008, 66.5 thousand workers on parental leave looking after their children under age 2 were insured and reached 65.1 thousands in 2009; in 2008, 29,9 thousands persons specified I Article of the Social Welfare Law were insured and declined also 21.6 thousands in 2009; in 2008, 15.5 thousand military personnel on active duty were insured and declined 7.8 thousands in 2009;

Table 9.1.1 The main indicators of health financing (mln.tug)

Indicator	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
Health expenditure as % of GDP	4.6%	4.9%	4.6%	4.2%	4.1%	3.3%	3.3%	3.4%	3.5%	3.3%
Total health expenditure (mln.tug)	46,860.6	54,281.1	57,662.2	62,067.2	77,571.3	83,725.9	103,138.0	155,400.0	211,497.1	206,429.3
Health expenditure per capita (tug)	19,602.8	22,137.5	23,449.5	24,929.6	30,799.4	32,862.0	40,029.1	43,092.0	79,529.7	76,183.0
Financing resources										
General government expenditure	34,578.9	35,891.1	36,892.8	42,786.3	54,908.7	57,825.1	75,284.6	118,900.0	167,680.3	154,356.2
Health insurance fund	9,553.3	14,970.3	18,173.0	15,474.6	18,798.2	21,897.4	23,999.7	31,400.0	38,212.4	45,086.7
Other	2,728.4	3,419.7	2,596.4	3,806.3	3,864.4	4,003.4	3,853.7	4,500.0	6,178.5	5,630.0

Table 9.1.2 Some expenses by line items (mln.tug)

Line items	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
Total health expenditure	9,553.3	14,970.3	18,173.0	15,474.6	8,798.2	21,897.4	23,999.7	29,128.9	211,497.1	206,429.3
From this: Salary and incentive	13,966.9	15,024.5	17,725.3	17,194.4	22,292.3	24,194.6	34,228.0	63,300.0	92,982.4	92,743.8
Drugs	7,960.4	9,538.2	9,379.7	9,504.0	11,235.9	11,881.4	11,984.7	15,600.0	23,298.1	25,415.6
Food expenditure	2,299.8	2,658.8	3,096.6	2,648.8	3,160.6	3,317.7	3,370.7	4,100.0	5,814.1	6,911.5
Utility expenses (heating, water supply, electricity)	7,557.3	8,733.2	9,394.6	8,747.3	9,389.9	10,783.8	13,403.9	14,400.0	14,892.6	15,030.3
Transportation expenses	1,836.0	1,956.6	1,972.6	1,959.7	2,534.3	3,265.8	3,612.8	4,700.0	6,251.6	4,631.0
Capital expenses	1,399.5	1,162.9	1,929.6	3,168.2	3,576.1	3,432.5	6,460.0	10,846.1	15,758.7	20,591.4

Table 9.1.3 Health financing by level of care (mln.tug)

Expenses by level of care	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
Tertiary health care	10,920.0	12,519.1	13,402.4	13,835.7	16,739.3	17,926.9	21,684.0	32,000.0	44,893.9	44,701.2
Secondary health care	13,498.0	16,890.8	18,045.4	20,755.4	25,525.1	27,111.5	33,286.4	50,700.0	66,142.3	65,386.2
Primary health care	8,222.2	9,774.2	12,198.8	13,198.4	16,599.7	18,732.3	23,412.8	34,700.0	50,670.9	48,677.7
Other	14,220.4	15,097.0	14,015.6	14,277.7	18,707.2	19,955.2	24,754.8	2,700.0	49,790.1	47,664.3
Total	46,860.6	54,281.1	57,662.2	62,067.2	77,571.3	83,725.9	103,138.0	120,100.0	211,497.2	206,429.4

Table 9.1.4. Health insurance fund's indicators (mln.tug)

Spending of HIF	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
Revenue of HIF	18,111.2	19,802.6	22,188.3	24,312.5	28,124.6	32,574.2	39,660.0	50,263.7	64,558.8	72,359.4
Spending of HIF	12,024.1	13,057.6	15,320.1	19,264.9	20,901.4	23,581.3	26,528.1	27,542.5	53,113.4	59,295.3
By functions										
Outpatient care	191.7	416.0	607.4	1,097.5	1,115.2	1,766.4	3,339.9	2,154.5	8,605.5	6,306.3
Inpatient care	11,352.7	12,010.7	13,997.6	15,227.5	16,792.6	18,794.0	20,528.5	22,893.4	39,981.0	47,500.5
FGPs	0.0	0.0	0.0	1,608.8	1,828.7	1,987.1	1,045.3	0.0	0.0	0.0
Discounted drugs	250.6	378.7	424.5	381.8	526.9	571.1	564.5	564.4	884.3	1,482.6
Sanatoriums	229.1	252.2	290.6	342.8	389.1	462.7	558.5	573.0	1,190.8	1,507.6
Day care	...	...	...	...	...	...	...	...	178.8	145.6
Others	0.0	0.0	0.0	606.5	248.9	0.0	491.4	1,357.2	2,273.0	2,352.7
By sector										
Public sector	11,484.5	12,251.3	14,003.7	17,981.7	18,889.6	21,427.3	24,145.4	25,034.3	43,168.7	47,785.9
Private sector	539.6	806.3	1,316.4	1,283.2	2,011.8	2,154.0	2,382.7	2,058.2	7,671.7	9,156.7
Average insurance coverage (percent)	87.6%	81.2%	77.7%	83.0%	85.9%	76.5%	74.0%	78.3%	82.3%	77.6%
Remains of HIF	...	...	...	...	...	...	...	...	11445.4	13064.1

CHAPTER 10. HEALTH PROFILE OF MONGOLIA FOR THE WESTERN PACIFIC REGION HEALTH DATABANK, 2009 REVISION

INDICATORS		DATA						Year
Demographics		Total		Male		Female		
1	Area (1 000 km2)	1 567.00						2009
2	Estimated population ('000s)	2735780		1337670		1398100		2009
3	Annual population growth rate (%)	1.96		...				2009
4	Percentage of population (%)			...		...
	- 0–4 years	9.69		10.09		9.31		2009
	- 5–14 years	17.93		18.67		17.22		2009
	- 65 years and above	4.06		3.60		4.50		2009
5	Urban population (%)	63.23		...		...		2009
6	Crude birth rate (per 1000 population)	25.30		...		...		2009
7	Crude death rate (per 1000 population)	5.73		...		...		2009
8	Life expectancy (years)	67.96		64.33		71.79		
9	Total fertility rate (women aged 15-49 years)	2.70		...		2.70		2009
Socioeconomic indicators								
10	Adult literacy rate (%)	97.80		98.00		97.50		2007
11	Per capita GDP at current market prices (US\$)	1 977.28						2008
12	Rate of growth of per capita GDP (%)	31.06						2008
13	Human development index	0.74		...		...		2008
Communicable and noncommunicable diseases		Number of new cases			Number of deaths			
14	Selected communicable diseases	Total	Male	Female	Total	Male	Female	
	Hepatitis viral	6 865	3781	3084	20	10	10	2009
	- Type A	5 884	3 236	2 648	7	2	5	2009
	- Type B	748	429	319	13	8	5	2009
	- Type C	128	44	84	0	0	0	2009
	- Type E	....	....	....	....	....	....	2009
	- Unspecified	105	72	33	0	0	0	2009
	Cholera	0	0	0	0	0	0	2009
	Encephalitis	52	35	17	0	0	0	2009
	Gonorrhoea	6 350	2 838	3 512	0	0	0	2009
	Malaria	3	3	0	0	0	0	2009
	Plague	1	1	0	0	0	0	2009
	Syphilis	4 912	1 656	3 256	0	0	0	2009
	Typhoid fever	7	5	2	0	0	0	2009

INDICATORS		DATA						Year
Communicable and noncommunicable diseases		Number of new cases			Number of deaths			
		Total	Male	Female	Total	Male	Female	
15	Acute respiratory infections	194 099	92 314	101 785	461	255	206	2009
16	Diarrhoeal diseases	26 271	13 127	13 144	62	30	32	2009
17	Tuberculosis							
	- All forms	4 286	2177	2109	222	134	88	2009
	- New pulmonary tuberculosis (smear-positive)	3 153	1665	1488	162	94	68	2009
18	Cancers							
	All cancers (malignant neoplasms only)	4 122	2 207	1 915	3 145	1 821	1 324	2009
	- Breast	82	2	80	37	1	36	2009
	- Colon and rectum	105	61	44	80	51	29	2009
	- Cervix	265		265	106		106	2009
	- Oesophagus	293	160	133	266	156	110	2009
	- Leukaemia	37	20	17	25	12	13	2009
	- Lip, oral cavity and pharynx	60	41	19	35	22	13	2009
	- Liver	1674	962	712	1410	822	588	2009
	- Stomach	637	421	216	488	318	170	2009
	- Trachea, bronchus, and lung	346	266	80	295	239	56	2009
19	Circulatory							
	All circulatory system diseases	184 104	69 875	114 229	5 892	3 202	2 690	2009
	- Acute myocardial infarction	1 781	881	900	830	566	264	2009
	- Cerebrovascular diseases	17 082	5412	11670	2 344	1 288	1 116	2009
	- Hypertension	72 672	25 663	47 009	374	196	178	2009
	- Ischaemic heart disease	41 265	17 510	23 755	1 532	803	729	2009
	- Rheumatic fever and rheumatic heart diseases	24 102	6799	17 303	69	35	34	2009
20	Diabetes mellitus	8 444	4 027	4 417	60	32	28	2009
21	Mental disorders	27 210	13 354	13 856	33	18	15	2009
22	Injuries							
	All types	112 968	72146	40 822	2 361	1 855	506	2009
	- Homicide and violence	...	...	...	264	213	51	2009
	- Motor and other vehicular accidents	...	...	...	427	335	92	2009
	- Occupational injuries	...	...	...	50	38	12	2009
	- Suicide	...	...	...	434	349	85	2009
Leading causes of morbidity (inpatient care)		Number of cases			Rate per 100 000 population			
23	Leading causes of morbidity (inpatient care)	Total	Male	Female	Total	Male	Female	
	1. Diseases of the respiratory system	278 478	130 682	147 796	10 277.26	9 871.89	10 664.46	2009
	2. Diseases of the digestive system	244 006	98 723	145 283	9 005.07	7 457.66	10 483.13	2009
	3. Diseases of the genitourinary system	204 957	46 718	158 239	7 563.96	3 529.14	11 417.99	2009
	4. Diseases of the circulatory system	184 104	69 875	114 229	6 794.38	5 278.45	8 242.38	2009
	5. Diseases of the nervous system	98 841	41 080	57 761	3 647.74	3 103.24	4 167.84	2009
	6. Injuries, poisoning and other consequences of external causes	112 968	72 146	40822	4 169.10	5 450.00	2 945.58	2009
	7. Infectious and parasitic diseases	44 658	19 189	25 469	1 648.11	1 449.56	1 837.76	2009
	8. Diseases of the skin and subcutaneous tissues	86 362	37975	48387	3 187.20	2 868.68	3 491.44	2009
	9. Mental and behavioural disorders	27 210	13354	13856	1 004.19	1 008.78	999.80	2009
	10. Diseases of the eye and adnexa	57168	22178	34990	2 109.79	1 675.36	2 524.76	2009

INDICATORS		Data						Year
		Number of deaths			Rate per 100 000 population			
24	Leading causes of mortality	Total	Male	Female	Total	Male	Female	
	1. Diseases of the circulatory system	5 892	3 202	2 690	217.44	241.88	194.10	2009
	2. Tumours and neaplasms	3 222	1 847	1 375	118.91	139.52	99.22	2009
	3. Injuries, poisoning and other consequences of external causes	2 361	1 855	506	87.13	140.13	36.51	2009
	4. Diseases of the digestive system	1312	708	604	48.42	53.48	43.58	2009
	5. Diseases of the respiratory system	752	428	324	27.75	32.33	23.38	2009
	6. Certain conditions originating in the perinatal period	727	430	297	26.83	32.48	21.43	2009
	7. Infectious and parasitic diseases	265	160	105	9.78	12.09	7.58	2009
	8. Diseases of the genitourinary system	286	163	126	10.55	12.31	9.09	2009
	9. Diseases of the nervous system	234	130	104	8.64	9.82	7.50	2009
	10. Congen malformations, deformations and chromosomal abnormalities	201	107	94	7.42	8.08	6.78	2009
	Maternal, child and infant diseases	Total		Male		Female		
25	Percentage of women in the reproductive age group using modern contraceptive methods	53.2						2009
26	Percentage of pregnant women with anaemia	7.90						2009
27	Neonatal mortality rate (per 1000 live births)	9.96		11.5		8.3		2009
28	Percentage of newborn infants weighing at least 2500 g at birth	95.80		96.1		95.5		2009
29	Immunization coverage for infants (%)							
	- BCG	98.80		...		...		2009
	- DTP3	97.40		...		...		2009
	- POL3	97.10		...		...		2009
	- Hepatitis B III	98.80		...		...		2009
	- Measles	96.50		...		...		2009
	- Penta vaccine	96.00		...		...		2009
		Number of cases			Number of death			
30	Maternal causes	Total	Male	Female	Total	Male	Female	
	- Abortion	12 602	...	12 602	0	...	0	2009
	- Eclampsia	9 223	...	9 223	8	...	8	2009
	- Haemorrhage	1 967	...	1 967	2	...	2	2009
	- Obstructed labour	6 217	...	6 217	0	...	0	2009
	- Sepsis	101	...	101	2	...	2	2009
31	Selected diseases under the WHO-EPI							
	- Dephtheria	0	0	0	0	0	0	2009
	- Hib meningitis	38	18	20	4	2	2	2009
	- Measles	6	3	3	0	0	0	2009
	- Mumps	1990	1086	904	0	0	0	2009
	- Neonatal tetanus	0	0	0	0	0	0	2009
	- Pertussis (whooping cough)	0	0	0	0	0	0	2009
	- poliomyelitis	0	0	0	0	0	0	2009
	- Rubella	9	7	2	0	0	0	2009
- Total Tetanus	3	2	1	2	2	0	2009	

INDICATORS			DATA							Year
Health facilities			Number		Number of beds					
Public health facilities	- General hospitals		16		4 005				2009	
	- Specializwed hospitals		39		4 326				2009	
	- District/first-level referral hospitals		330		5 367				2009	
	- Primary health care centres		226		0				2009	
Private health facilities	- Hospitalis		160		2 422				2009	
	- Outpatient clinics		922		0				2009	
Health care financing										
32	Total health expenditure									
	- amount (in million US\$)		241 924.6							2008
	- total expenditure on health as % of GDP		3.95%							2008
	- per capita total expenditure on health (in US\$)		90973.032							2008
	Government expenditure on health									
	- amount (in million US\$)		191 026.96							2008
	- general government expenditure on health as % of total expenditure on health		78.96%							2008
	- general government expenditure on health as % of total general government expenditure		7.76%							2008
	External source of government health expenditure									
	- external resources for health as % general government expenditure on health		...							
	Private health expenditure									
	- Private expenditure on health as % of total expenditure on health		12.58%							2008
	- out-of-pocket expenditure on health as % of total expenditure on health		5.12%							2008
	Exchange rate in US\$ of local currency is: 1 US\$=		1 165.66							2008
	33	Health insurance coverage as % of total population		83.20%							2008
INDICATORS			DATA							Year
34	Human resources for health		Total	Male	Female	Urban	Rural	Public	Private	
	Physicians	- Number	7 140	1 432	5 708	4 328	2 812	5 744	1 396	2009
		- Rate per 1000 pulation	2.64	1.08	4.12	2.57	2.75	2.12	0.52	2009
	Dentists	- Number	528	...	...	387	141	198	330	2009
		- Rate per 1000 population	0.19	...	...	0.23	0.14	0.07	0.12	2009
	Pharmacists	- Number	1088	56	1032	889	199	182	906	2009
		- Rate per 1000 population	0.40	0.04	0.74	0.53	0.19	0.07	0.33	2009
	Nurses	- Number	9 017	178	8 839	4 777	4 240	8 159	858	2009
		- Rate per 1000 population	3.33	0.13	6.38	2.83	4.14	3.01	0.32	2009
	Midwives	- Number	668	9	659	130	538	649	19	2009
		- Rate per 1000 population	0.25	0.00	0.24	0.08	0.53	0.24	0.01	2009
	Pharmedical staff	- Number	1 219	114	1 105	607	612	984	235	2009
		- Rate per 1000 population	0.45	0.09	0.80	0.36	0.60	0.36	0.09	2009
	Community health workers	- Number	328	80	248	...	...	328	0	
		- Rate per 1000 population	0.12	0.06	0.18	...	...	0.12	...	
35	Annual number of graduates	Physicians	559	160	399	...	...	414	145	2009
Dentists		108	14	94	...	...	84	24	2009	

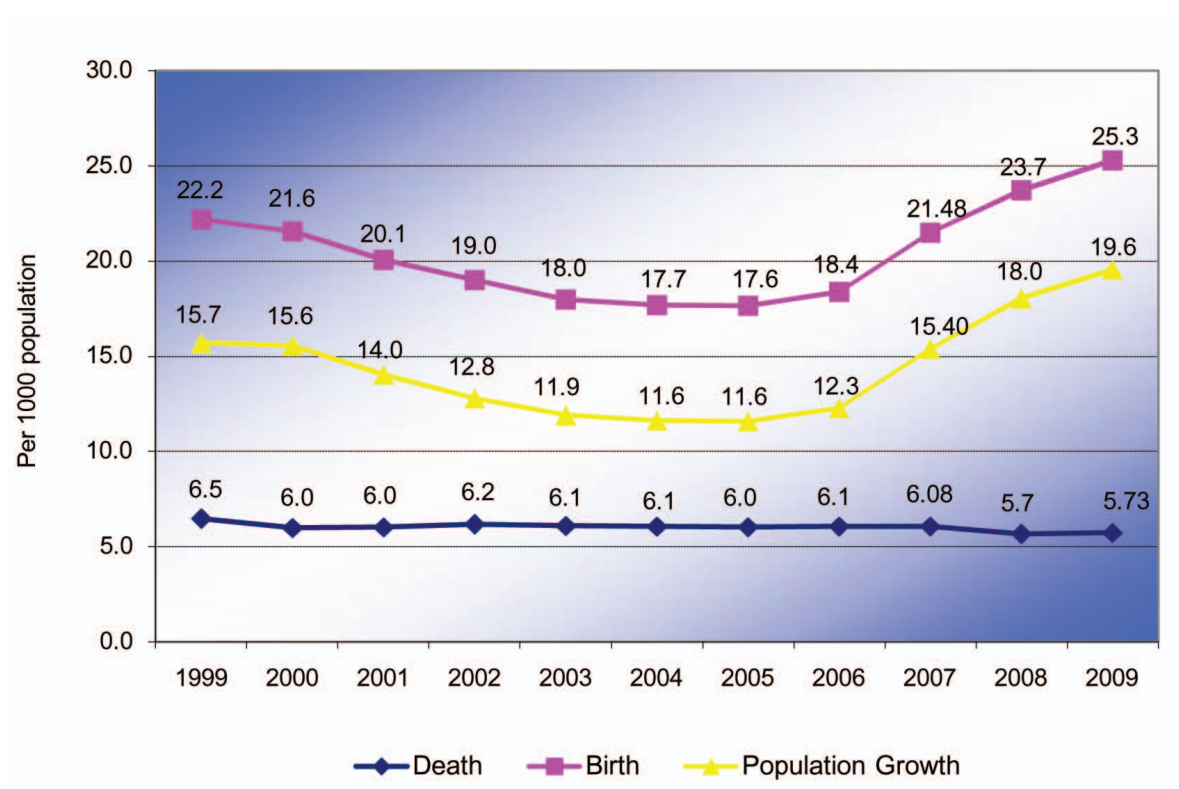
INDICATORS			DATA							Year
			Total	Male	Female	Urban	Rural	Public	Private	
36	Annual number of graduates	Pharmacists	234	18	216	115	119	2009
		Nurses	475	12	463	324	151	2009
		Midwives	161	10	151	161	...	2009
		Pharmamedical staff	331	56	275	331	...	2009
		Community health workers	20	7	13	20	...	2009
37	Workforce losses/ Attrition	Physicians	234	2009
		Dentists	2009
		Pharmacists	15	2009
		Nurses	336	2009
		Midwives	12	2009
		Pharmamedical staff	157	2009
		Community health workers	2009
INDICATORS			DATA						Year	
Health-related Millennium Development Goals (MDGs)			Total		Male		Female			
38	Prevalence of underweight children under five years of age		6.30		5.90		6.60		2007	
39	Infant mortality rate (per 1000 live births)		20.16		22.56		17.60		2009	
40	Under-five mortality rate (per 1000 live births)		23.65		25.90		21.24		2009	
41	Proportion of 1 year-old children immunised against measles		96.50		...				2009	
42	Maternal mortality ratio (per 100 000 live births)		81.40		...		...		2009
43	Proportion of births attended by skilled health personnel		99.80		...		...		2009
	- Percentage of deliveries at home by skilled health personnel (as % of total deliveries)		0.40		...		...		2009
	- Percentage of deliveries in health facilities (as % of total deliveries)		99.60		...		...		2009
44	Contraceptive prevalence rate		53.20		...		...		2009
45	Adolescent birth rate		6.10						2009	
46	Antenatal care coverage - At least one visit		84.10		...		...		2009
	- At least four visits		1.2		...		...		2009
47	HIV prevalence among population aged 15-24 years		<0.1%		...		...		2009
48	Estimated HIV prevalence in adults a		<0.1%		...		...		2009
49	Percentage of people with advanced HIV infection receiving ART		...		...		...		2009
50	Tuberculosis prevalence rate per 100 000 population		70.2		...		...
51	Tuberculosis death rate per 100 000 population		2.80		3.6		2.1		2009	
52	Proportion of tuberculosis cases detected under directly observed treatment short-course (DOTS)		74.10		...		...		2009
53	Proportion of tuberculosis cases cured under directly observed treatment short-course (DOTS)		84.00		...		...		2009
			Total		Urban		Rural			
54	Proportion of population using an improved drinking water source		...		...		...
55	Proportion of population using an improved sanitation facility		...		...		...
56	Proportion of population with access to affordable essential drugs on a sustainable basis		...		...		...

CHAPTER 11. MAIN HEALTH INDICATORS FOR 2009

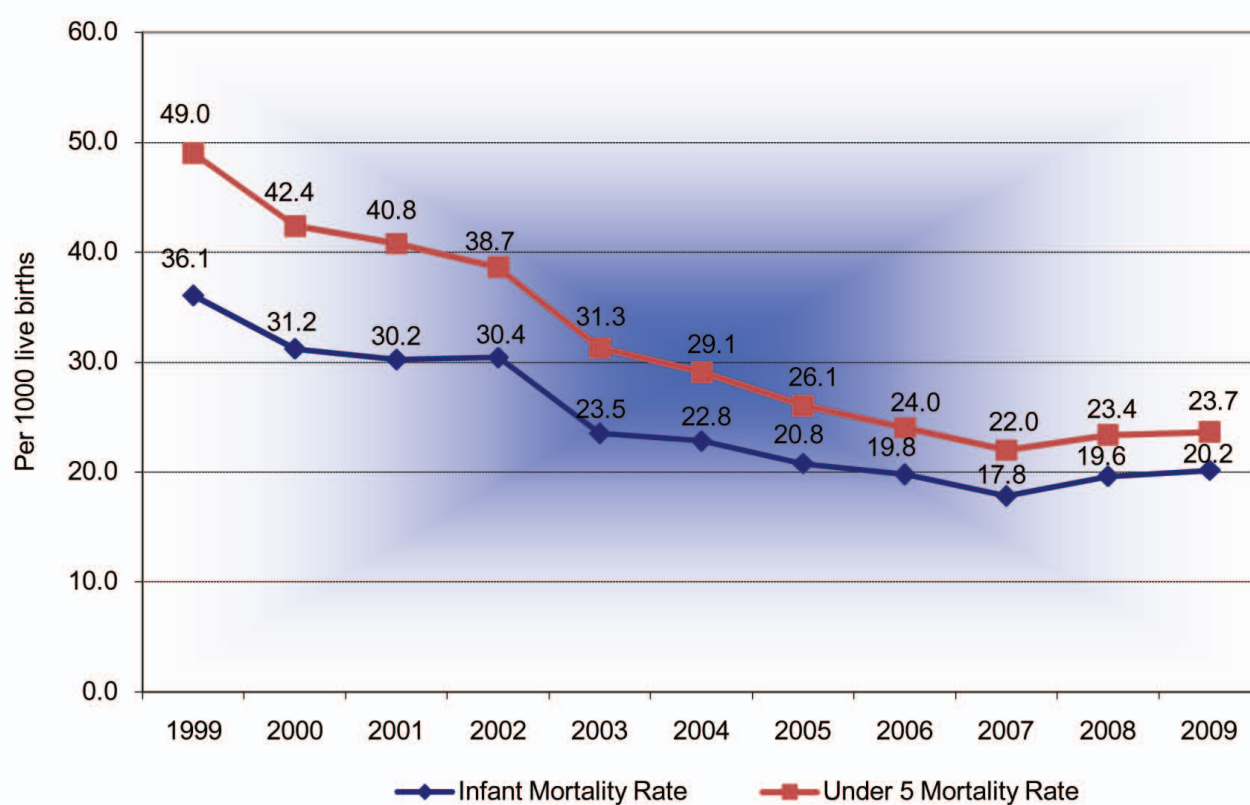
Main Health Indicators, 2009

	Aimag and city	Population, 2009	Per 10,000 population				Number of persons per hospital bed	Number of persons per physician	Number of midlevel personnel per physician	Average outpatient visits per person per year	Per 1000 population			Infant mortality rate per 1000 live births		Under 5 mortality rate	
			Hospital beds	Physicians	Midlevel medical personnels	All health workers					Crude birth rate	Crude death rate	Population growth rate	per 1000 under 5 children	per 1000 live births		
	A	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	
1	Arkhangai	92449	62.07	13.52	52.34	113.97	161.11	739.82	3.87	3.32	22.11	5.54	16.58	25.87	6.56	28.79	
2	Bayan-Ulgii	101848	58.68	13.00	45.49	99.24	170.42	769.46	3.50	3.98	25.18	5.22	19.97	27.01	8.69	36.93	
3	Bayankhongor	85365	58.52	12.20	54.53	120.91	170.88	819.91	4.47	3.87	24.01	5.82	18.19	22.84	6.76	26.72	
4	Bulgan	62340	59.95	15.19	55.91	126.69	166.80	658.33	3.68	3.45	17.13	4.90	12.23	18.73	4.29	21.54	
5	Gobi-Altai	59376	77.18	19.30	77.69	167.62	129.56	518.25	4.03	4.35	23.05	5.69	17.37	26.83	8.58	35.53	
6	Gobi-Sumber	13293	81.01	31.33	77.95	168.13	123.44	319.15	2.49	7.45	27.59	5.04	22.54	22.22	6.52	27.78	
7	Darkhan-Uul	90050	56.89	25.92	60.03	129.94	175.78	385.79	2.32	7.35	29.09	5.97	23.12	9.57	3.81	11.87	
8	Dornogobi	58318	61.60	30.80	56.41	141.90	162.33	324.65	1.83	6.54	23.14	4.95	18.19	21.77	5.31	24.02	
9	Dornod	73625	65.21	18.75	53.94	129.61	153.34	533.36	2.88	4.10	26.18	6.51	19.67	17.10	5.39	20.21	
10	Dundgobi	47671	62.15	18.98	62.98	139.10	160.91	526.95	3.32	3.95	22.63	4.94	17.68	20.13	5.19	22.87	
11	Zavkhan	79320	66.61	14.83	63.34	135.99	150.12	674.28	4.27	4.92	23.60	5.77	17.83	22.91	5.99	24.51	
12	Orkhon	83145	50.88	27.14	58.64	121.63	196.53	368.49	2.16	8.12	30.15	6.31	23.84	15.56	5.34	16.76	
13	Uvurkhangai	117513	54.43	14.78	44.94	101.50	183.74	676.53	3.04	2.36	25.14	5.71	19.43	23.08	6.84	25.80	
14	Umnugobi	49333	55.86	21.85	56.68	124.49	179.03	457.71	2.59	5.77	26.38	5.96	20.43	21.06	5.91	23.40	
15	Sukhbaatar	54955	57.70	18.38	58.06	136.33	173.32	543.98	3.16	5.01	21.70	5.53	16.16	18.49	5.32	22.69	
16	Selenge	103459	63.02	16.10	50.24	108.58	158.68	621.27	3.12	3.77	18.03	5.02	13.00	14.09	3.26	16.26	
17	Tuv	88503	48.27	14.95	49.52	120.04	207.18	669.00	3.31	3.09	10.66	4.70	5.96	18.24	2.31	20.39	
18	Uvs	78801	60.28	14.63	60.15	121.82	165.90	683.61	4.11	4.43	30.00	6.83	23.17	30.60	9.76	36.46	
19	Khovd	88505	63.09	13.91	54.50	109.44	158.51	719.09	3.92	4.30	25.18	4.55	20.63	18.86	6.70	25.15	
20	Khuvsgul	124108	48.88	12.95	55.60	110.87	204.59	772.33	4.29	4.56	25.48	6.70	18.78	29.43	8.81	33.86	
21	Khentii	71458	60.93	20.50	56.86	135.19	164.13	487.89	2.77	4.43	21.90	5.28	16.62	29.21	7.02	31.75	
22	Aimag average	1623435	59.13	17.38	55.57	122.12	169.12	575.27	3.20	4.51	23.65	5.62	18.03	21.87	6.26	25.73	
23	Ulaanbaatar	1112345	74.80	39.63	62.26	173.53	133.69	252.31	1.57	7.95	27.73	5.88	21.84	18.00	6.17	21.03	
24	Country average	2735780	65.44	26.35	58.27	142.84	152.80	379.50	2.21	5.89	25.30	5.73	19.57	20.16	6.23	23.65	

Crude Birth and Death Rates and Population Growth (1999-2009)



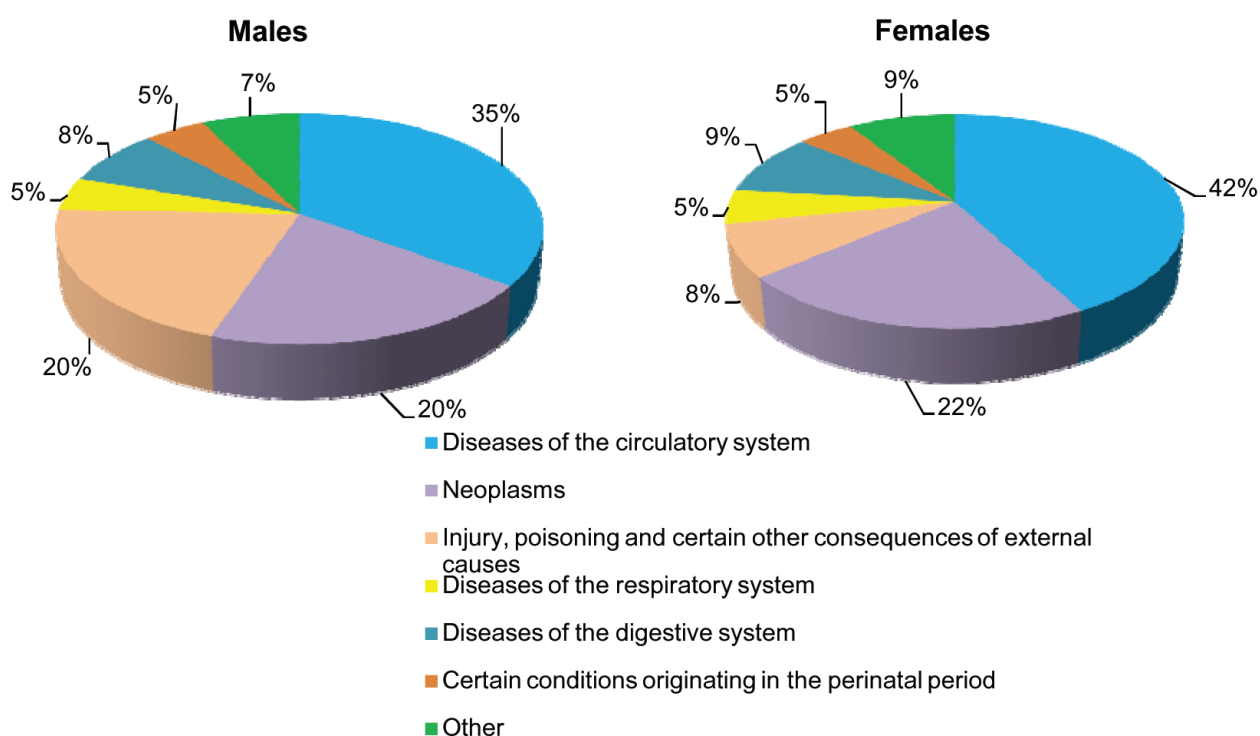
Infant and Under 5 Mortality Rates (1999-2009)



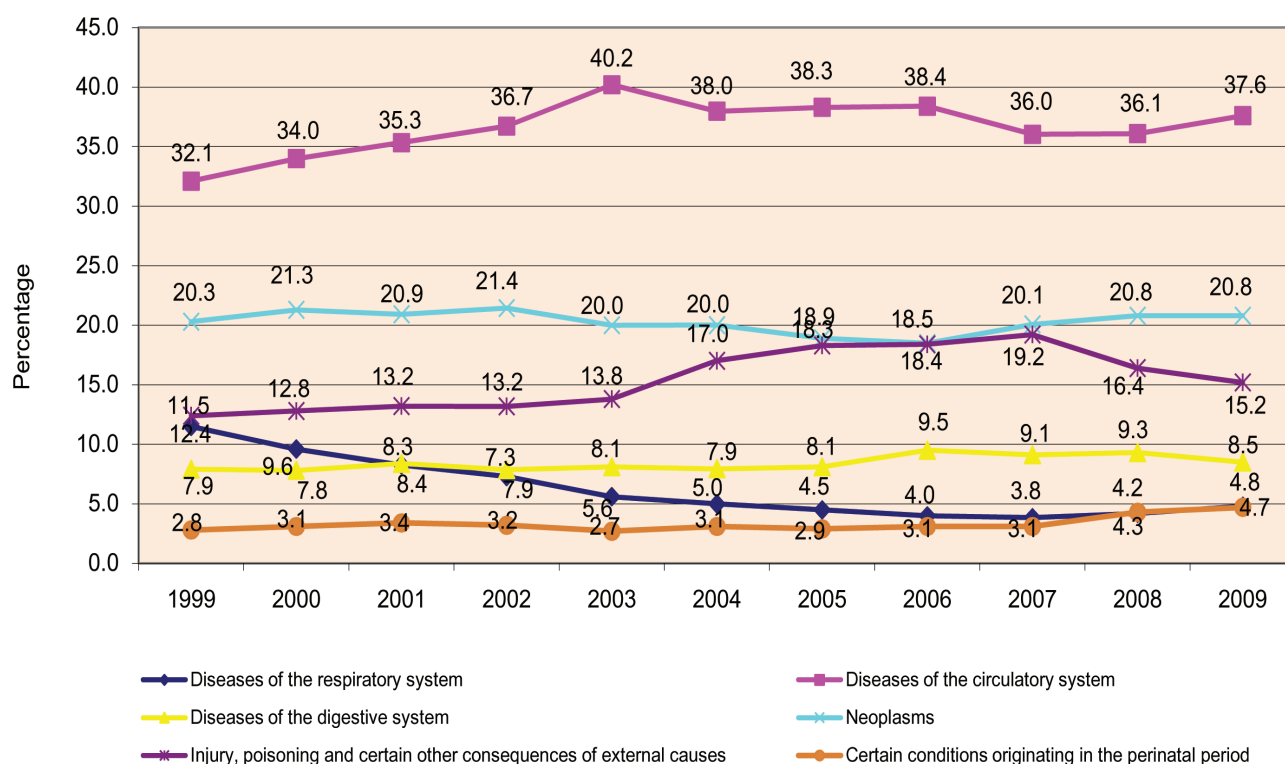
Deaths by Causes and Sex, 2009

Main Causes ICD-10	Total		Males		Females	
	Abs. number	per 10000 pop	Abs. number	per 10000 pop	Abs. number	per 10000 pop
Diseases of the circulatory system	5892	21.74	3202	24.19	2690	19.41
Neoplasms	3222	11.89	1847	13.95	1375	9.92
Injury, poisoning and certain other consequences of external causes	2361	8.71	1855	14.01	506	3.65
Diseases of the digestive system	1312	4.84	708	5.35	604	4.36
Diseases of the respiratory system	752	2.78	428	3.23	324	2.34
Certain infectious and parasitic diseases	265	0.98	160	1.21	105	0.76
Certain conditions originating in the perinatal period	727	2.68	430	3.25	297	2.14
Diseases of the genito-urinary system	289	1.07	163	1.23	126	0.91
Diseases of the nervous system and sense organs	234	0.86	130	0.98	104	0.75
Congenital malformations, deformations and chromosomal abnormalities	201	0.74	107	0.81	94	0.68
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	48	0.18	25	0.19	23	0.17
Endocrine, nutritional and metabolic diseases	92	0.34	43	0.32	49	0.35
Mental and behavioural disorders	33	0.12	18	0.14	15	0.11
Pregnancy, childbirth and the puerperium	28	0.10	-	0.00	28	0.20
Diseases of blood and blood forming organs and certain disorders involving the immune mechanisms	18	0.07	7	0.05	11	0.08
Diseases of the musculoskeletal system and connective tissue	30	0.11	10	0.08	20	0.14
Diseases of the eye and adnexa	1	0.00	0	0.00	1	0.01
Diseases of the skin and subcutaneous tissue	17	0.06	15	0.11	2	0.01
Total	15522	57.28	9148	69.11	6374	45.99

Main Causes of Death, by Sex, 2009



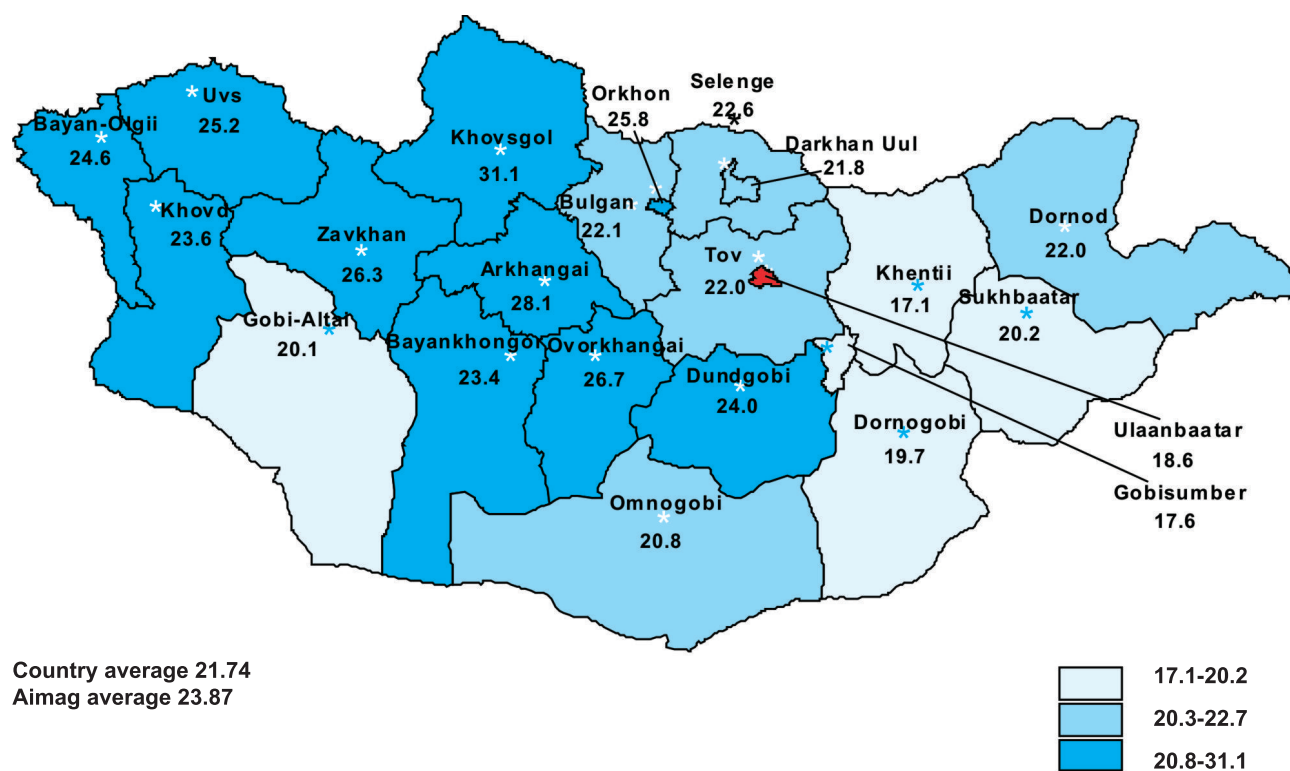
Five Leading Causes of Death, 1999-2009



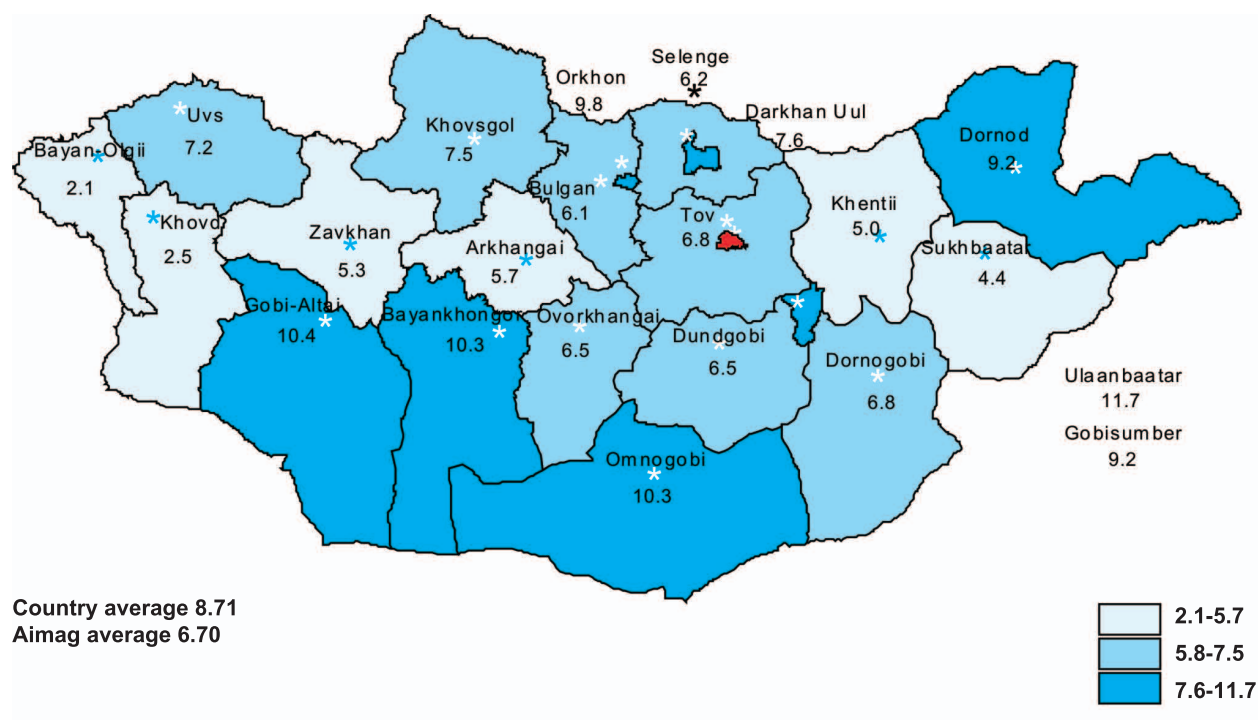
Five Leading Causes of Death (by aimag), 2009

□	Aimag, city	per 10000 population				
		Diseases of the circulatory system	Neoplasms	Injury, poisoning and certain other consequences of external causes	Diseases of the digestive system	Diseases of the respiratory system
1	Arkhangai	28.12	10.71	5.73	2.92	1.62
2	Bayan-Ulgii	24.61	6.10	2.07	5.51	8.37
3	Bayankhongor	23.45	8.21	10.32	5.39	4.10
4	Bulgan	22.14	13.25	6.14	1.45	0.81
5	Gobi-Altai	20.13	14.77	10.40	3.36	3.02
6	Gobi-Sumber	17.58	6.88	9.17	9.17	2.29
7	Darkhan-Uul	21.77	17.17	7.63	3.82	2.02
8	Dornogobi	19.73	7.96	6.75	5.36	1.21
9	Dornod	22.01	16.17	9.24	6.93	2.72
10	Dundgobi	23.98	8.34	6.46	2.50	2.09
11	Zavkhan	26.27	12.57	5.28	4.02	2.77
12	Orkhon	25.80	10.54	9.81	7.87	1.09
13	Uvurkhangai	26.66	9.83	6.49	3.25	3.50
14	Umnugobi	20.82	12.37	10.31	5.15	2.68
15	Sukhbaatar	20.20	17.84	4.37	3.64	2.18
16	Selenge	22.63	10.34	6.24	4.39	1.85
17	Tuv	22.02	9.36	6.85	2.74	1.26
18	Uvs	25.22	19.42	7.19	3.28	4.41
19	Khovd	23.63	6.67	2.49	4.41	4.07
20	Khuvsgul	31.08	13.76	7.45	3.48	3.56
21	Khentii	17.13	7.30	5.05	11.51	3.51
22	Aimag average	23.87	11.44	6.70	4.56	2.99
23	Ulaanbaatar	18.60	12.55	11.69	5.27	2.46
24	Country average	21.74	11.89	8.71	4.84	2.78

Deaths of the Circulatory System per 10000 population, 2009



Death Injury-Poisoning and Certain other Consequences of External Causes per 10000 population, 2009



Causes of Infant and Under 5 Deaths, 2009

Diseases group according to ICD-10	0-1 age		under 5	
	Abs. number	%	Abs. number	%
Certain conditions originating in the perinatal period	727	52.5	727	44.7
Diseases of the respiratory system	266	19.2	346	21.3
Congenital malformations, deformations and chromosomal abnormalities	156	11.3	168	10.3
Injury, poisoning and certain other consequences of external causes	99	7.1	186	11.4
Diseases of the digestive system	61	4.4	78	4.8
Diseases of the nervous system and sense organs	46	3.3	67	4.1
Certain infectious and parasitic diseases	11	0.8	14	0.9
Other	20	1.4	40	2.5
Total	1386	100.0	1626	100.0

Causes of Infant Mortality (2005-2009)

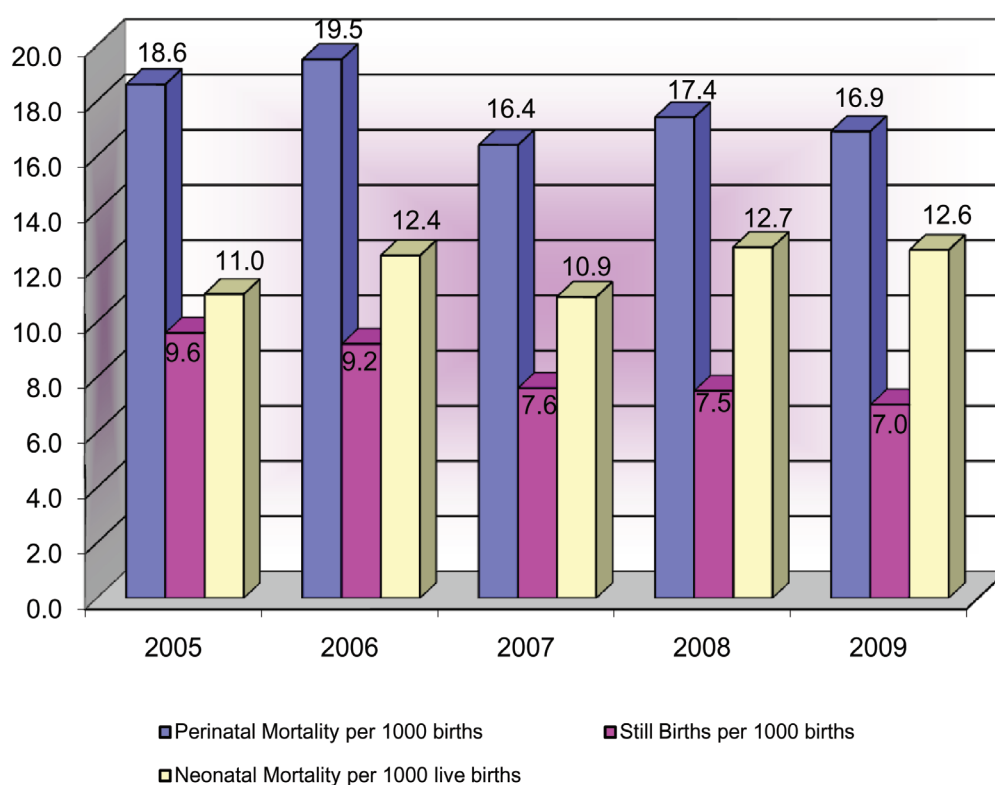
Causes	2005	2006	2007	2008	2009
Certain conditions originating in the perinatal period	48.2	51.0	49.7	51.9	44.7
Diseases of the respiratory system	26.2	17.2	19.1	17.3	21.3
Congenital malformations, deformations and chromosomal abnormalities	9.7	12.3	12.4	13.4	10.3
Injury, poisoning and certain other consequences of external causes	5.8	6.3	7.5	7.0	11.4
Diseases of the digestive system	5.2	4.6	4.4	4.4	4.8
Diseases of the nervous system and sense organs	2.3	5.5	4.2	2.7	4.1
Certain infectious and parasitic diseases	1.5	2.5	1.7	1.7	0.9



Infant Mortality, 2009

Causes	Rate
Infant mortality rate per 1000 live births	20.2
Early neonatal mortality rate per 1000 live births	10.0
Post neonatal mortality rate per 1000 live births	2.7
Neonatal mortality rate per 1000 live births	12.6
Still births rate per 1000 births	7.0
Perinatal mortality rate per 1000 births	16.9

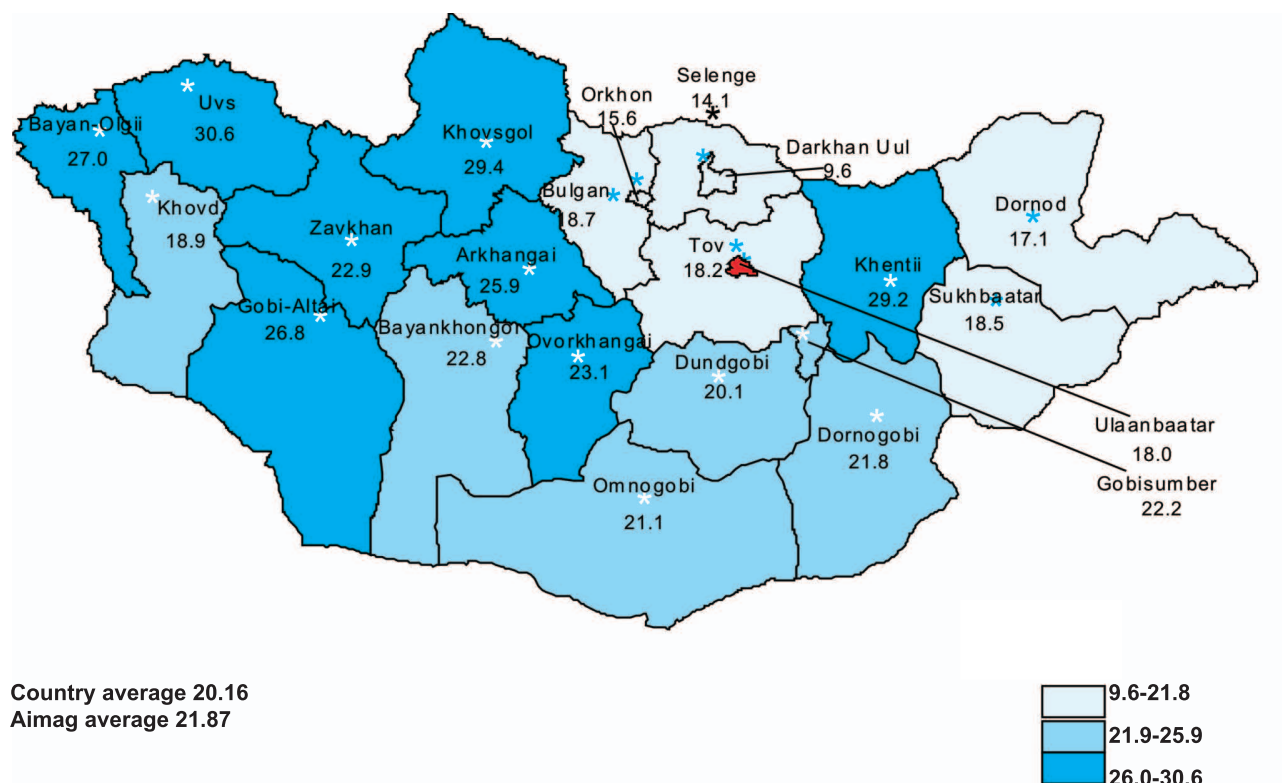
Infant Mortality 2005-2009



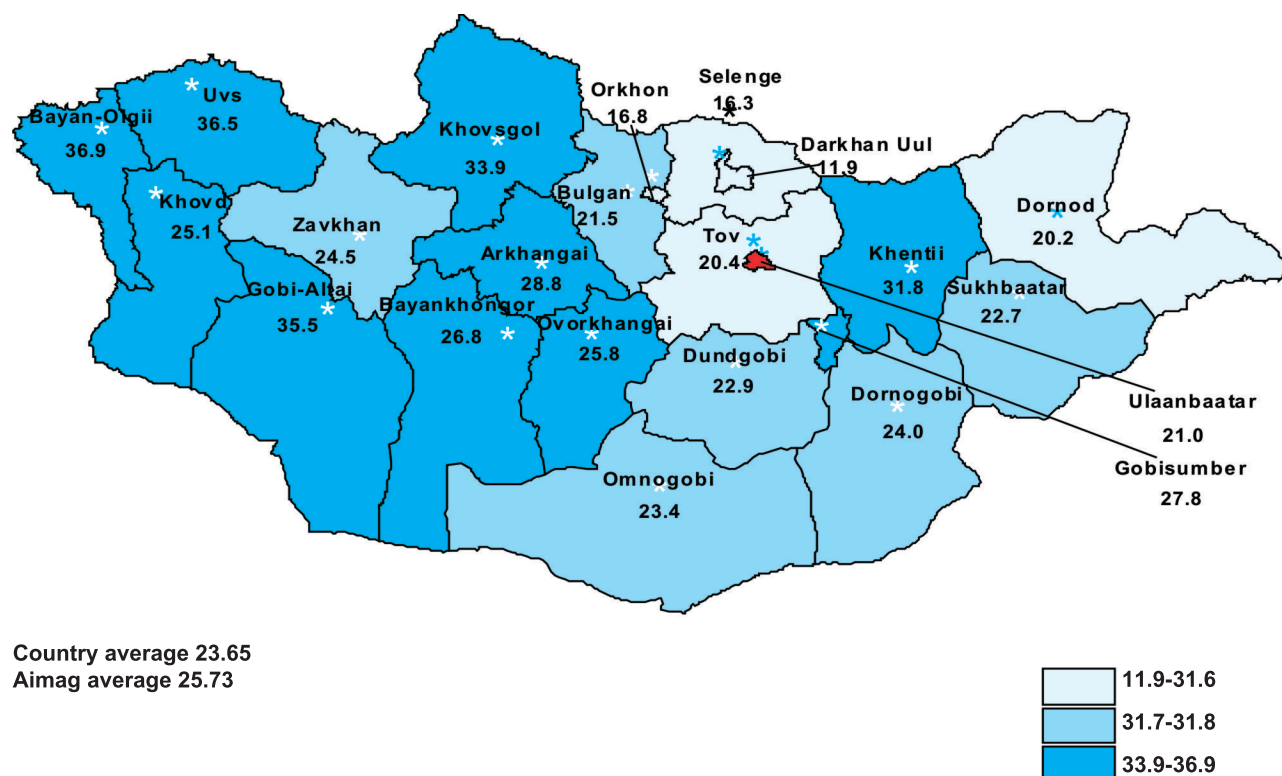
Infant Mortality, 2009

□	Aimag and city	Perinatal mortality per 1000 births	Still births per 1000 births	Neonatal mortality per 1000 live births	Early neonatal mortality per 1000 live births	Post neonatal mortality per 1000 live births
	A	1	2	3	4	5
1	Arkhangai	16.97	6.30	13.18	10.74	2.44
2	Bayan-Ulgii	28.33	22.89	7.94	5.56	2.38
3	Bayankhongor	16.92	5.32	13.12	11.66	1.46
4	Bulgan	12.15	1.87	10.30	10.30	0.00
5	Gobi-Altai	16.55	7.91	12.33	8.70	3.63
6	Gobi-Sumber	11.08	2.77	11.11	8.33	2.78
7	Darkhan-Uul	8.77	3.81	5.74	4.98	0.77
8	Dornogobi	25.26	10.40	18.77	15.02	3.75
9	Dornod	17.45	9.24	9.33	8.29	1.04
10	Dundgobi	12.76	3.65	11.89	9.15	2.74
11	Zavkhan	16.90	8.45	12.25	8.52	3.73
12	Orkhon	13.11	4.37	10.77	8.78	2.00
13	Uvurkhangai	17.19	6.74	12.22	10.52	1.70
14	Umnugobi	15.49	6.97	11.70	8.58	3.12
15	Sukhbaatar	19.97	9.98	11.76	10.08	1.68
16	Selenge	11.34	3.78	8.67	7.59	1.08
17	Tuv	18.10	7.45	11.80	10.73	1.07
18	Uvs	18.30	7.49	17.60	10.90	6.71
19	Khovd	18.21	11.10	7.63	7.18	0.45
20	Khuvsgul	18.54	6.91	14.24	11.71	2.53
21	Khentii	17.09	3.16	17.78	13.97	3.81
22	Aimag average	17.01	7.64	11.77	9.45	2.32
23	Ulaanbaatar	16.78	6.24	13.73	10.61	3.12
24	Country average	16.91	7.02	12.64	9.96	2.68

Infant Mortality Rate (per 1000 Live Births), 2009



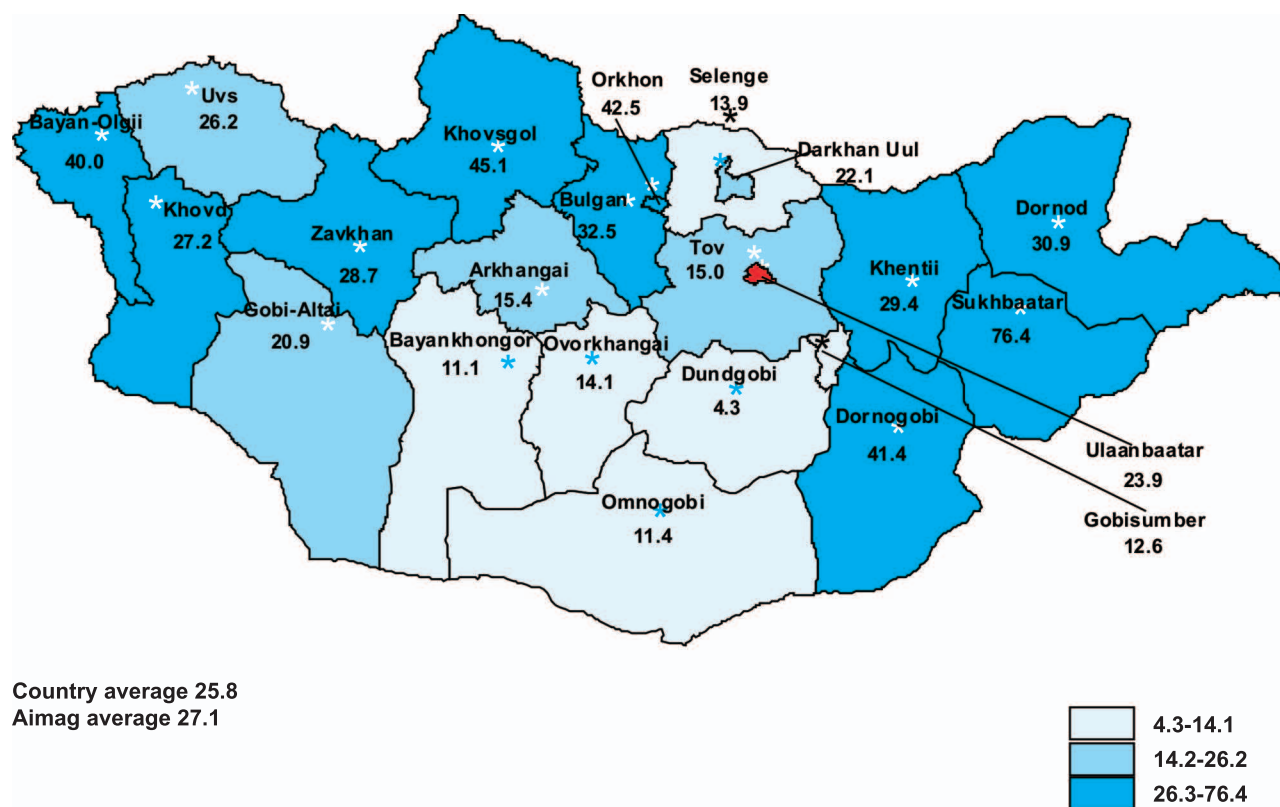
Under 5 Mortality Rate (per 1000 live Births), 2009



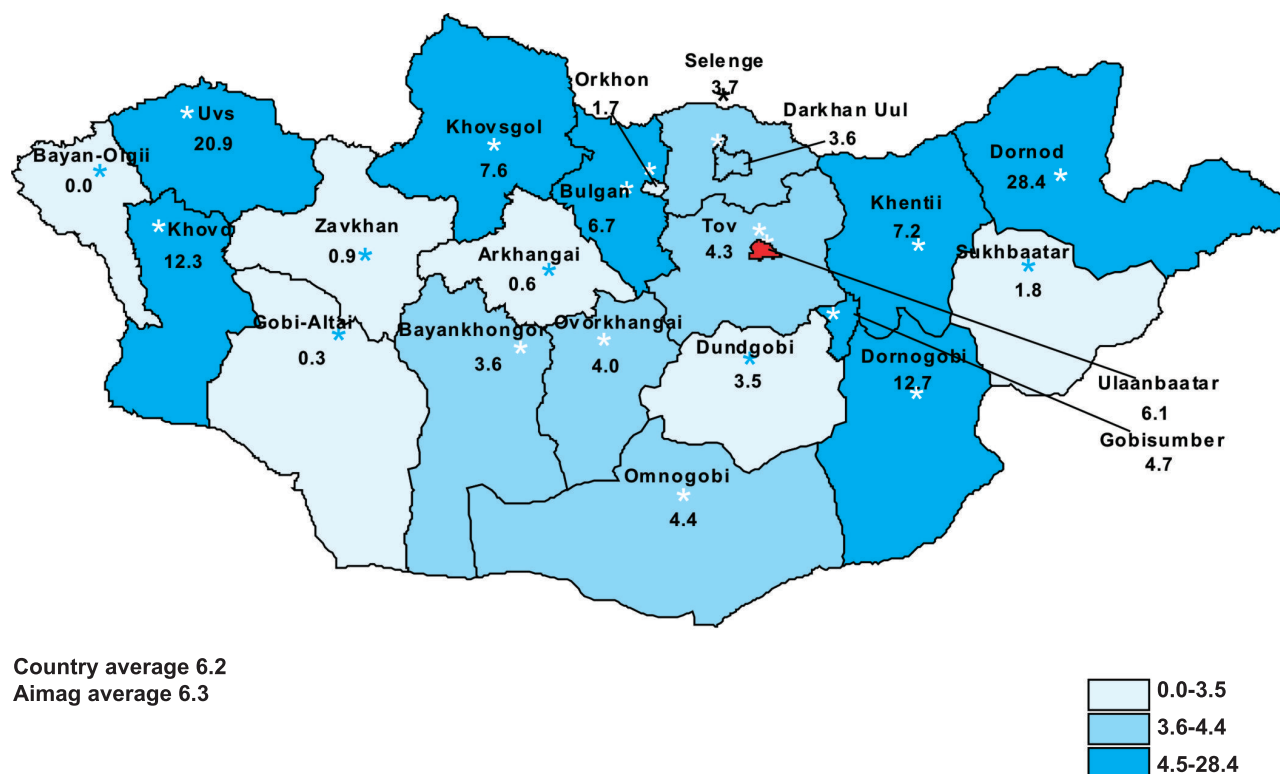
Registered Reportable Infectious Diseases, per 10000 population (2005-2009)

Certain infectious and parasitic diseases	Per 10000 population				
	2005	2006	2007	2008	2009
Typhoid and paratyphoid fevers	0.06	0.01	0.00	0.00	0.00
Salmonella infections	0.51	0.55	0.70	0.80	0.50
Shigellosis	7.24	7.32	9.20	8.90	11.70
Tuberculosis	17.38	18.69	16.70	15.90	15.90
Plague	0.00	0.00	0.00	0.00	0.00
Anthrax	0.09	0.07	0.10	0.10	0.00
Brucellosis	3.30	2.13	1.60	1.50	1.10
Scarlet fever	0.25	0.18	0.10	0.10	0.10
Meningococcal infection	0.32	0.25	0.60	0.30	0.10
Varicella	4.42	5.56	7.70	7.80	6.20
Measles	0.00	0.09	0.10	0.10	0.00
Rubella	0.02	4.81	24.40	0.60	0.00
Viral hepatitis	25.15	26.20	38.40	39.10	25.80
Viral hepatitis A	21.02	21.82	34.20	35.00	22.10
Viral hepatitis B	3.42	3.70	3.50	3.40	2.80
Viral hepatitis C	0.65	0.63	0.60	0.60	0.50
Mumps	6.65	19.86	3.70	2.10	7.50
Mycoses	-	4.24	4.44	4.90	10.20
Syphilis	9.42	11.81	12.77	18.70	18.50
Gonococcal infection	25.15	17.76	17.59	23.10	23.90
Trichomoniasis	25.88	20.48	16.86	24.00	21.70

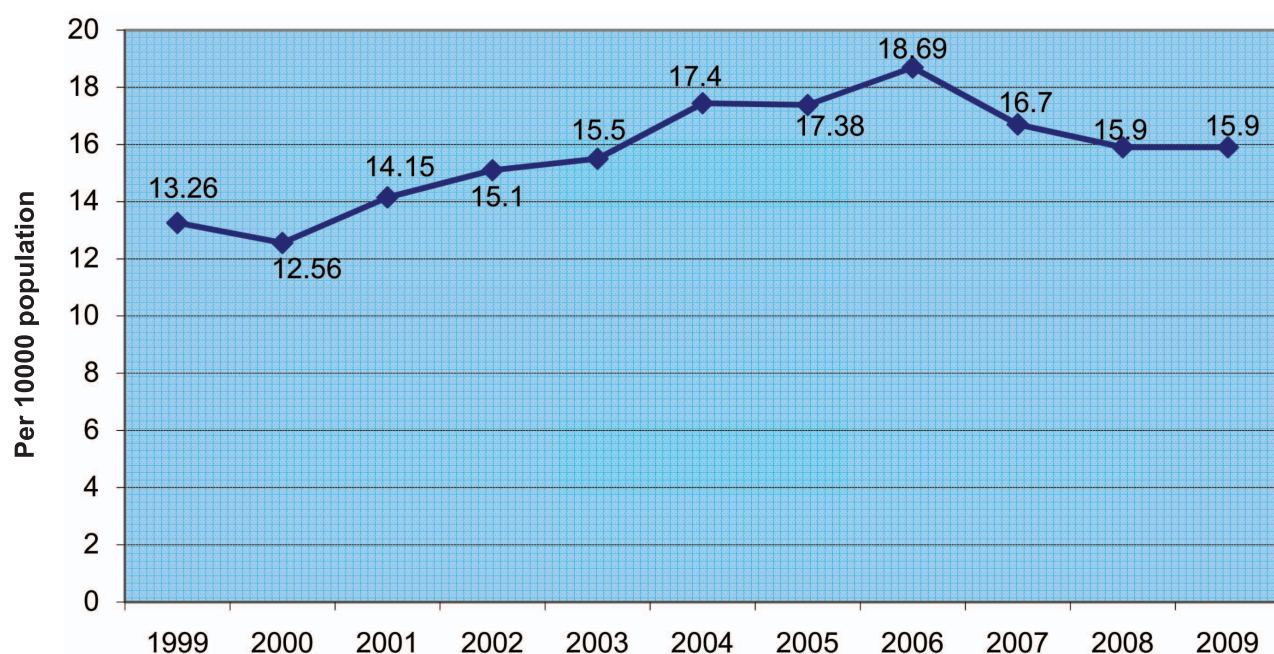
Incidence of Viral Hepatitis, per 10000 population, 2009



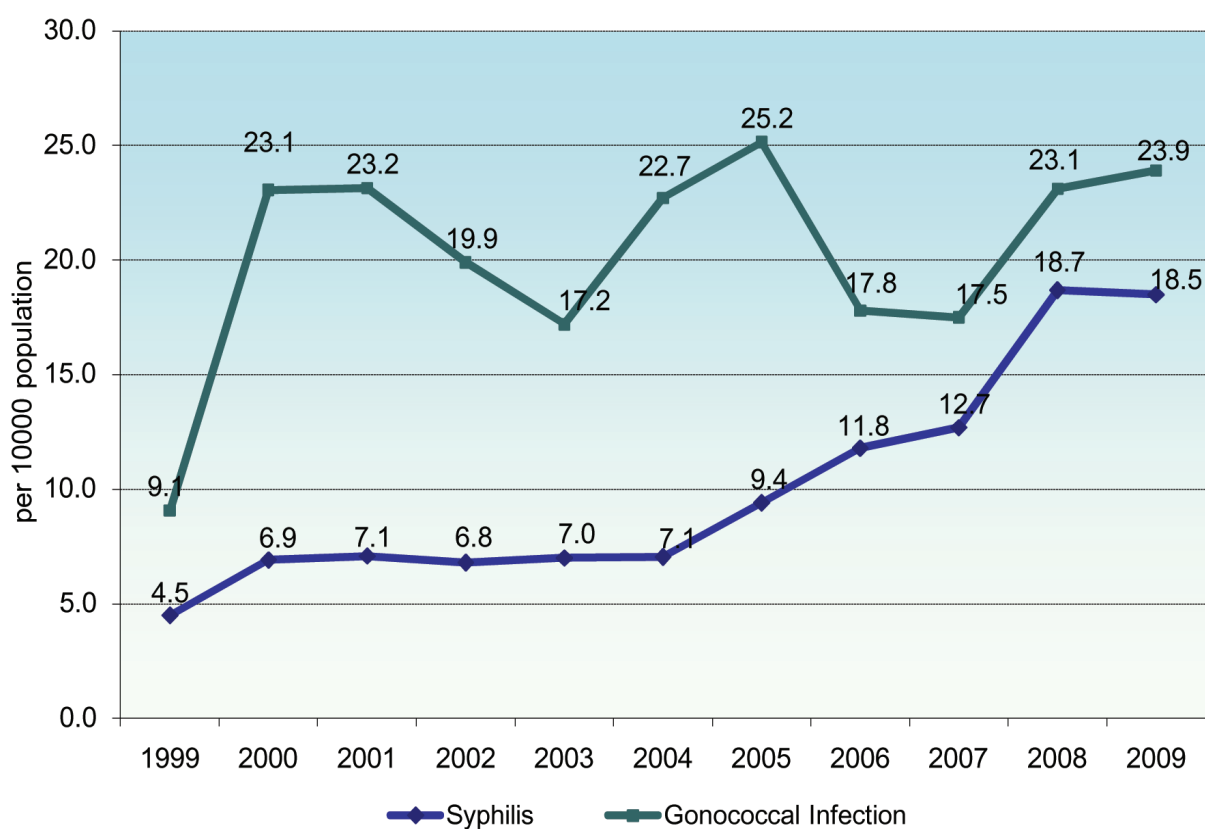
Incidence of Varicella, per 10000 population, 2009



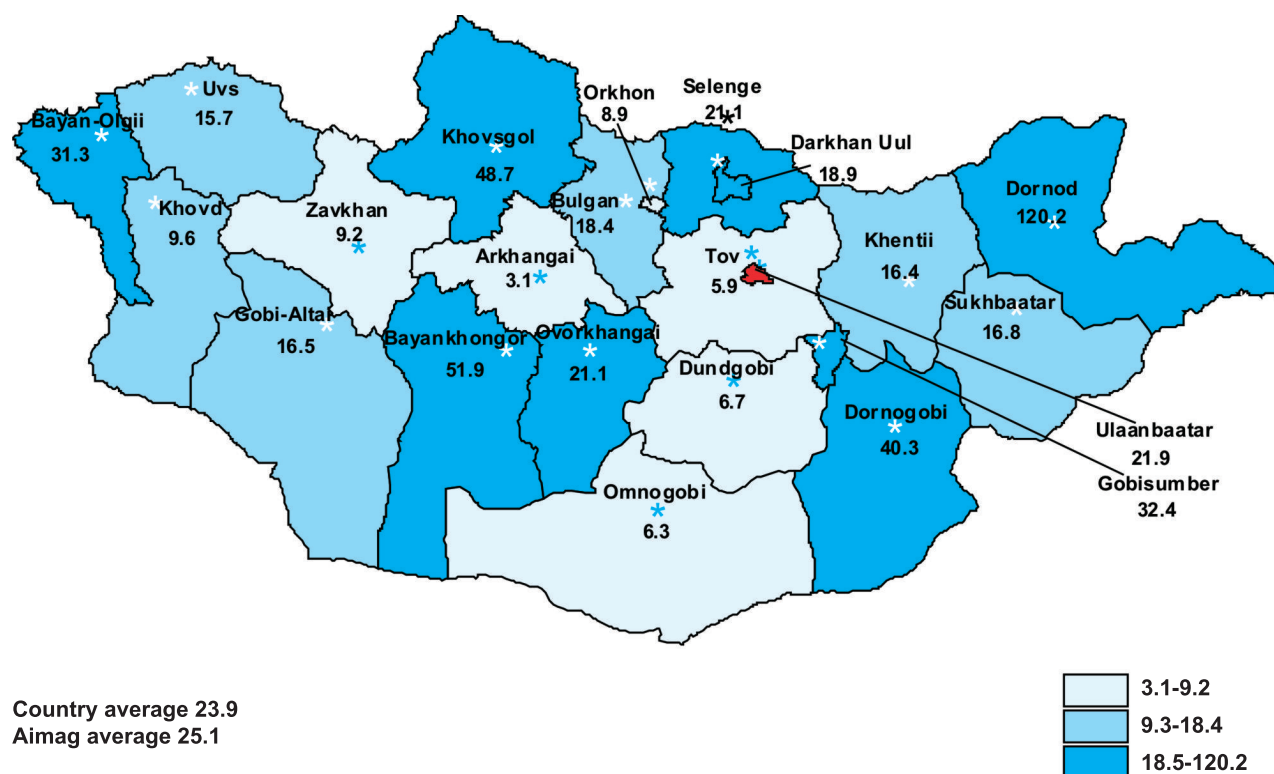
Incidence of Tuberculosis (1999-2009)



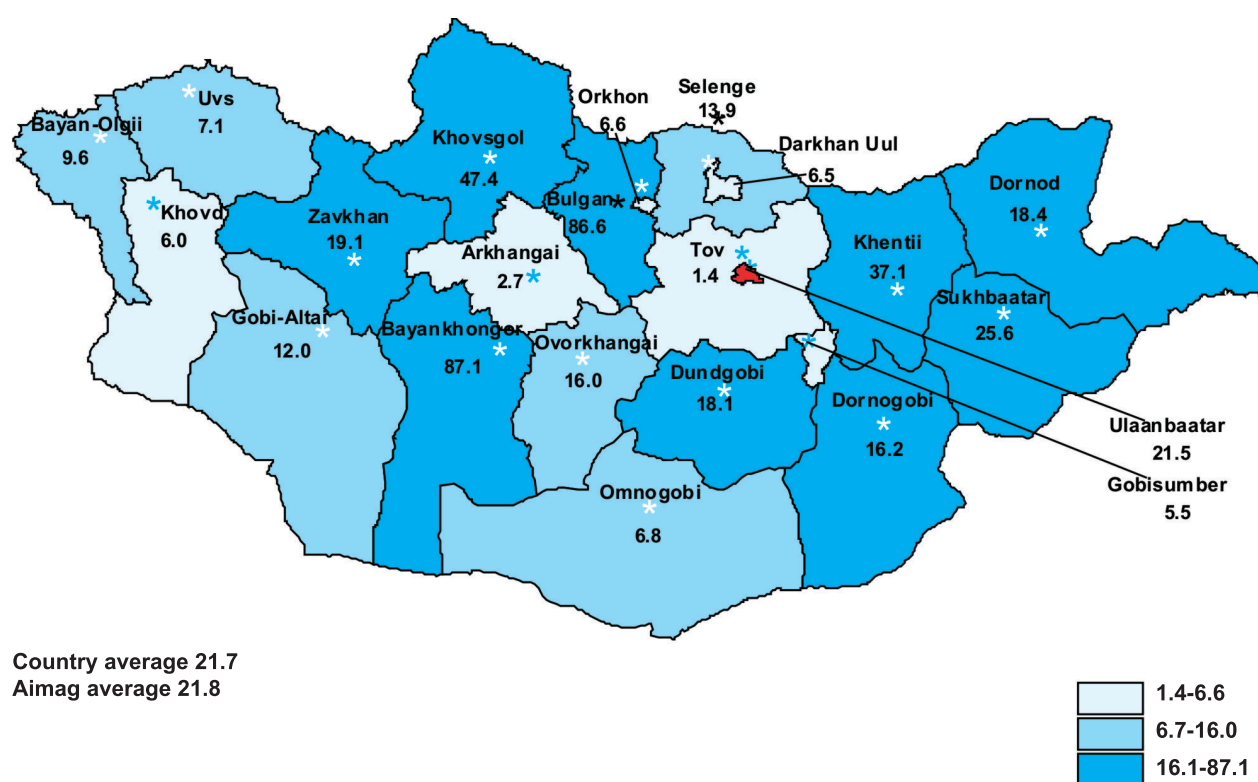
Incidence of Syphilis and Gonococcal Infections (1999-2009)



Incidence of Gonococcal infection, per 10000 population, 2009



Incidence of Trichomoniasis, per 10000 population, 2009

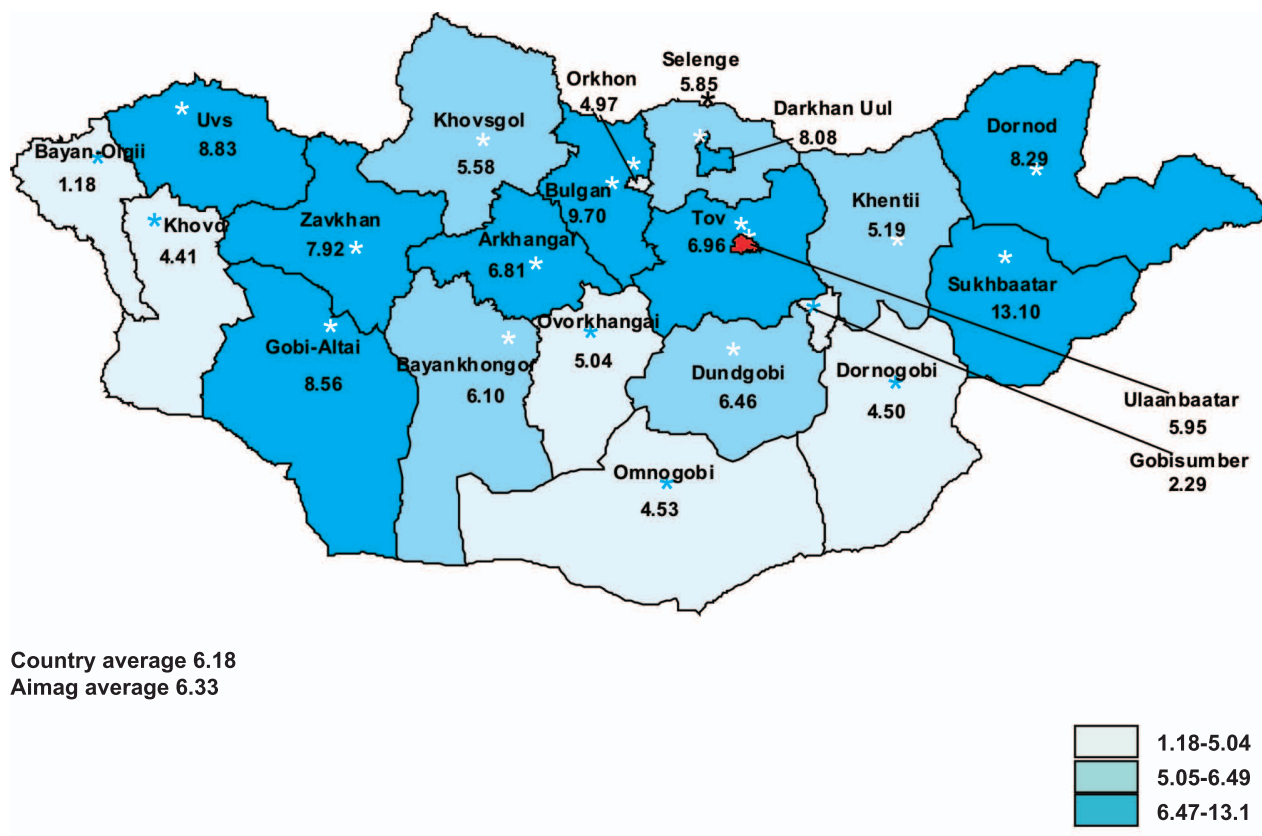


Prevalence, Incidence and Death Rates of Malignant Neoplasms, 2009

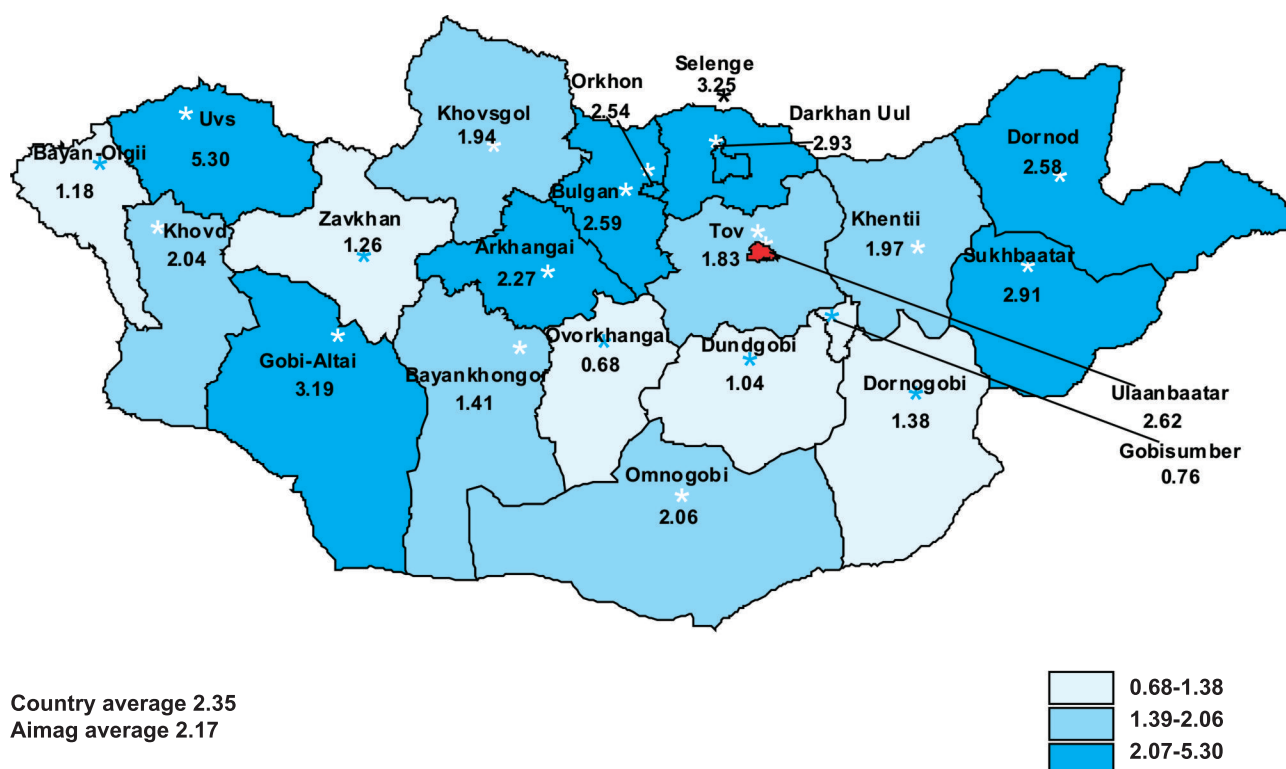
Malignant neoplasms		Prevalence		Incidence						Deaths					
		Abs.number	per 10000 pop	Abs.number			per 10000 population			Abs.number			per 10000 population		
				Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females
A	B	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Lip, oral cavity and pharynx	1	247	0.91	60	41	19	0.22	0.31	0.14	35	22	13	0.13	0.17	0.09
Oesophagus	2	639	2.36	293	160	133	1.08	1.21	0.96	266	156	110	0.98	1.18	0.79
Stomach	3	1491	5.50	637	421	216	2.35	3.18	1.56	488	318	170	1.80	2.40	1.23
Colon	4	210	0.78	69	45	24	0.25	0.34	0.17	48	30	18	0.18	0.23	0.13
Rectus and anus	5	157	0.58	36	16	20	0.13	0.12	0.14	32	21	11	0.12	0.16	0.08
Liver	6	3270	12.07	1674	962	712	6.18	7.27	5.14	1410	822	588	5.20	6.21	4.24
Pancreas	7	149	0.55	92	50	42	0.34	0.38	0.30	71	39	32	0.26	0.29	0.23
Other in digestive organs	8	70	0.26	13	6	7	0.05	0.05	0.05	8	5	3	0.03	0.04	0.02
Larynx	9	108	0.40	18	14	4	0.07	0.11	0.03	20	17	3	0.07	0.13	0.02
Trachea	10	5	0.02	2	1	1	0.01	0.01	0.01	3	2	1	0.01	0.02	0.01
Lung	11	598	2.21	326	251	75	1.20	1.90	0.54	272	220	52	1.00	1.66	0.38
Other in the respiratory system	12	60	0.22	19	14	5	0.07	0.11	0.04	14	11	3	0.05	0.08	0.02
Bone and articular cartilage	13	186	0.69	40	20	20	0.15	0.15	0.14	26	18	8	0.10	0.14	0.06
Skin	14	151	0.56	32	9	23	0.12	0.07	0.17	19	5	14	0.07	0.04	0.10
Mesothelial and soft tissue	15	166	0.61	42	27	15	0.16	0.20	0.11	30	19	11	0.11	0.14	0.08
Breast	16	568	2.10	82	2	80	0.30	0.02	0.58	37	1	36	0.14	0.01	0.26
Cervix uteri	17	1896	7.00	265	0	265	0.98	0.00	1.91	106	0	106	0.39	0.00	0.76
Uterus	18	108	0.40	17	0	17	0.06	0.00	0.12	10	0	10	0.04	0.00	0.07
Ovary	19	277	1.02	63	0	63	0.23	0.00	0.45	26	0	26	0.10	0.00	0.19
Other female genital organs	20	104	0.38	27	0	27	0.10	0.00	0.19	15	0	15	0.06	0.00	0.11
Male genital organs	21	155	0.57	34	34	0	0.13	0.26	0.00	20	20	0	0.07	0.15	0.00
Cyst	22	79	0.29	18	10	8	0.07	0.08	0.06	13	9	4	0.05	0.07	0.03
Urology, nephrology	23	267	0.99	67	28	39	0.25	0.21	0.28	40	16	24	0.15	0.12	0.17
Other urinary organs	24	81	0.30	0	0	0	0.00	0.00	0.00	3	1	2	0.01	0.01	0.01
Ophtalmology	25	53	0.20	10	4	6	0.04	0.03	0.04	4	2	2	0.01	0.02	0.01
Brain	26	149	0.55	50	28	22	0.18	0.21	0.16	43	23	20	0.16	0.17	0.14
Luekaemia	27	114	0.42	37	20	17	0.14	0.15	0.12	25	12	13	0.09	0.09	0.09
Other	28	442	1.63	99	44	55	0.37	0.33	0.40	61	32	29	0.23	0.24	0.21
Total	29	11800	43.55	4122	2207	1915	15.21	16.67	13.82	3145	1821	1324	11.61	13.76	9.55

* Source: National Center for Cancer, 2009 report.

Incidence of liver cancer , per 10000 population, 2009



Incidence of Stomach cancer , per 10000 population, 2009

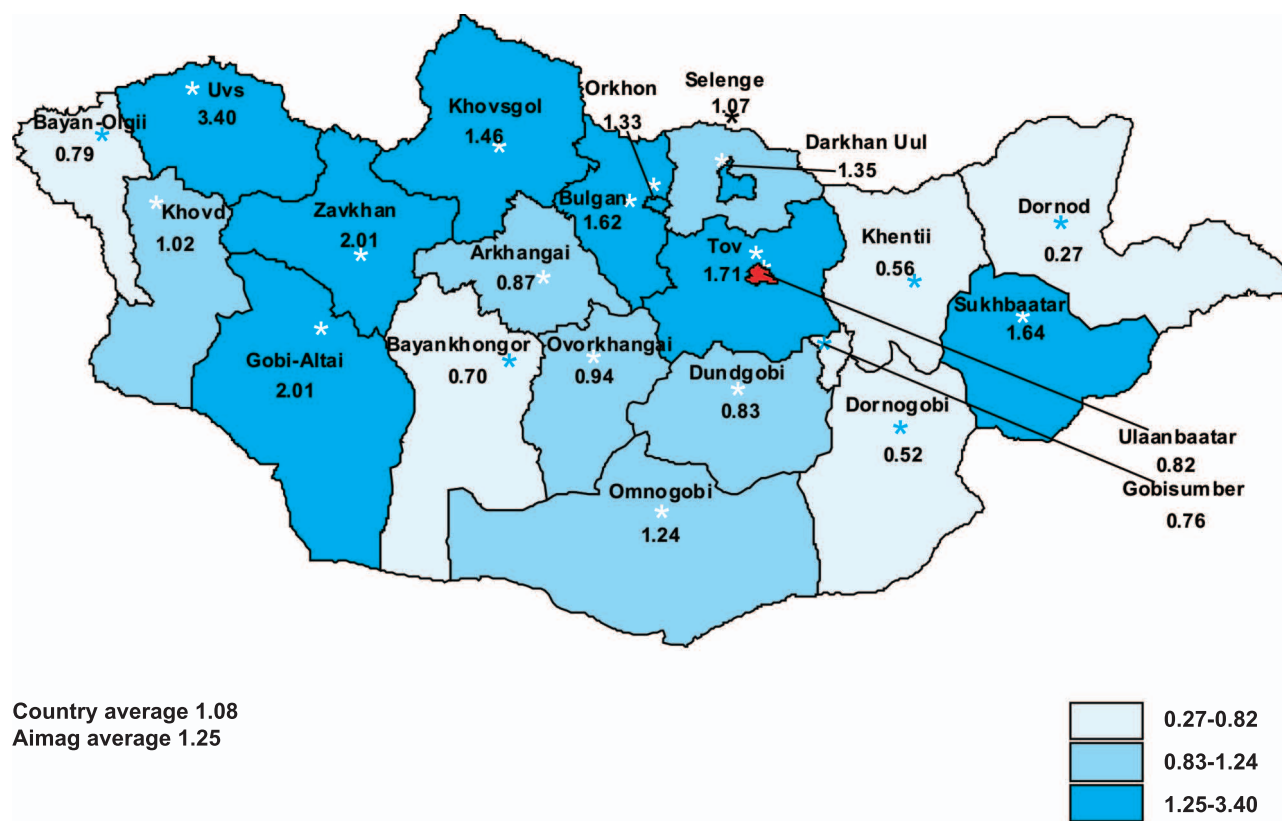


Prevalence, Incidence and Deaths of Malignant Neoplasms, 2009 (by aimag)

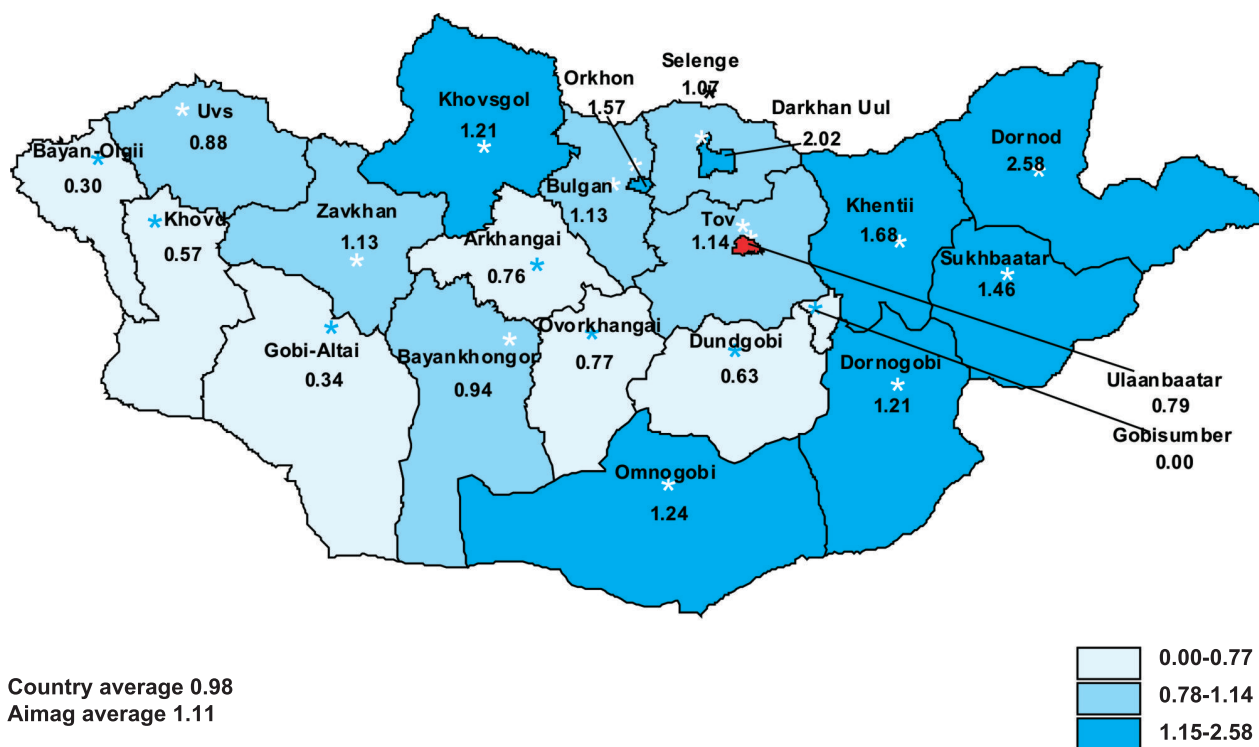
□	Aimag and city	Prevalence		Incidence						Deaths					
		Abs.number	per 10000 pop	Abs.number			per 10000 population			Abs.number			per 10000 population		
				Total	Males	Femals	Total	Males	Femals	Total	Males	Femals	Total	Males	Femals
1	Arkhangai	256	27.7	141	77	64	15.25	16.78	13.73	106	61	45	11.46	13.30	9.66
2	Bayan-Ulgii	209	20.6	52	29	23	5.12	5.73	4.51	76	45	31	7.48	8.90	6.08
3	Bayankhongor	288	33.8	108	60	48	12.67	14.42	11.00	80	41	39	9.38	9.85	8.94
4	Bulgan	321	51.9	128	63	65	20.68	20.42	20.95	98	60	38	15.84	19.45	12.25
5	Gobi-Altai	279	46.8	116	68	48	19.46	23.19	15.85	88	56	32	14.77	19.10	10.57
6	Gobi-Sumber	36	27.5	8	5	3	6.11	7.75	4.52	10	6	4	7.64	9.30	6.03
7	Darkhan-Uul	518	58.1	200	96	104	22.44	22.32	22.55	158	88	70	17.73	20.46	15.18
8	Dornogobi	201	34.8	68	43	25	11.77	15.12	8.52	46	31	15	7.96	10.90	5.11
9	Dornod	444	60.3	152	82	70	20.65	22.64	18.73	137	72	65	18.61	19.88	17.39
10	Dundgobi	209	43.6	66	39	27	13.76	16.40	11.17	43	19	24	8.97	7.99	9.93
11	Zavkhan	316	39.7	133	74	59	16.72	19.00	14.52	99	66	33	12.44	16.95	8.12
12	Orkhon	395	47.9	121	66	55	14.66	16.57	12.88	73	48	25	8.84	12.05	5.85
13	Uvurkhangai	421	36.0	131	77	54	11.19	13.31	9.12	114	70	44	9.74	12.10	7.43
14	Umnugobi	293	60.4	69	32	37	14.22	13.41	15.01	61	32	29	12.57	13.41	11.76
15	Sukhbaatar	445	81.0	137	68	69	24.94	24.78	25.09	118	76	42	21.48	27.69	15.27
16	Selenge	272	26.5	153	92	61	14.93	18.11	11.80	101	58	43	9.85	11.42	8.32
17	Tuv	439	50.1	162	96	66	18.49	21.77	15.16	124	79	45	14.15	17.91	10.34
18	Uvs	396	49.9	179	120	59	22.57	30.22	14.90	162	108	54	20.43	27.20	13.64
19	Khovd	306	34.6	96	55	41	10.85	12.58	9.17	62	38	24	7.01	8.69	5.37
20	Khuvsgul	443	35.8	174	93	81	14.08	15.33	12.88	166	99	67	13.43	16.32	10.65
21	Khentii	281	39.4	86	41	45	12.07	11.69	12.44	54	27	27	7.58	7.70	7.46
22	Aimag average	6768	41.8	2480	1376	1104	15.33	17.24	13.47	1976	1180	796	12.22	14.78	9.71
23	Ulaanbaatar	5032	46.1	1642	831	811	15.04	15.81	14.32	1169	641	528	10.71	12.19	9.32
24	Country average	11800	43.5	4122	2207	1915	15.21	16.67	13.82	3145	1821	1324	11.61	13.76	9.55

* Source: National Center for Cancer, 2009 report.

Incidence of Oesophagus Cancer, per 10000 population, 2009



Indidence of Cervix Uteri Canser, per 10000 population, 2009



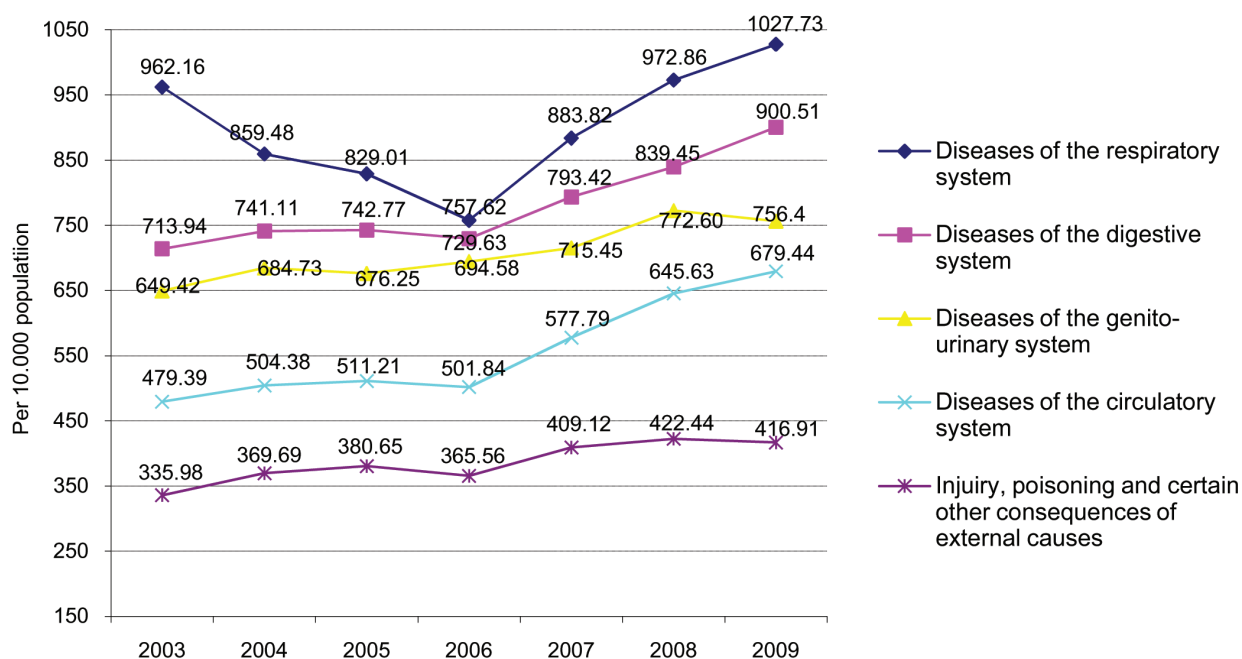
Main 5 Causes of the Outpatient Morbidity, 2009

Aimags and city	per 10000 population				
	Diseases of the respiratory system	Diseases of the digestive system	Diseases of the genito-urinary system	Diseases of the circulatory system	Injury, poisoning and certain other consequences of external causes
Arkhangai	1342.28	1155.21	1209.38	945.32	128.03
Bayan-Ulgii	748.26	487.95	664.38	463.53	45.49
Bayankhongor	1143.06	1669.27	1117.38	861.61	176.14
Bulgan	922.55	544.90	722.65	619.72	132.67
Gobi-Altai	1177.37	1102.70	883.74	746.99	190.44
Gobi-Sumber	2330.91	1351.93	1208.25	1291.56	693.16
Darkhan-Uul	1748.47	1134.90	1008.33	1106.85	385.22
Dornogobi	1224.13	785.63	833.04	603.76	258.36
Dornod	1696.39	1500.88	633.53	528.51	265.75
Dundgobi	651.48	610.40	639.18	518.02	96.97
Zavkhan	623.39	540.19	787.41	515.05	97.78
Orkhon	1037.77	617.62	580.67	498.65	240.48
Uvurkhangai	1001.71	1035.98	874.92	774.52	199.93
Umnugobi	2033.31	991.82	746.75	837.23	380.28
Sukhbaatar	981.22	918.24	790.47	520.91	218.23
Selenge	958.75	549.71	743.84	540.15	173.45
Tuv	1190.57	1587.89	1140.59	841.53	110.68
Uvs	1311.74	996.86	1112.75	674.03	155.49
Khovd	929.92	506.85	513.97	529.80	88.64
Khuvsgul	895.43	613.57	872.93	729.13	150.44
Khentii	1444.15	953.08	660.10	451.48	208.47
Aimags average	1140.85	914.30	841.05	679.21	183.07
Ulaanbaatar	860.15	880.07	631.00	679.77	763.31
Country average	1027.73	900.51	756.40	679.44	416.91

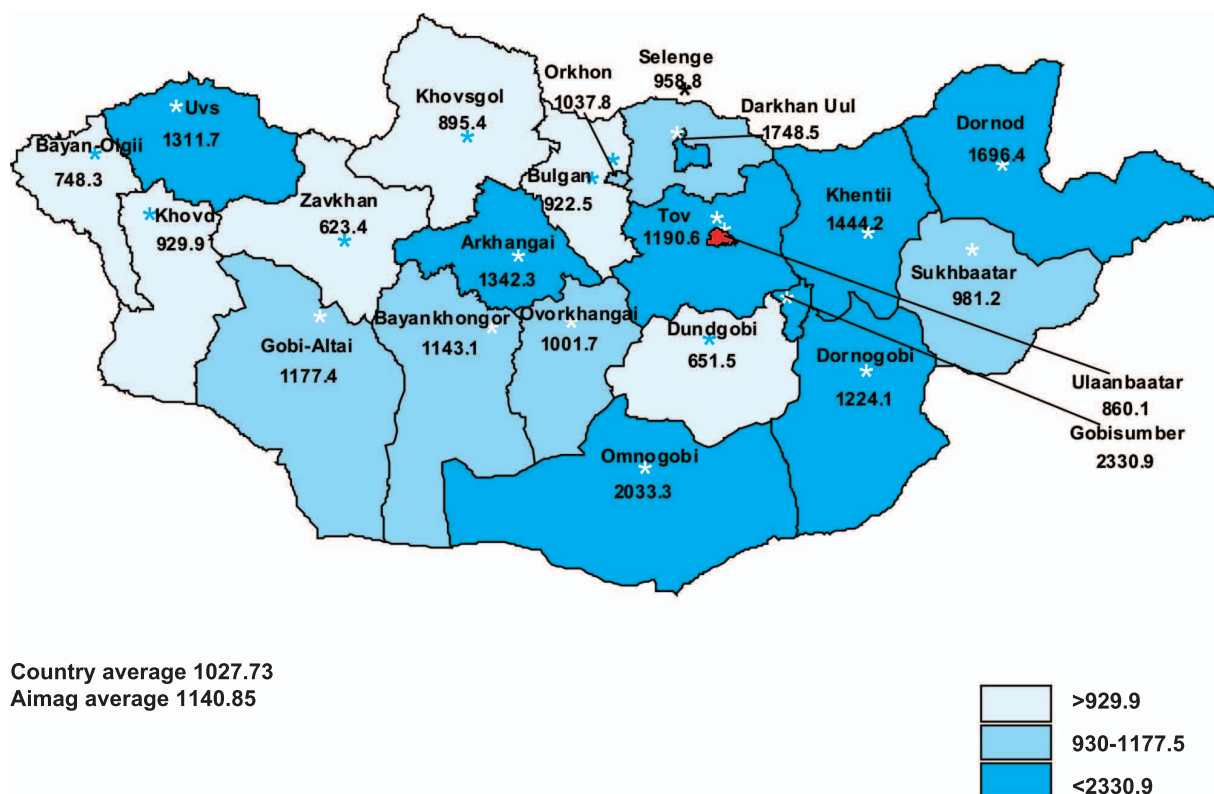
Outpatient and Inpatient Morbidity, 2009

□	ICD-10	Outpatient morbidity			Inpatient morbidity		
		Incidence	Per 10000 population	Percentage	Incidence	Per 10000 population	Percentage
1	Diseases of the respiratory system	278478	1027.73	17.2	91623	338.14	14.1
2	Diseases of the digestive system	244006	900.51	15.0	91387	337.26	14.1
3	Diseases of the genito-urinary system	204957	756.40	12.6	84574	312.12	13.0
4	Diseases of the circulatory system	184104	679.44	11.3	88953	328.28	13.7
5	Injury, poisoning and certain other consequences of external causes	112968	416.91	7.0	25463	93.97	3.9
6	Certain infectious and parasitic diseases	44658	164.81	2.8	22221	82.01	3.4
7	Diseases of the nervous system and sense organs	98841	364.77	6.1	47474	175.20	7.3
8	Diseases of the musculoskeletal system and connective tissue	41880	154.56	2.6	22339	82.44	3.4
9	Pregnancy, childbirth and the puerperium	105876	390.74	6.5	103874	383.35	16.0
10	Other	306974	1132.89	18.9	71461	263.73	11.0
11	Total	1622742	5988.7	100.0	649369	2396.5	100.0

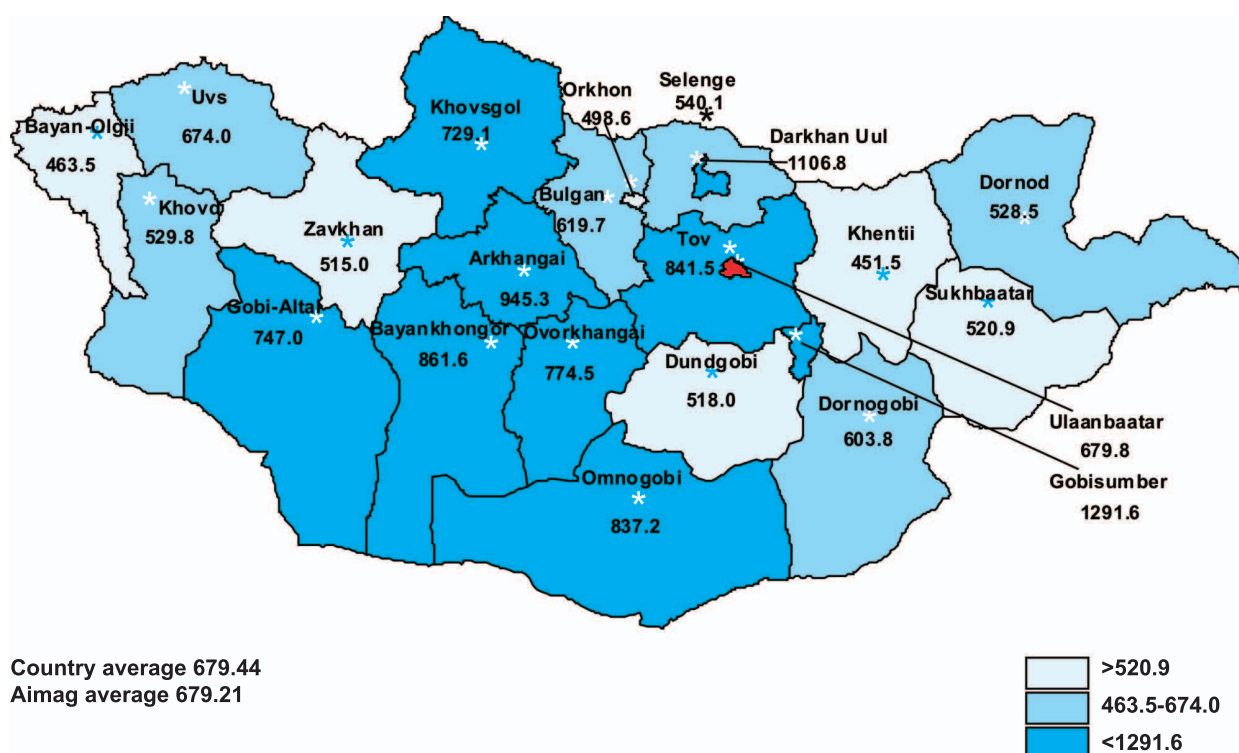
Main 5 Causes of Morbidity (per 10000 population), 2003-2009



Diseases of the Respiratory System, per 10000 population, 2009

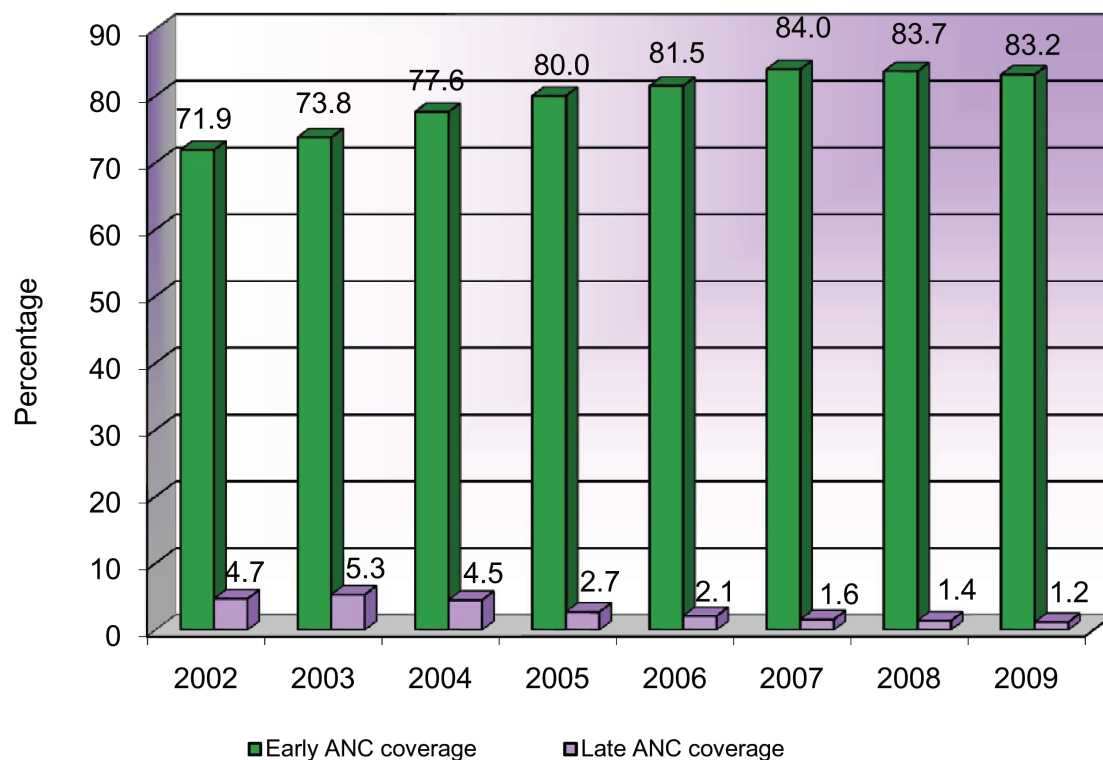
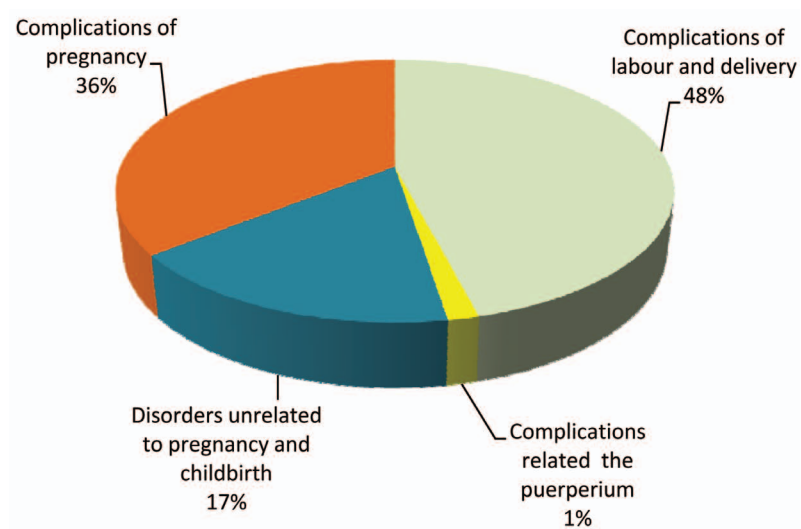


Diseases of the Circulatory System, per 10000 population, 2009



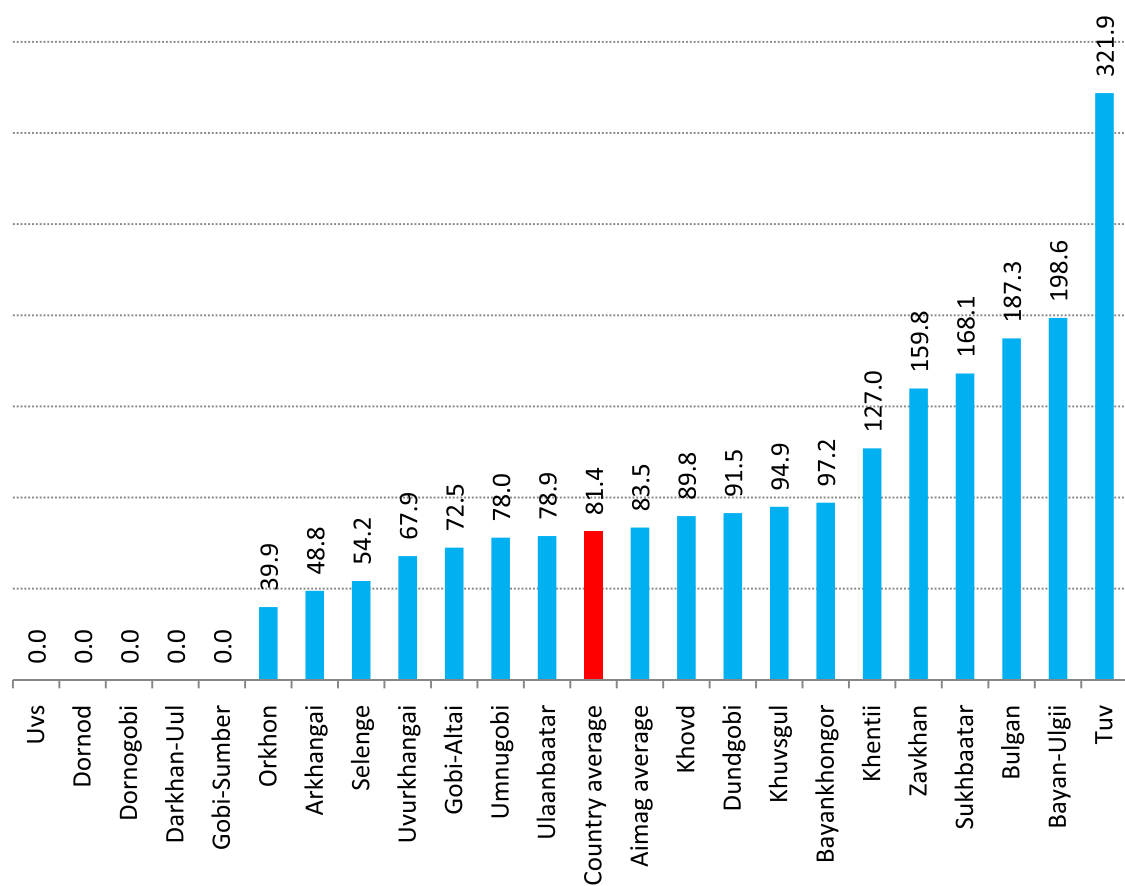
Antenatal Health Care Coverage, 2009

□	Aimag and city	ANC coverage			Percentage of pregnant women who attended to ANC 6 and more times	Percentage of pregnant women with anaemia	Percentage of teenage pregnancy	Percentage of pregnancies above 35 age
		Total	Early ANC coverage	Late ANC coverage				
	A	1	2	3	4	5	6	7
1	Arkhangai	100.0	94.1	0.5	97.6	14.8	5.3	8.3
2	Bayan-Ulgii	100.0	88.6	1.8	87.5	26.0	1.0	11.1
3	Bayankhongor	100.0	87.8	0.7	99.9	4.9	5.1	10.7
4	Bulgan	100.0	87.7	1.1	91.7	4.6	4.8	13.0
5	Gobi-Altai	100.0	82.0	1.2	94.4	7.7	3.6	9.7
6	Gobi-Sumber	100.0	84.2	0.6	97.5	1.1	5.8	12.5
7	Darkhan-Uul	100.0	82.3	1.2	85.1	5.7	5.1	13.7
8	Dornogobi	100.0	84.5	0.8	98.0	0.8	8.4	12.2
9	Dornod	100.0	77.3	1.5	90.6	12.8	5.2	10.9
10	Dundgobi	100.0	88.4	0.3	94.0	3.6	7.5	9.9
11	Zavkhan	100.0	90.9	0.4	84.6	14.7	3.1	8.7
12	Orkhon	100.0	86.8	0.9	64.3	8.8	4.8	11.2
13	Uvurkhangai	100.0	81.0	0.4	76.5	12.3	7.6	10.0
14	Umnugobi	100.0	85.0	1.1	98.7	8.0	8.6	10.8
15	Sukhbaatar	100.0	80.7	1.4	91.2	3.8	6.9	7.2
16	Selenge	100.0	80.6	0.5	99.7	4.0	6.4	11.8
17	Tuv	100.0	88.6	0.3	86.4	2.8	4.4	11.1
18	Uvs	100.0	83.1	0.7	68.3	12.1	2.0	14.9
19	Khovd	100.0	92.7	0.2	69.2	8.6	2.2	14.5
20	Khuvsgul	100.0	86.7	0.5	59.0	11.4	7.8	11.6
21	Khentii	100.0	83.0	0.6	98.6	4.7	7.0	12.0
22	Aimag average	100.0	85.5	0.8	84.1	8.6	5.2	11.3
23	Ulaanbaatar	100.0	80.3	1.8	84.0	7.2	4.9	11.7
24	Country average	100.0	83.2	1.2	84.1	7.9	5.1	11.5

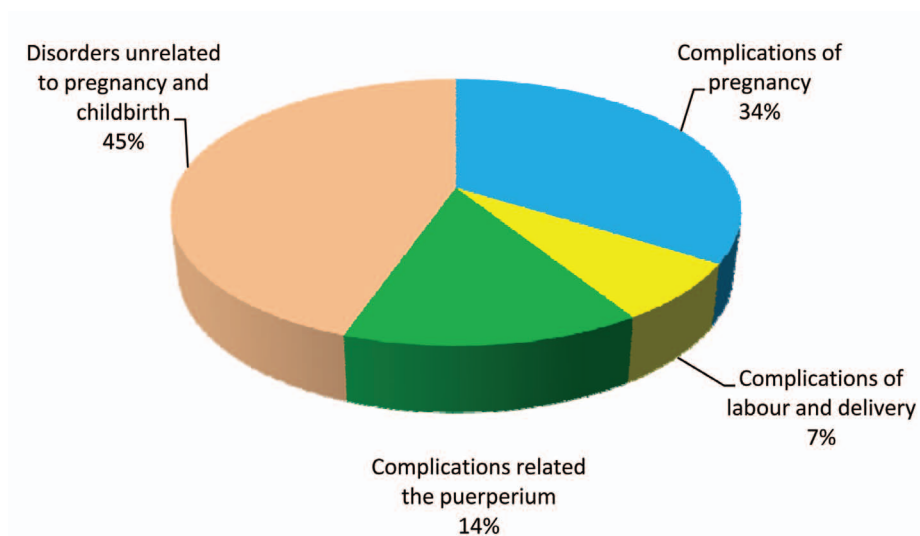
Antenatal Care Coverage, /2002-2009/**Complications of Pregnancy, Delivery and Puerperium, 2009**

Maternal Mortality Ratio /per 100000 Live Births/, 2009

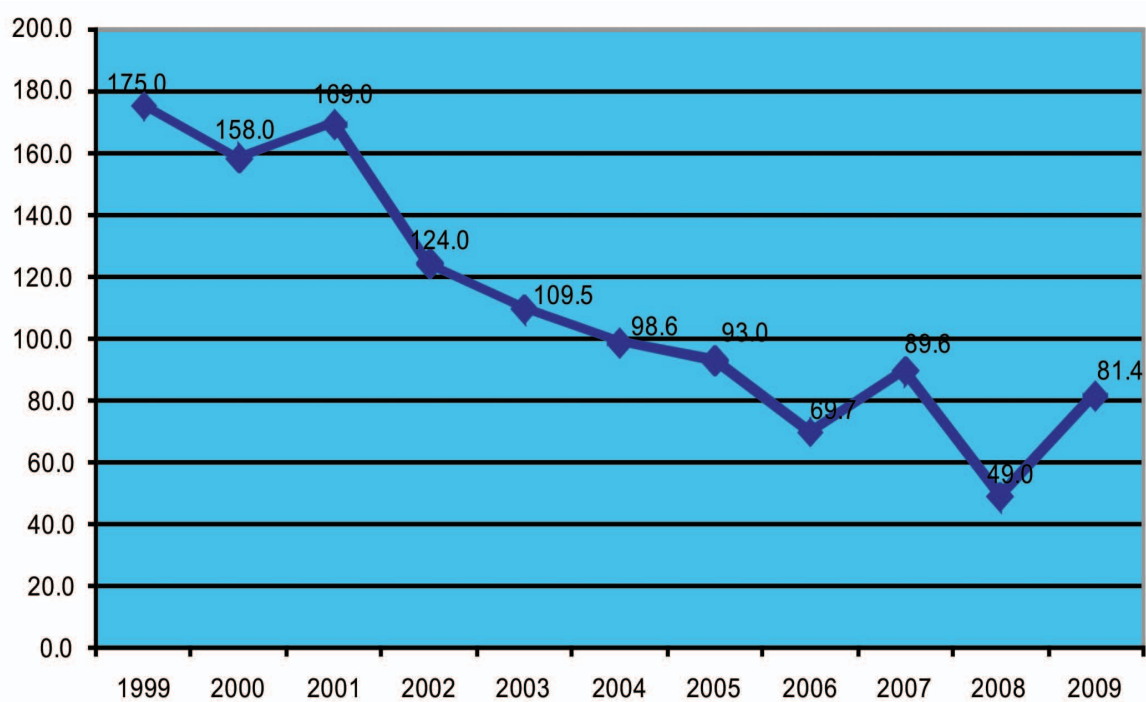
	Aimags and city	per 100000 live births		
		Total	Aimags and city general hospital	Soum hospital
	A	1	2	3
1	Arkhangai	48.8	84.2	0.0
2	Bayan-Ulgii	198.6	174.7	249.7
3	Bayankhongor	97.2	62.8	214.6
4	Bulgan	187.3	141.8	275.5
5	Gobi-Altai	72.5	96.8	0.0
6	Gobi-Sumber	0.0	0.0	0.0
7	Darkhan-Uul	0.0	0.0	0.0
8	Dornogobi	0.0	0.0	0.0
9	Dornod	0.0	0.0	0.0
10	Dundgobi	91.5	0.0	325.7
11	Zavkhan	159.8	113.8	200.4
12	Orkhon	39.9	40.1	0.0
13	Uvurkhangai	67.9	58.3	83.8
14	Umnugobi	78.0	95.2	0.0
15	Sukhbaatar	168.1	189.9	0.0
16	Selenge	54.2	112.4	0.0
17	Tuv	321.9	0.0	697.7
18	Uvs	0.0	0.0	0.0
19	Khovd	89.8	69.4	127.2
20	Khuvsgul	94.9	53.4	155.2
21	Khentii	127.0	90.3	214.1
22	Aimag average	83.5	62.4	135.7
23	Ulaanbaatar	78.9	0.0	0.0
24	Country average	81.4	62.4	135.7



Maternal Mortality by Causes,2009

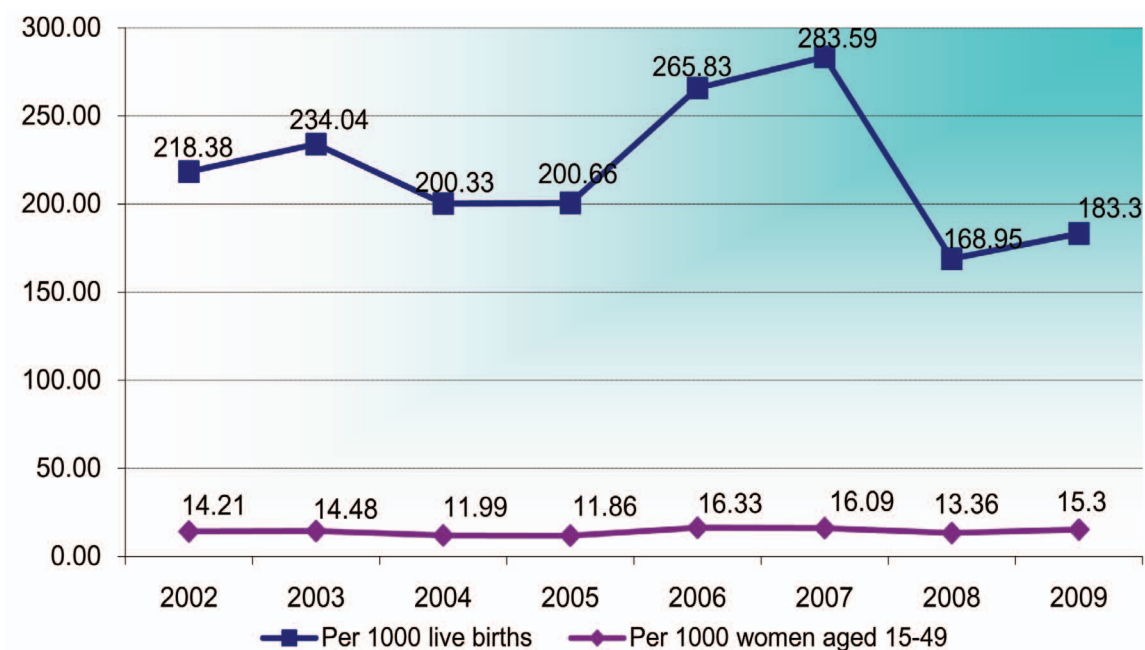
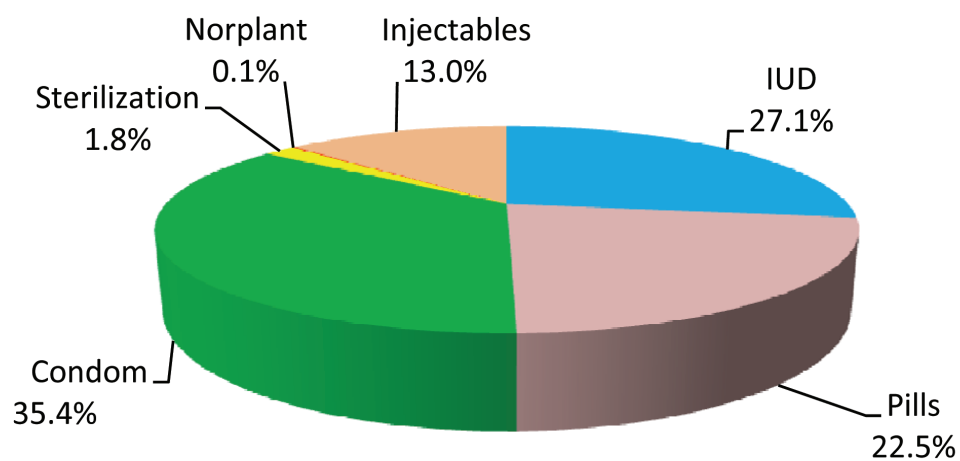


Maternal Mortality Rate, per 100000 Live Births /1999-2009/



Contraceptive Prevalence Rate /CPR/, 2009

□	Aimag, city	Percent of women in the RAG using contraceptives	out of them					
			Pills	Injectables	Norplant	Condom	IUD	Sterilization
	A	1	2	3	4	5	6	7
1	Arkhangai	73.1	20.5	10.7	0.2	35.7	31.2	1.8
2	Bayan-Ulgii	48.4	13.1	20.5	0.0	23.8	42.3	0.3
3	Bayankhongor	57.2	11.5	11.1	0.2	10.9	61.2	5.0
4	Bulgan	42.1	25.4	12.7	1.2	25.9	33.2	1.5
5	Gobi-Altai	57.8	19.3	15.8	0.0	14.6	49.7	0.6
6	Gobi-Sumber	58.3	30.9	33.7	0.0	24.4	10.0	1.0
7	Darkhan-Uul	51.8	26.9	15.2	0.1	29.3	28.0	0.5
8	Dornogobi	58.1	27.8	13.4	0.1	38.5	19.1	1.1
9	Dornod	64.4	19.4	22.8	0.0	16.8	37.6	3.2
10	Dundgobi	70.0	24.9	22.8	0.2	19.2	32.1	0.8
11	Zavkhan	82.4	18.1	16.2	0.1	25.0	39.7	0.7
12	Orkhon	55.6	23.1	11.1	0.1	35.1	29.4	1.2
13	Uvurkhangai	60.2	23.5	18.1	0.1	20.4	35.1	2.7
14	Umnugobi	47.3	33.4	15.0	0.1	22.8	22.8	6.0
15	Sukhbaatar	54.9	11.9	19.1	0.0	5.1	56.5	7.3
16	Selenge	40.3	19.0	13.3	0.2	42.0	23.8	1.8
17	Tuv	42.2	20.8	22.9	0.0	20.7	35.5	0.1
18	Uvs	40.1	23.5	29.5	0.2	22.9	22.2	1.7
19	Khovd	51.9	25.8	22.9	0.0	23.2	25.7	2.5
20	Khuvsgul	56.6	15.4	21.3	0.0	18.4	43.1	1.7
21	Khentii	48.4	26.5	15.3	0.1	21.1	33.7	3.4
22	Aimag average	55.0	21.0	17.4	0.1	24.0	35.4	2.1
23	Ulaanbaatar	50.8	24.6	6.7	0.0	51.7	15.4	1.5
24	Country average	53.2	22.5	13.0	0.1	35.4	27.1	1.8

Abortion /2002-2009/**Contraceptive Methods, 2009**

Abortion, 2009

□	Aimag, city	Abortion		Abortion by age					Late abortion	
		Per 1000 women aged 15-49	Per 1000 live births	Total	Under 20 age		above 35 age		Abs. number	%
					Abs. number	%	Abs. number	%		
	A	1	2	3	4	5	6	7	8	9
1	Arkhangai	4.36	53.68	110	8	7.3	27	24.5	0	0.0
2	Bayan-Ulgii	6.06	61.16	154	1	0.6	52	33.8	5	3.2
3	Bayankhongor	7.93	92.81	191	11	5.8	65	34.0	4	2.1
4	Bulgan	0.69	11.24	12	0	0.0	3	25.0	2	16.7
5	Gobi-Altai	3.71	42.78	59	6	10.2	16	27.1	11	18.6
6	Gobi-Sumber	5.41	63.89	23	1	4.3	8	34.8	0	0.0
7	Darkhan-Uul	33.89	379.79	992	34	3.4	202	20.4	3	0.3
8	Dornogobi	25.47	331.83	442	25	5.7	100	22.6	0	0.0
9	Dornod	31.12	363.21	701	54	7.7	155	22.1	14	2.0
10	Dundgobi	3.40	42.09	46	12	26.1	7	15.2	0	0.0
11	Zavkhan	2.23	26.11	49	1	2.0	11	22.4	5	10.2
12	Orkhon	4.90	58.26	146	8	5.5	24	16.4	6	4.1
13	Uvurkhangai	11.18	125.25	369	26	7.0	95	25.7	26	7.0
14	Umnugobi	12.05	140.41	180	17	9.4	43	23.9	16	8.9
15	Sukhbaatar	2.32	31.09	37	8	21.6	6	16.2	0	0.0
16	Selenge	11.10	182.11	336	18	5.4	93	27.7	7	2.1
17	Tuv	2.45	66.52	62	4	6.5	20	32.3	7	11.3
18	Uvs	22.72	199.92	477	28	5.9	191	40.0	11	2.3
19	Khovd	9.96	105.07	234	9	3.8	75	32.1	5	2.1
20	Khuvsgul	1.54	18.35	58	8	13.8	7	12.1	11	19.0
21	Khentii	22.96	293.33	462	38	8.2	105	22.7	26	5.6
22	Aimag average	10.98	134.12	5140	317	6.2	1305	25.4	159	3.1
23	Ulaanbaatar	21.07	245.16	7462	461	6.2	1681	22.5	353	4.7
24	Country average	15.32	183.27	12602	778	6.2	2986	23.7	512	4.1

Maternal Care During Delivery or Childbirth (by Aimag), 2009

□	Aimag and city	Delivery by percent						Deliveries by nontrained personnel	Percent of deliveries under 20 age	Percent of deliveries above 35 age	Percent of newborn infants weighing at least 2500 g. at birth
		Aimag and city hospital	Private hospital	Rural general hospital	Soum hospital	Feldsher post	At home				
	A	1	2	3	4	5	6	7	8	9	10
1	Arkhangai	57.8	0.0	0.0	42.2	0.0	0.0	0.0	7.0	10.3	3.2
2	Bayan-Ulgii	68.0	0.0	0.0	32.0	0.0	0.0	0.0	0.9	14.0	3.3
3	Bayankhongor	76.7	0.0	0.0	22.9	0.0	0.4	0.0	10.0	8.5	4.5
4	Bulgan	65.8	0.0	0.0	33.8	0.0	0.5	0.0	6.2	11.3	3.9
5	Gobi-Altai	74.1	0.0	0.0	25.1	0.1	0.7	0.1	4.9	11.1	7.1
6	Gobi-Sumber	99.4	0.0	0.0	0.3	0.0	0.3	0.3	9.4	8.3	2.5
7	Darkhan-Uul	94.9	0.0	0.0	4.4	0.0	0.6	0.5	5.9	11.7	2.1
8	Dornogobi	76.9	0.0	16.8	5.6	0.0	0.7	0.3	9.3	10.2	3.9
9	Dornod	93.1	0.0	0.0	6.3	0.0	0.6	0.1	6.4	11.9	3.7
10	Dundgobi	71.6	0.0	0.0	28.2	0.0	0.2	0.1	9.4	8.5	3.9
11	Zavkhan	46.6	0.0	16.7	36.7	0.0	0.1	0.0	4.2	11.8	3.6
12	Orkhon	98.9	0.0	0.0	0.4	0.0	0.7	0.6	6.0	11.9	5.2
13	Uvurkhangai	57.5	1.0	11.4	29.2	0.3	0.5	0.2	9.3	10.0	4.1
14	Umnugobi	81.5	0.0	0.0	18.1	0.0	0.4	0.1	11.6	9.0	5.4
15	Sukhbaatar	88.2	0.0	0.0	11.7	0.0	0.2	0.0	7.2	8.6	3.4
16	Selenge	48.2	0.0	33.5	18.1	0.0	0.2	0.0	7.6	11.8	1.7
17	Tuv	53.6	0.0	0.0	46.3	0.0	0.1	0.0	7.5	11.6	2.9
18	Uvs	62.8	0.0	0.0	36.1	0.0	1.1	0.2	1.8	15.4	6.2
19	Khovd	64.1	0.0	14.6	21.1	0.0	0.2	0.2	2.0	15.7	2.7
20	Khuvsgul	59.1	0.0	0.0	40.8	0.0	0.1	0.0	5.7	9.0	4.4
21	Khentii	69.9	0.0	11.9	18.1	0.0	0.2	0.0	7.8	10.7	4.1
22	Aimag average	70.6	0.1	5.2	23.7	0.0	0.4	0.1	6.2	11.3	3.9
23	Ulaanbaatar	99.1	0.5	0.0	0.0	0.0	0.4	0.2	6.0	12.8	4.5
24	Country average	83.2	0.3	2.9	13.2	0.0	0.4	0.2	6.1	12.0	4.2

Immunization Coverage for Infants, 2009

	Aimag and city	Covered percentage					
		BCG	Poliomyelitis	Diphtheria/Tetanus/ Whooping cough	Measles	Hepatitis B	Penta vaccine
1	Arkhangai	98.4	96.0	95.2	96.6	98.5	96.2
2	Bayan-Ulgii	99.7	95.6	98.0	97.1	99.7	94.2
3	Bayankhongor	97.3	98.6	93.5	98.0	97.6	98.9
4	Bulgan	98.6	98.3	100.0	97.8	99.9	99.4
5	Gobi-Altai	96.9	95.2	97.9	92.8	99.1	99.0
6	Gobi-Sumber	98.3	95.8	100.0	95.6	98.1	97.8
7	Darkhan-Uul	99.8	99.2	98.6	97.4	99.8	99.2
8	Dornogobi	98.4	98.3	99.4	99.5	98.5	93.2
9	Dornod	98.0	99.5	99.1	99.8	98.2	99.7
10	Dundgobi	99.5	99.1	99.3	99.0	99.5	99.3
11	Zavkhan	98.4	91.1	94.3	74.8	98.9	92.3
12	Orkhon	98.7	99.1	100.0	100.0	99.8	98.9
13	Uvurkhangai	97.7	99.3	98.2	93.5	99.1	97.9
14	Umnugobi	98.9	93.7	97.9	100.0	99.4	95.5
15	Sukhbaatar	99.2	97.7	99.1	99.0	100.0	98.7
16	Selenge	99.3	94.9	96.8	96.2	99.0	94.8
17	Tuv	96.9	99.1	99.8	99.3	97.7	99.4
18	Uvs	98.9	99.1	98.8	99.7	98.8	98.6
19	Khovd	99.8	100.0	84.5	96.9	98.7	99.2
20	Khuvsgul	99.6	93.6	87.2	88.3	98.6	90.0
21	Khentii	98.1	99.2	100.0	100.0	98.9	99.6
22	Aimag average	98.7	97.3	96.3	95.7	99.0	96.8
23	Ulaanbaatar	99.0	97.0	95.5	98.0	98.5	98.3
24	Country average	98.8	97.1	96.0	96.5	98.8	97.4

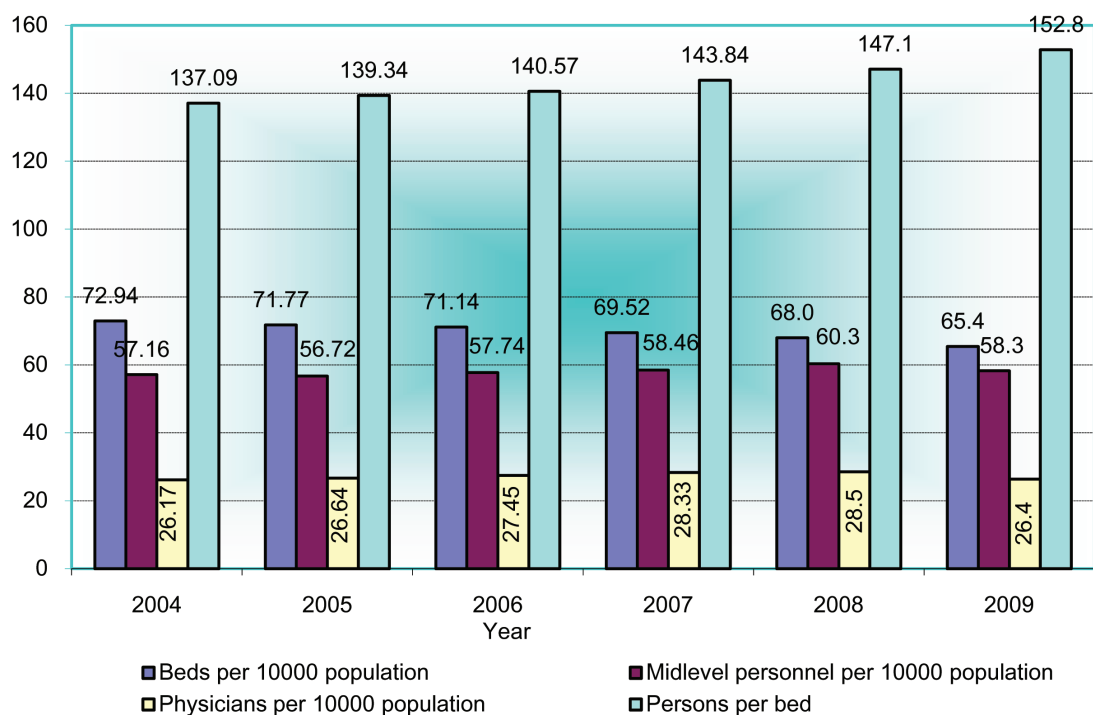
Health Human Resource, 2009

Health care providers		№	Health managers	Public health specialists	Statisticians	State inspector	Physicians		Pharmacists	Other high level personnels	Total midlevel health specialists	Of them								Other workers		All workers			
							Total	From it females				Nurses	From it, senior nurses	Bags feldshers	Dental technician	Other feldshers	Dental technician	Laboratory technician	X-ray technician					Midlevel pharmacist	Other midlevel personnels
																				1	2	3	4		
A		B	1	18	20	0	0	1548	1307	6	308	4924	2512	46	362	1018	578	3	178	8	240	25	3794	10618	8248
Primary level hospitals	Subtotal-1		2	0	0	0	0	0	0	0	0	22	11	0	0	0	0	0	0	0	0	16	38	25	
	Feldsher's posts with beds		3	0	0	0	0	8	7	0	2	36	23	0	5	3	4	0	0	0	1	41	87	69	
	Physician's post with beds		4	13	18	0	0	806	757	0	45	874	809	0	0	5	35	0	0	0	25	459	2215	1910	
	Family hospitals		5	5	0	0	0	31	16	0	10	136	84	0	10	7	18	1	9	0	121	303	221		
	Village hospitals		6	0	0	0	0	554	428	4	219	3262	1339	37	289	846	444	1	136	3	204	0	2647	6686	5074
	Soum hospitals		7	0	0	0	0	149	99	2	32	594	246	9	58	146	77	1	33	5	28	0	510	1289	949
	Intersoum hospitals																								
	Subtotal-2		8	87	16	20	0	1675	1380	35	206	3392	2417	85	163	14	317	3	271	74	66	67	2142	7573	6598
	District hospitals		9	41	14	11	0	711	646	14	86	1035	727	50	24	0	91	0	82	27	17	67	619	2531	2239
	Rural general hospitals		10	5	0	1	0	101	71	3	11	241	145	1	25	14	31	2	13	5	6	0	174	536	436
Aimags general hospitals		11	41	2	8	0	863	663	18	109	2116	1545	34	114	0	195	1	176	42	43	0	1349	4506	3923	
Subtotal-3		12	83	8	24	0	1465	1062	68	302	3123	2426	101	75	0	138	14	235	64	55	116	2261	7334	6236	
Tertiary level hospitals	Regional Treatment and Diagnostic centers		13	13	5	5	0	282	218	9	28	739	551	27	27	0	63	3	63	16	16	0	420	1501	1325
	Specialized Centers and Hospitals		14	70	3	19	0	1183	844	59	274	2384	1875	74	48	0	75	11	172	48	39	116	1841	5833	4911
Other hospitals	Maternity hospitals		15	11	1	2	0	88	68	3	4	183	113	8	44	0	12	0	6	0	2	6	169	461	410
	Other hospitals		16	26	1	3	0	321	252	14	56	597	422	2	1	0	86	1	37	11	18	21	420	1438	1230
	Private hospitals with beds		17	31	0	0	0	471	363	12	74	617	485	8	9	0	38	6	32	6	10	31	609	1814	1483
	Private hospitals for outpatients		18	0	0	0	0	925	752	12	48	683	373	0	10	0	42	139	47	5	10	57	331	1999	1690
	Ministry of health, government implementing agency		19	26	66	0	0	0	0	0	42	6	0	0	0	0	6	0	0	0	0	0	41	181	122
	Health research institutions		20	4	0	1	0	0	0	0	91	24	0	0	0	0	4	0	7	0	1	12	24	144	106
	Aimags health departments		21	40	187	20	0	17	15	1	117	155	52	6	4	0	89	0	3	0	7	0	169	706	531
	Health alliance		22	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Extremely contagious disease center		23	13	0	2	0	51	43	0	70	105	9	0	0	2	24	0	52	0	0	18	136	377	226
	Blood center		24	0	0	0	0	1	1	0	0	0	2	0	0	0	2	0	0	0	0	0	0	3	3
	Emergency center		25	4	0	0	0	78	56	1	21	22	19	0	0	0	3	0	0	0	0	0	108	234	112
	Medical universities and colleges		26	17	18	0	0	368	237	24	150	76	34	8	0	0	8	1	3	2	2	26	137	790	552
	Hot spa		27	15	1	2	0	77	65	1	18	156	122	8	0	0	28	0	2	1	1	2	346	616	459
	Drug supply companies		28	111	0	0	0	10	7	123	64	162	0	0	0	0	0	0	0	0	148	14	247	717	581
	Drug manufactures		29	42	0	0	0	4	3	65	15	103	1	0	0	0	0	0	2	0	94	6	372	601	576
	Drug stores		30	241	0	0	0	2	2	718	36	1303	0	0	0	0	0	0	0	0	1290	13	492	2792	2674
	Other organizations		31	2	10	0	94	39	35	5	0	156	32	0	0	0	118	2	4	0	0	0	0	306	275
	Total		32	771	328	74	94	7140	5648	1088	1622	15789	9017	272	668	1034	1493	169	879	171	1944	414	11798	38704	32112

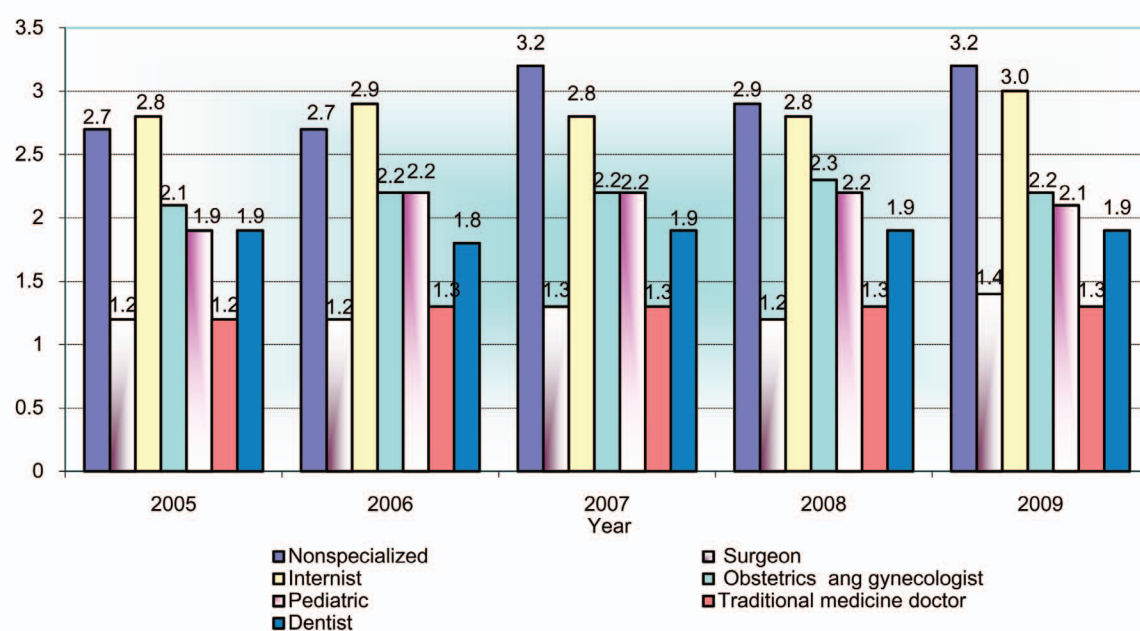
Physicians, by Specialties, per 10000 population, 2009

	Aimag and city																				Internist	Pediatric	Obstetrics and gynecologist	Surgeon	Anesthesiologist	Traumatologist	Oncologist	Otorhinolaryngologist	Ophthalmologist	Neurologist	Psychiatrist and neurologist	Dentist	Stomatologist	Traditional medicine doctor	Phthisiologist	Physiotherapist	Dermatologist	Infectionist	Tuberculosis	X-ray diagnostic	Doctor laboratory	Pathogenist	Nephrologist	Urologist	Dietologist	Hygienist	Venerologist	Epidmiologist	Extremely contagious diseases	Family doctor	Not specialized	Other	Total
A	B		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	18	19	20	21	22	23	24	25	26	27	28	29	30	32	33	34	35																		
1	Arkhangai		2.4	1.7	1.8	0.9	0.2	0.1	0.1	0.1	0.1	0.4	0.1	0.3	0.3	0.6	0.1	0.1	0.1	0.3	0.2	0.2	0.5	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.6	1.7	0.0	13.5																		
2	Bayan-Ulgii		2.0	1.2	1.7	0.9	0.1	0.2	0.1	0.2	0.2	0.2	0.2	0.7	0.2	0.1	0.4	0.2	0.2	0.4	0.2	0.3	0.3	0.1	0.0	0.0	0.0	0.3	0.0	0.0	0.0	1.9	0.9	0.0	13.0																		
3	Bayankhongor		1.6	1.2	0.9	0.6	0.2	0.0	0.0	0.1	0.2	0.2	0.2	0.5	0.5	0.7	0.1	0.0	0.2	0.1	0.2	0.4	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.1	0.1	0.0	3.5	0.0	12.2																		
4	Bulgan		3.1	2.4	1.1	0.8	0.3	0.0	0.0	0.2	0.3	0.5	0.3	0.3	0.3	0.8	0.3	0.2	0.0	0.5	0.3	0.3	0.3	0.0	0.0	0.0	0.0	0.0	0.2	0.0	0.0	0.2	2.3	0.0	15.2																		
5	Gobi-Altai		1.3	2.2	2.3	1.2	0.7	0.2	0.2	0.2	0.3	0.7	0.3	1.0	0.0	0.8	0.2	0.0	0.3	0.3	0.2	0.5	0.7	0.3	0.0	0.0	0.0	0.5	0.2	0.0	0.2	0.0	4.0	0.5	19.3																		
6	Gobi-Sumber		3.1	3.8	2.3	1.5	1.5	0.8	0.0	0.0	0.8	0.8	0.0	0.8	0.0	0.8	0.0	0.0	0.8	0.8	0.8	0.8	0.8	0.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	7.6	1.5	1.5	31.3																		
7	Darkhan-Uul		2.1	1.9	2.4	1.3	0.6	0.6	0.3	0.6	0.3	0.8	0.7	1.7	0.1	0.7	0.0	0.3	0.4	0.7	0.6	0.7	0.7	0.6	0.0	0.0	0.0	0.1	0.2	0.1	0.0	5.2	2.0	0.0	25.9																		
8	Dornogobi		2.1	2.1	2.8	1.0	0.9	0.7	0.2	0.5	0.3	1.6	0.3	1.0	0.0	0.5	0.7	0.2	0.5	0.9	0.3	0.5	0.9	0.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.2	9.7	0.0	30.8																		
9	Dornod		1.6	1.1	1.0	0.8	0.4	0.3	0.3	0.3	0.4	0.5	0.4	1.0	0.1	0.4	0.0	0.1	0.3	0.3	0.5	0.7	0.7	0.3	0.0	0.0	0.0	0.1	0.4	0.0	0.0	1.8	4.9	0.0	18.7																		
10	Dundgobi		2.3	2.9	1.7	0.8	0.4	0.0	0.2	0.4	0.2	0.4	0.2	0.8	0.2	0.8	0.2	0.0	0.2	0.4	0.2	0.6	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.2	0.0	19.0																		
11	Zavkhan		1.5	1.3	1.8	0.8	0.5	0.3	0.1	0.1	0.3	0.6	0.1	0.8	0.1	0.9	0.1	0.0	0.0	0.1	0.1	0.4	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.4	4.3	0.0	14.8																		
12	Orkhon		3.6	1.0	1.9	0.8	0.8	0.5	0.1	0.6	0.6	0.6	0.5	1.8	0.5	1.2	0.1	0.4	0.2	0.4	1.1	1.1	1.1	0.2	0.1	0.0	0.0	0.0	0.0	0.0	5.1	3.3	0.0	27.1																			
13	Uvurkhangai		1.9	1.9	1.8	1.1	0.3	0.3	0.1	0.3	0.3	0.4	0.1	0.7	0.3	1.1	0.2	0.1	0.0	0.2	0.2	0.3	0.6	0.1	0.0	0.0	0.0	0.1	0.0	0.0	0.9	1.9	0.0	14.8																			
14	Umnugobi		1.0	1.4	1.9	0.6	0.2	0.0	0.2	0.2	0.2	0.4	0.2	2.1	0.0	0.8	0.2	0.0	0.2	0.8	0.4	0.2	0.4	0.2	0.0	0.0	0.0	0.2	0.0	0.0	0.0	8.9	1.0	21.8																			
15	Sukhbaatar		3.1	2.0	1.8	0.5	0.5	0.4	0.2	0.2	0.2	0.5	0.4	0.7	0.2	0.7	0.2	0.2	0.4	0.5	0.5	0.4	0.4	0.2	0.0	0.0	0.0	0.4	0.0	0.0	0.0	3.8	0.0	18.4																			
16	Selenge		2.0	1.5	1.6	0.7	0.5	0.1	0.2	0.6	0.2	0.5	0.1	1.1	0.0	0.6	0.0	0.0	0.0	0.1	0.2	0.5	0.4	0.2	0.1	0.0	0.0	0.1	0.2	0.0	0.8	3.9	0.0	16.1																			
17	Tuv		1.3	1.8	1.7	0.5	0.2	0.2	0.2	0.1	0.2	0.5	0.1	1.1	0.0	0.5	0.1	0.1	0.1	0.5	0.5	0.1	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	4.1	0.0	14.9																			
18	Uvs		1.1	2.3	1.4	0.9	0.4	0.1	0.1	0.3	0.3	0.3	0.1	0.6	0.1	0.6	0.1	0.1	0.0	0.3	0.3	0.3	0.3	0.1	0.1	0.0	0.0	0.1	0.0	0.3	0.4	3.0	0.5	14.6																			
19	Khovd		2.6	1.1	1.5	0.9	0.3	0.1	0.2	0.2	0.3	0.5	0.2	0.5	0.1	0.6	0.0	0.1	0.1	0.2	0.2	0.5	0.1	0.0	0.1	0.1	0.1	0.0	0.1	0.0	1.2	1.7	0.0	13.9																			
20	Khuvsgul		1.1	1.6	1.6	0.7	0.2	0.1	0.1	0.2	0.2	0.5	0.2	0.6	0.2	0.6	0.2	0.1	0.0	0.3	0.2	0.2	0.2	0.2	0.0	0.0	0.0	0.1	0.1	0.0	0.9	2.8	0.0	12.9																			
21	Khentii		1.4	2.2	1.5	1.3	0.8	0.1	0.3	0.3	0.3	0.8	0.1	0.8	0.0	1.7	0.0	0.0	0.1	0.6	0.6	0.3	0.7	0.1	0.0	0.0	0.0	0.1	0.0	0.0	2.9	3.1	0.0	20.5																			
22	Aimag average		1.9	1.7	1.7	0.9	0.4	0.2	0.1	0.3	0.3	0.5	0.2	0.9	0.2	0.7	0.1	0.1	0.2	0.4	0.3	0.4	0.5	0.2	0.0	0.0	0.0	0.1	0.1	0.0	1.4	3.4	0.1	17.4																			
23	Ulaanbaatar		4.5	2.7	3.0	2.1	1.5	0.8	0.4	0.7	0.8	1.4	0.8	3.5	0.3	2.0	0.1	0.8	0.4	0.8	0.5	1.8	1.6	0.5	0.1	0.1	0.0	0.2	0.5	0.8	0.1	3.2	3.0	0.0	39.6																		
24	Country average		3.0	2.1	2.2	1.4	0.9	0.5	0.2	0.4	0.5	0.9	0.5	1.9	0.2	1.3	0.1	0.4	0.3	0.5	0.4	1.0	0.9	0.3	0.1	0.1	0.0	0.1	0.2	0.3	0.1	2.1	3.2	0.1	26.4																		

Health Facilities /2004-2009/



Physicians, by Specialities, per 10000 population /2005-2008/



Average Length of Stay in Hospital, by bed Specialities -Total, 2009

№	Aimag and city	By section																							Total
		Internal medicine	Surgery	Obstetrics	Gynecology	Pea diatrics	Infectious diseases	Dermatology	Tuberculosis	Neurology	Psychiatry and narcology	Traumatology	Nephrology	Urology	Reanimation	Ophthalmology	Otolaryngology	Dental	Stomatology	Oncology	Traditional medicine	Venerology	Unspecialized	Other	
A	B	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
1	Arkhangai	8.2	7.2	4.3	7.7	7.6	9.9	0.0	23.4	9.3	11.4	0.0	0.0	0.0	0.0	8.9	8.9	0.0	0.0	8.6	9.1	0.0	0.0	0.0	7.7
2	Bayan-Ulgii	8.6	7.5	4.5	9.2	7.7	10.6	9.4	25.3	9.9	19.2	8.1	0.0	0.0	3.9	9.3	9.2	0.0	7.3	7.6	0.0	0.0	0.0	0.0	8.2
3	Bayankhongor	8.2	5.5	4.8	6.4	7.1	12.0	8.9	53.2	9.0	8.6	8.2	0.0	0.0	0.0	8.7	7.5	0.0	6.9	7.6	10.5	0.0	0.0	0.0	7.6
4	Bulgan	9.3	7.3	4.2	9.8	6.8	11.2	9.4	21.9	8.9	9.5	0.0	0.0	0.0	6.5	7.1	8.4	0.0	0.0	0.0	9.2	0.0	0.0	0.0	8.4
5	Gobi-Altai	8.0	4.5	4.0	17.6	5.5	8.3	10.2	49.8	10.1	14.4	7.9	0.0	0.0	11.5	9.0	8.5	0.0	0.0	7.6	10.2	0.0	0.0	0.0	7.5
6	Gobi-Sumber	8.9	7.7	3.3	6.6	6.4	12.6	0.0	0.0	9.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	7.8
7	Darkhan-Uul	8.8	6.2	4.0	7.1	6.3	9.9	8.0	35.3	9.4	12.8	10.9	0.0	0.0	7.6	6.4	8.0	0.0	7.5	8.3	7.9	0.0	0.0	0.0	8.0
8	Dornogobi	9.0	5.6	4.2	2.7	6.8	14.3	0.0	40.9	9.2	9.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	9.0	0.0	0.0	7.9	7.8
9	Dornod	8.3	7.7	4.5	6.3	6.8	11.5	10.2	46.8	9.2	11.2	0.0	0.0	0.0	17.5	9.1	8.8	0.0	0.0	0.0	10.2	0.0	0.0	0.0	8.4
10	Dundgobi	8.9	6.3	5.0	7.8	7.9	10.4	9.2	37.5	9.3	10.2	7.1	0.0	0.0	8.1	7.5	8.9	0.0	5.2	8.4	9.2	0.0	0.0	0.0	8.2
11	Zavkhan	8.9	7.6	6.1	9.3	7.7	9.1	10.4	31.0	10.3	9.6	9.1	0.0	0.0	0.0	9.2	9.4	0.0	0.0	8.1	9.1	0.0	0.0	0.0	8.5
12	Orkhon	8.9	5.5	5.3	6.6	6.6	12.3	0.0	21.8	10.8	12.0	8.7	0.0	0.0	12.3	0.0	6.4	0.0	0.0	0.0	9.0	0.0	0.0	0.0	8.1
13	Uvurkhangai	8.4	7.3	3.7	8.6	7.0	11.2	10.2	41.3	10.9	11.2	9.6	0.0	0.0	19.7	8.3	8.3	0.0	0.0	7.2	8.8	0.0	7.9	0.0	7.8
14	Umnugobi	8.1	7.2	4.0	4.6	6.4	7.2	10.1	18.7	9.6	8.4	0.0	0.0	0.0	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	7.1
15	Sukhbaatar	9.2	6.9	3.9	5.5	8.3	13.1	8.9	50.1	9.1	11.8	9.6	0.0	0.0	0.0	9.3	8.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	8.7
16	Selenge	8.7	7.1	4.5	7.1	7.4	12.4	8.2	33.4	8.7	9.6	0.0	0.0	0.0	0.0	9.0	7.2	0.0	0.0	7.9	9.1	0.0	0.0	0.0	8.1
17	Tuv	8.5	6.9	4.2	6.0	6.9	11.6	8.5	23.8	10.3	0.0	9.9	0.0	0.0	9.5	6.4	7.2	0.0	0.0	0.0	10.2	0.0	0.0	4.7	8.2
18	Uvs	8.5	6.9	4.4	5.7	7.1	9.8	10.1	16.8	10.1	12.3	0.0	0.0	0.0	5.9	7.3	5.7	0.0	0.0	7.9	10.7	0.0	0.0	0.0	7.5
19	Khovd	8.6	8.0	3.9	7.3	7.0	10.5	10.3	22.9	9.6	14.3	0.0	0.0	0.0	16.7	8.7	7.6	0.0	7.9	0.0	8.3	0.0	0.0	0.0	7.9
20	Khuvsgul	8.1	5.5	2.5	6.4	6.8	10.6	8.8	29.6	9.2	10.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	7.7	0.0	0.0	0.0	7.2
21	Khentii	8.5	6.1	4.5	8.3	7.1	11.8	10.5	26.2	9.2	0.0	0.0	0.0	0.0	0.0	7.8	8.0	0.0	0.0	9.4	0.0	0.0	0.0	0.0	7.9
22	Aimag average	8.5	6.6	4.3	7.3	7.0	11.0	9.3	30.9	9.5	11.8	9.2	0.0	0.0	8.9	8.3	7.8	0.0	9.7	6.4	9.1	0.0	8.3	9.1	7.9
23	Ulaanbaatar	8.8	8.2	4.3	6.6	6.9	11.3	10.4	33.2	9.1	27.8	12.2	11.0	8.4	14.8	6.1	6.0	0.0	7.0	8.9	9.5	0.0	0.0	8.5	8.7
24	Country average	8.6	7.4	4.3	7.1	7.0	11.1	9.9	32.0	9.3	21.1	11.6	11.0	8.4	13.2	6.8	6.7	0.0	7.7	8.3	9.3	0.0	8.2	8.7	8.3

Utilization of Hospital Beds, 2009

A	Aimags and city	Total				Aimags, city general hospitals				Soum hospitals			
		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
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1	Arkhangai	304.60	83.5	7.75	39.32	318.85	87.4	8.37	38.10	247.35	67.8	7.01	35.29
2	Bayan-Ulgii	314.99	86.3	8.19	38.46	310.60	85.1	8.20	37.88	340.74	93.4	8.06	42.29
3	Bayankhongor	287.94	78.9	7.57	38.05	265.62	72.8	7.25	36.66	307.56	84.3	7.79	39.47
4	Bulgan	297.26	81.4	8.37	35.49	306.99	84.1	8.44	36.38	281.85	77.2	8.19	34.42
5	Gobi-Altai	225.33	61.7	7.54	29.90	240.68	65.9	9.93	24.23	202.75	55.5	6.04	33.55
6	Gobi-Sumber	315.41	86.4	7.81	40.38	301.73	82.7	7.71	39.13	374.46	102.6	7.44	50.35
7	Darkhan-Uul	331.83	90.9	8.03	41.33	347.03	95.1	8.04	43.17	287.57	78.8	7.77	37.03
8	Dornogobi	283.19	77.6	7.78	36.41	290.19	79.5	7.15	40.56	293.25	80.3	7.92	37.04
9	Dornod	297.36	81.5	8.44	35.24	312.49	85.6	8.92	35.04	263.41	72.2	7.24	36.40
10	Dundgobi	295.15	80.9	8.20	36.01	301.26	82.5	8.11	37.14	290.07	79.5	8.16	35.56
11	Zavkhan	295.27	80.9	8.51	34.68	320.08	87.7	8.97	35.68	288.37	79.0	8.18	35.27
12	Orkhon	308.06	84.4	8.07	38.19	324.17	88.8	8.11	39.98	326.50	89.5	7.53	43.35
13	Uvurkhangai	266.44	73.0	7.82	34.07	271.56	74.4	8.23	33.01	265.63	72.8	7.54	35.23
14	Umnugobi	272.60	74.7	7.06	38.62	290.11	79.5	7.04	41.24	290.18	79.5	6.87	42.23
15	Sukhbaatar	356.11	97.6	8.70	40.93	389.41	106.7	8.11	48.01	324.81	89.0	9.63	33.75
16	Selenge	273.23	74.9	8.07	33.85	294.83	80.8	8.81	33.46	268.98	73.7	7.61	35.35
17	Tuv	303.03	83.0	8.17	37.10	301.48	82.6	8.25	36.53	330.40	90.5	7.87	41.96
18	Uvs	297.95	81.6	7.50	39.71	303.48	83.1	7.69	39.46	331.85	90.9	7.30	45.49
19	Khovd	318.55	87.3	7.92	40.23	334.70	91.7	8.13	41.17	298.14	81.7	7.46	39.99
20	Khuvsgul	316.73	86.8	7.16	44.25	337.55	92.5	7.12	47.39	295.34	80.9	7.07	41.79
21	Khentii	295.40	80.9	7.87	37.55	294.49	80.7	8.38	35.14	300.54	82.3	7.59	39.61
22	Aimags average	296.93	81.3	7.92	37.51	308.66	84.6	8.13	37.95	288.94	79.2	7.59	38.05
23	Ulaanbaatar	312.28	85.6	8.70	35.91	0.00	0.0	0.00	0.00	276.68	75.8	7.62	36.31
24	Country average	304.00	83.3	8.27	36.78	308.66	84.6	8.13	37.95	288.72	79.1	7.59	38.02

Number of Hospital Beds, by Specialities, per 10000 population, 2009

№	Aimag and city	By section																							Total	
		Internal medicine	Surgery	Obstetrics	Gynecology	Pediatrics	Infectious	Dermatology	Tuberculosis	Neurology	Psychiatry and narcology	Traumatology	Nephrology	Urology	Reanimation	Ophthalmology	Otolaryngology	Dental	Stamatology	Oncology	Traditional medicine	Venerology	Unspecialized	Other		
A	B	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	
1	Arkhangai	21.95	4.97	6.70	4.00	12.54	4.00	0.00	1.51	3.24	0.87	0.00	0.00	0.00	0.00	0.22	0.22	0.00	0.22	0.22	1.19	0.00	0.00	0.00	0.22	62.07
2	Bayan-Ulgii	23.43	3.74	6.79	1.67	10.04	1.48	1.18	0.69	1.38	0.98	1.08	0.00	0.00	0.79	0.69	1.18	0.00	1.18	0.39	0.00	0.00	0.00	0.00	1.97	58.68
3	Bayankhongor	17.83	3.64	7.04	4.10	9.73	4.10	1.76	0.59	3.52	0.47	1.17	0.00	0.00	0.59	1.41	0.35	0.00	0.23	0.23	1.52	0.00	0.00	0.00	0.23	58.52
4	Bulgan	18.42	4.69	6.63	3.07	11.31	5.82	1.62	1.13	2.91	0.65	0.00	0.00	0.00	0.32	0.32	0.32	0.00	0.16	0.00	2.59	0.00	0.00	0.00	0.00	59.95
5	Gobi-Altai	24.33	6.21	7.89	4.03	14.09	8.22	1.34	2.52	4.03	0.34	1.34	0.00	0.00	0.84	0.34	0.67	0.00	0.34	0.34	0.34	0.00	0.00	0.00	0.00	77.18
6	Gobi-Sumber	22.93	9.94	4.59	9.17	16.81	10.70	1.53	0.00	3.82	0.00	0.00	0.00	0.00	1.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	81.01
7	Darkhan-Uul	12.01	2.92	4.38	3.82	8.19	3.14	1.80	3.37	4.49	2.24	3.25	0.00	0.00	0.90	0.45	1.57	0.00	0.22	0.22	3.25	0.22	0.45	0.00	0.00	56.89
8	Dornogobi	16.27	6.58	6.40	1.90	10.73	5.54	0.00	1.73	3.98	0.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.33	0.00	0.00	0.00	3.29	61.60
9	Dornod	19.02	5.57	5.16	1.77	11.28	4.08	1.36	4.76	3.67	2.72	0.00	0.00	0.00	0.68	1.77	0.68	0.00	0.00	0.68	2.04	0.00	0.00	0.00	0.00	65.21
10	Dundgobi	21.69	3.13	8.13	1.46	12.93	5.21	0.63	0.63	1.67	0.21	1.04	0.00	0.00	1.04	0.42	0.63	0.00	0.21	0.42	2.09	0.00	0.00	0.00	0.63	62.15
11	Zavkhan	22.50	5.28	8.42	2.14	11.81	4.52	0.63	0.38	5.66	0.38	0.63	0.00	0.00	0.38	0.13	0.13	0.00	0.13	0.38	3.14	0.00	0.00	0.00	0.00	66.61
12	Orkhon	16.23	3.63	4.60	1.21	3.51	4.85	0.00	2.42	2.42	3.03	3.03	0.00	0.00	0.97	0.00	1.21	0.00	0.00	0.00	1.45	0.00	0.00	2.30	50.88	
13	Uvurkhangai	17.86	3.93	6.07	3.25	8.72	5.55	0.60	1.28	1.03	0.77	1.20	0.00	0.00	0.34	0.17	0.94	0.00	0.34	0.26	1.97	0.00	0.17	0.00	0.00	54.43
14	Umnugobi	15.46	5.98	5.57	1.65	11.13	4.12	0.62	0.41	4.53	0.41	0.00	0.00	0.00	0.62	0.00	0.00	0.00	0.00	0.00	1.03	0.00	0.41	3.92	55.86	
15	Sukhbaatar	20.02	2.73	5.64	2.37	9.28	4.37	1.82	1.64	4.19	1.82	1.82	0.00	0.00	0.00	0.00	0.18	0.00	0.18	0.18	1.46	0.00	0.00	0.00	0.00	57.70
16	Selenge	20.00	4.29	5.17	5.95	12.78	4.68	0.39	2.93	3.02	0.98	0.00	0.00	0.00	0.00	0.20	0.98	0.00	0.20	0.10	1.37	0.00	0.00	0.00	63.02	
17	Tuv	14.26	1.14	5.36	1.48	9.24	4.56	0.68	1.14	4.11	0.00	0.23	0.00	0.00	0.46	0.11	0.11	0.00	0.11	0.00	3.99	0.00	0.00	1.26	48.27	
18	Uvs	21.19	4.41	7.19	3.78	11.48	3.15	1.51	1.26	2.02	0.63	0.00	0.00	0.00	0.38	1.77	0.25	0.00	0.25	0.13	0.76	0.00	0.00	0.13	60.28	
19	Khovd	20.58	3.50	7.35	2.83	11.76	3.50	1.70	1.13	3.17	1.13	0.00	0.00	0.00	0.45	0.23	0.90	0.00	0.23	0.00	2.26	0.00	0.23	2.15	63.09	
20	Khuvsgul	19.02	3.72	5.66	1.54	10.20	3.80	0.65	0.73	1.54	0.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.21	0.00	0.16	0.00	48.88	
21	Khentii	14.32	4.77	5.90	2.67	13.48	6.04	0.56	3.23	2.11	0.00	0.00	0.00	0.00	0.28	0.56	1.40	0.00	0.00	0.56	5.05	0.00	0.00	0.00	60.93	
22	Aimag average	18.86	4.18	6.22	2.86	10.61	4.45	0.93	1.65	3.00	0.96	0.74	0.00	0.00	0.44	0.43	0.61	0.00	0.22	0.20	1.98	0.01	0.07	0.71	59.13	
23	Ulaanbaatar	20.39	6.82	4.68	3.11	5.53	3.46	2.00	2.58	4.92	4.12	4.84	1.39	0.64	1.49	1.26	1.13	0.00	0.36	1.02	4.22	0.00	0.06	0.77	74.80	
24	Country average	19.48	5.24	5.60	2.96	8.56	4.05	1.36	2.03	3.78	2.24	2.39	0.56	0.26	0.86	0.77	0.82	0.00	0.27	0.53	2.88	0.01	0.07	0.73	65.44	

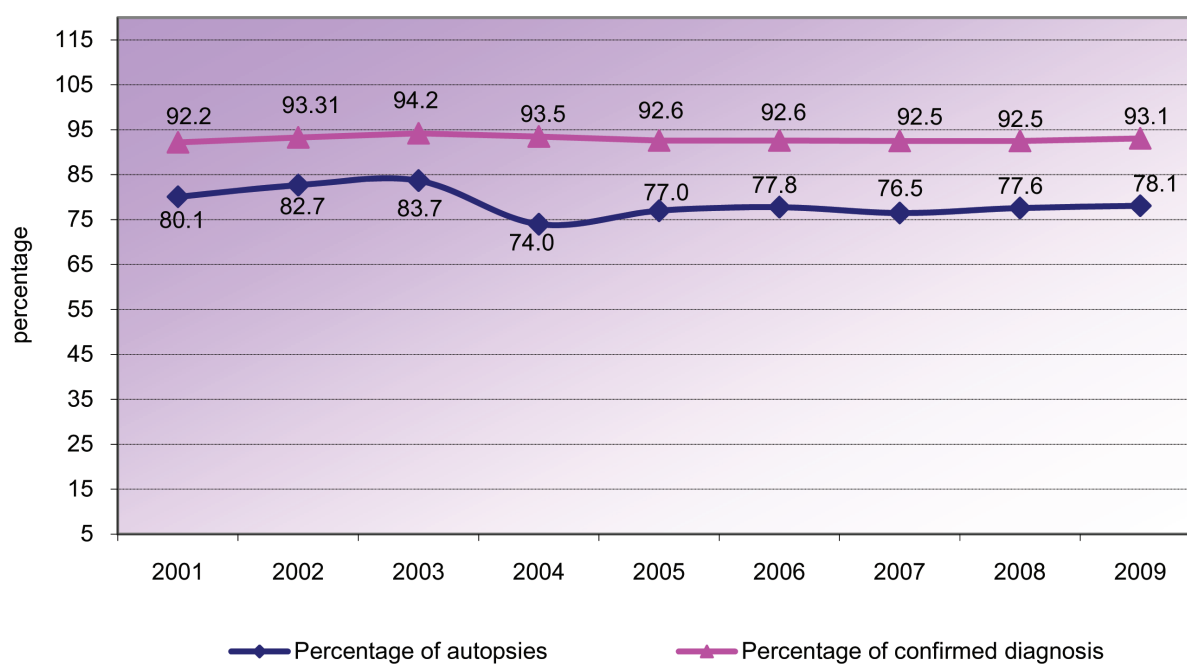
Pathologic Anatomy Difference in Diagnosis, 2009

	Aimag and city	No. of deaths	Percentage of autopsies	Percentage of difference in main diagnosis
			2	3
1	Arkhangai	65	69.2	2.2
2	Bayan-Ulgii	56	7.1	0.0
3	Bayankhongor	73	74.0	9.3
4	Bulgan	21	57.1	0.0
5	Gobi-Altai	38	31.6	25.0
6	Gobi-Sumber	11	72.7	25.0
7	Darkhan-Uul	89	76.4	4.4
8	Dornogobi	54	88.9	10.4
9	Dornod	101	70.3	2.8
10	Dundgobi	22	4.5	0.0
11	Zavkhan	42	54.8	8.7
12	Orkhon	89	74.2	4.5
13	Uvurkhangai	87	67.8	3.4
14	Umnugobi	43	76.7	9.1
15	Sukhbaatar	39	76.9	0.0
16	Selenge	43	62.8	0.0
17	Tuv	28	50.0	14.3
18	Uvs	62	91.9	3.5
19	Khovd	47	57.4	11.1
20	Khuvsgul	90	74.4	3.0
21	Khentii	36	75.0	7.4
22	Aimag average	1136	66.3	5.6
23	Ulaanbaatar	1819	85.5	7.5
24	Country average	2955	78.1	6.9

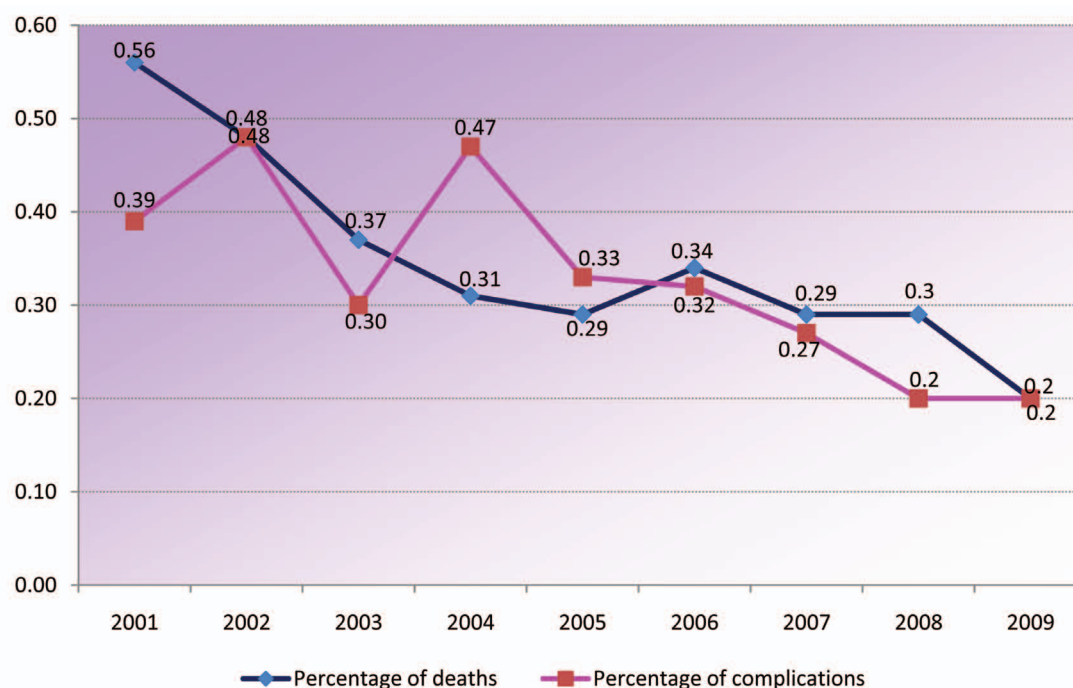
Post Operational Complications and Deaths, 2009

	Aimag and city	Number of operations	Percentage of complications	Percentage of deaths
			2	3
1	Arkhangai	1280	0.0	0.0
2	Bayan-Ulgii	1542	0.0	0.0
3	Bayankhongor	1609	0.0	0.0
4	Bulgan	636	0.8	0.3
5	Gobi-Altai	1410	0.0	0.0
6	Gobi-Sumber	244	0.4	0.4
7	Darkhan-Uul	2298	0.1	0.0
8	Dornogobi	1259	0.0	0.1
9	Dornod	2076	0.0	0.2
10	Dundgobi	638	0.2	0.0
11	Zavkhan	1123	0.5	0.2
12	Orkhon	2229	0.6	0.1
13	Uvurkhangai	2270	0.5	0.3
14	Umnugobi	811	1.1	0.4
15	Sukhbaatar	720	0.0	0.0
16	Selenge	1233	0.6	0.0
17	Tuv	537	0.0	0.0
18	Uvs	1403	0.4	0.1
19	Khovd	1553	0.0	0.0
20	Khuvsgul	1579	0.3	0.1
21	Khentii	1155	0.8	0.5
22	Aimag average	27605	0.3	0.1
23	Ulaanbaatar	51281	0.2	0.3
24	Country average	78886	0.2	0.2

Pathologic Anatomy, Confirmed Diagnosis Percentage, 2001-2009



Indicators of Surgery Operations, /2001-2009/

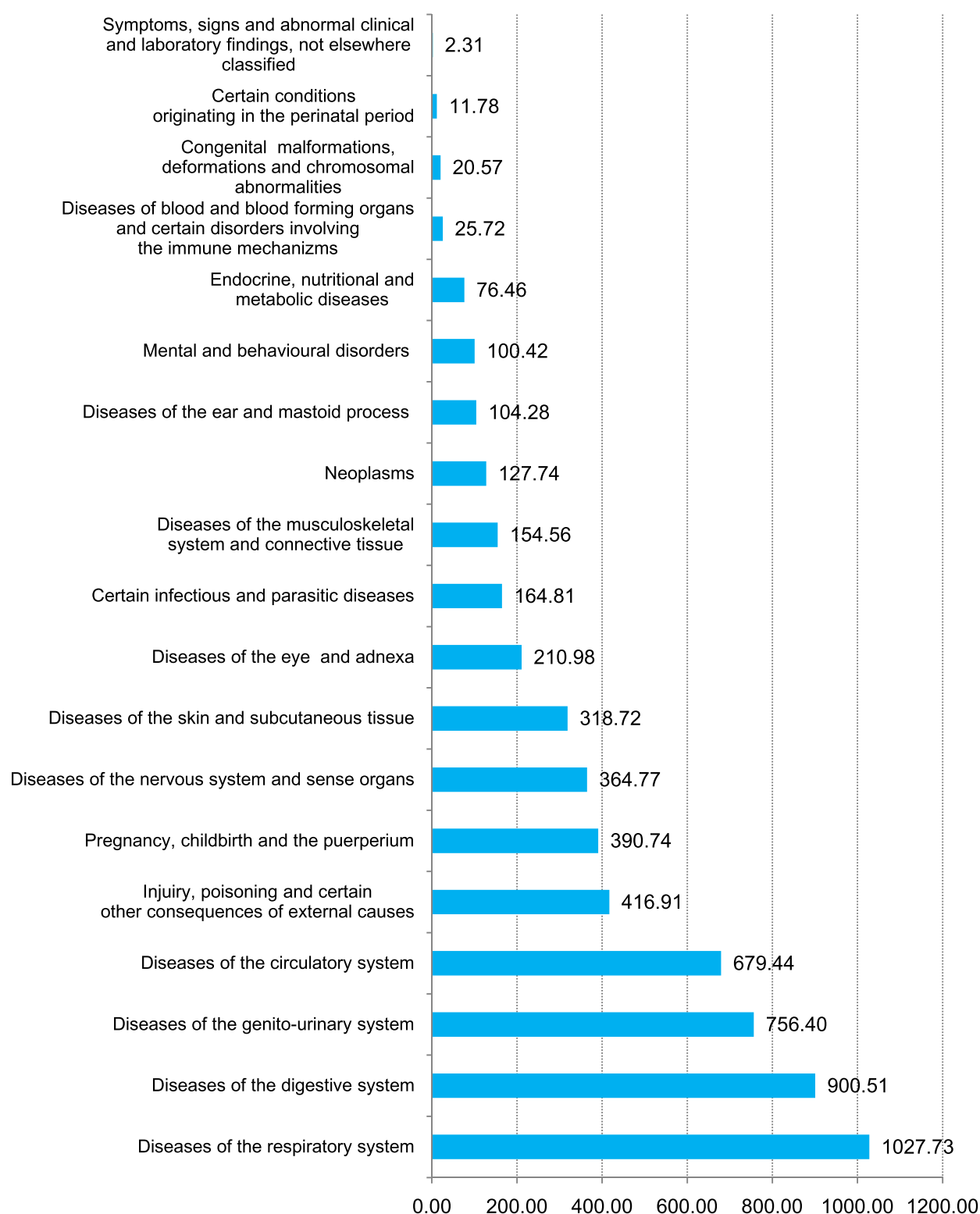


Inpatient Morbidity per 10000 population, 2009

	" Aimags and city"	Total	Certain infectious and parasitic diseases	Neoplasms	Diseases of blood and blood forming organs and certain disorders involving the immune mechanisms	Endocrine, nutritional and metabolic diseases	Mental and behavioural disorders	Diseases of the nervous system and sense organs	Diseases of the eye and adnexa	Diseases of the ear and mastoid process	Diseases of the circulatory system	Diseases of the respiratory system	Diseases of the digestive system	Diseases of the skin and subcutaneous tissue	Diseases of the musculoskeletal system and connective tissue	Diseases of the genito-urinary system	Pregnancy, childbirth and the puerperium	Certain conditions originating in the perinatal period	Congenital malformations, deformations and chromosomal abnormalities	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	Injury, poisoning and certain other consequences of external causes
	A	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
1	Arkhangai	2,427.96	77.64	24.22	8.33	17.95	21.63	195.94	7.25	16.11	429.51	284.50	325.70	42.17	52.66	481.42	359.98	2.38	3.57	0.00	76.99
2	Bayan-Ulgii	2,256.90	42.43	27.76	52.28	17.33	19.20	108.60	20.77	12.70	296.25	412.63	326.68	50.21	90.19	382.30	353.26	0.00	8.47	0.00	35.84
3	Bayankhongor	2,216.58	30.96	18.41	7.74	24.28	26.74	131.93	50.08	12.43	338.33	273.25	341.38	85.14	89.71	303.27	396.03	6.10	7.74	0.00	73.06
4	Bulgan	2,118.84	73.20	31.03	2.91	16.16	23.43	220.42	13.09	13.09	329.65	307.35	249.83	86.78	53.97	363.27	250.80	2.10	3.88	0.00	77.89
5	Gobi-Altai	2,291.15	55.71	44.97	9.73	18.96	24.16	150.00	6.21	15.27	338.09	290.27	436.42	100.00	41.78	319.97	349.00	7.38	5.87	0.00	77.35
6	Gobi-Sumber	3,251.05	134.51	8.41	3.82	20.63	12.99	154.38	4.59	23.69	599.92	645.78	396.17	137.56	94.00	463.89	435.61	1.53	0.76	0.00	110.81
7	Darkhan-Uul	2,336.57	129.60	29.06	6.28	19.19	102.67	164.73	14.59	18.40	274.58	365.58	273.57	73.27	58.35	293.88	389.48	5.27	2.58	0.00	115.46
8	Domogobi	2,236.80	103.14	11.94	6.58	19.38	17.65	215.79	2.94	4.67	287.26	309.06	334.15	41.19	156.78	261.65	364.09	3.81	2.08	0.00	94.66
9	Dornod	2,293.10	122.28	41.71	7.88	20.92	105.57	118.74	48.10	12.64	263.85	360.85	316.43	72.69	83.01	258.00	357.18	4.48	3.94	0.00	94.83
10	Dundgobi	2,232.65	25.23	13.56	10.84	20.23	25.23	144.10	10.43	14.39	352.85	364.95	308.64	62.77	89.05	384.13	337.21	0.63	11.89	0.00	56.51
11	Zavkhan	2,296.88	71.89	25.77	13.70	17.72	14.08	205.12	6.03	10.81	343.12	256.02	309.18	73.78	62.72	494.94	324.39	7.29	3.77	0.00	56.56
12	Orkhon	1,935.73	106.49	24.84	5.09	19.99	49.43	86.02	4.00	14.66	230.31	245.93	273.31	35.98	74.51	207.41	425.48	8.24	6.06	0.12	117.88
13	Uvurkhangai	1,842.11	45.80	31.44	6.66	18.46	22.39	88.18	5.81	16.15	299.56	259.23	288.88	51.01	42.21	280.85	330.40	5.90	5.30	0.43	63.48
14	Umnugobi	2,143.58	42.25	23.70	13.81	22.88	18.96	156.03	16.28	4.12	348.33	355.34	273.10	60.39	69.25	211.47	437.17	1.65	4.74	0.00	84.09
15	Sukhbaatar	2,354.66	139.60	32.58	19.48	15.29	60.97	189.29	8.19	17.11	292.67	308.87	305.78	104.11	89.37	352.55	314.70	0.91	6.55	0.00	96.65
16	Selenge	2,126.64	62.04	18.24	5.46	12.29	21.95	191.40	5.27	26.53	292.46	390.11	253.93	43.12	48.19	412.45	275.98	0.20	1.17	0.00	65.85
17	Tuv	1,789.74	60.02	11.30	5.93	10.84	4.79	190.67	4.45	10.04	284.12	357.61	199.11	52.37	84.44	307.63	168.53	3.19	3.54	0.00	31.15
18	Uvs	2,384.65	68.73	32.79	12.99	17.78	14.25	131.15	58.01	12.99	324.97	328.38	284.62	67.47	51.20	473.90	443.76	1.89	5.93	0.00	53.85
19	Khovd	2,530.41	64.22	39.91	13.79	14.70	28.94	157.49	11.87	25.44	349.36	554.68	300.29	86.38	129.34	293.28	383.39	0.79	13.45	0.00	63.09
20	Khuvsgul	2,163.03	78.33	22.25	16.99	23.39	26.87	159.10	3.40	7.45	360.19	297.48	284.53	56.16	47.99	384.63	346.03	0.16	3.64	0.00	44.43
21	Khentii	2,279.87	147.12	20.64	6.32	18.11	12.49	160.88	10.39	37.20	215.21	526.87	306.88	69.91	108.94	246.52	295.37	0.28	7.58	0.00	89.15
22	Aimag average	2,210.16	76.63	26.13	12.05	18.24	31.59	155.34	15.00	15.42	315.40	344.16	296.22	64.32	73.72	341.48	344.47	3.10	5.41	0.04	71.42
23	Ulaanbaatar	2,672.55	89.97	90.09	11.13	29.20	57.03	204.62	50.57	18.70	347.36	329.21	398.07	72.34	95.36	268.63	440.94	18.76	20.10	3.09	127.37
24	Country average	2,396.50	82.01	51.91	11.68	22.66	41.84	175.20	29.34	16.74	328.28	338.14	337.26	67.55	82.44	312.12	383.35	9.41	11.33	1.27	93.97

Outpatient Morbidity (per 10000 population), 2009																					
	Aimag and city	Total	Certain infectious and parasitic diseases	Neoplasms	Diseases of blood and blood forming organs and certain disorders involving the immune mechanisms	Endocrine, nutritional and metabolic diseases	Mental and behavioural disorders	Diseases of the nervous system and sense organs	Diseases of the eye and adnexa	Diseases of the ear and mastoid process	Diseases of the circulatory system	Diseases of the respiratory system	Diseases of the digestive system	Diseases of the skin and subcutaneous tissue	Diseases of the musculoskeletal system and connective tissue	Diseases of the genito-urinary system	Pregnancy, childbirth and the puerperum	Certain conditions originating in the perinatal period	"Congenital malformations, deformations and chromosomal abnormalities"	"Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified"	Injury, poisoning and certain other consequences of external causes
	A	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
1	Arkhangai	6619.05	60.99	12.33	27.03	60.99	135.49	444.11	146.52	165.34	945.32	1342.28	1155.21	148.47	129.22	1209.38	373.39	19.46	13.63	0.00	128.03
2	Bayan-Ulgii	3513.29	86.15	5.71	82.60	23.73	27.67	157.23	29.24	23.33	463.53	748.26	487.95	81.32	150.44	664.38	355.92	0.00	10.14	0.00	45.49
3	Bayankhongor	7379.41	266.44	11.96	25.68	69.07	120.32	303.62	329.65	261.99	861.61	1143.06	1669.27	339.15	192.33	1117.38	407.64	7.15	27.56	0.00	176.14
4	Bulgan	4403.31	191.01	20.52	7.76	33.29	34.74	330.14	88.07	95.99	619.72	922.55	544.90	146.57	110.21	722.65	286.19	2.26	7.27	2.59	132.67
5	Gobi-Altai	5930.64	72.32	26.01	60.57	39.60	135.40	367.96	200.67	104.53	746.99	1177.37	1102.70	217.12	83.39	883.74	401.52	8.05	11.58	0.00	190.44
6	Gobi-Sumber	9228.12	113.87	7.64	4.59	78.72	49.68	376.77	256.02	199.47	1291.56	2330.91	1351.93	380.59	298.05	1208.25	439.43	1.53	3.06	0.00	693.16
7	Darkhan-Uul	7899.19	176.84	68.79	25.70	58.57	250.45	273.12	396.10	141.72	1106.85	1748.47	1134.90	438.74	123.32	1008.33	390.16	5.27	7.97	0.00	385.22
8	Dornogobi	5534.02	190.70	10.56	14.71	57.80	40.67	373.26	44.13	70.78	603.76	1224.13	785.63	259.57	262.34	833.04	372.40	5.19	11.94	0.00	258.36
9	Dornod	7281.85	281.37	30.84	45.92	81.65	228.66	258.41	295.77	296.45	528.51	1696.39	1500.88	398.76	182.33	633.53	364.66	4.62	13.45	9.92	265.75
10	Dundgobi	3656.57	44.42	12.30	16.06	27.32	46.71	189.56	69.44	49.63	518.02	651.48	610.40	157.87	133.68	639.18	340.34	0.63	13.76	0.00	96.97
11	Zavkhan	3760.72	81.32	17.72	25.51	26.52	51.40	277.01	55.30	35.07	515.05	623.39	540.19	102.68	86.22	787.41	328.66	7.29	4.52	0.00	97.78
12	Orkhon	4560.68	148.41	18.54	11.51	42.77	140.05	149.14	78.38	36.34	498.65	1037.77	617.62	218.68	162.34	580.67	428.63	8.36	10.90	0.12	240.48
13	Uvurkhangai	5944.15	140.12	51.69	28.62	61.86	53.40	434.38	228.73	121.67	774.52	1001.71	1035.98	338.35	142.09	874.92	344.84	8.63	22.98	2.48	199.93
14	Umnugobi	6845.64	64.51	21.85	31.12	67.19	63.48	390.58	66.99	100.58	837.23	2033.31	991.82	306.08	230.64	746.75	437.17	2.68	7.42	0.00	380.28
15	Sukhbaatar	5234.25	164.54	28.76	37.31	86.09	91.01	318.34	79.90	97.01	520.91	981.22	918.24	223.33	160.35	790.47	329.07	1.64	15.47	0.18	218.23
16	Selenge	4168.80	123.21	14.93	16.00	22.44	33.75	241.93	57.26	73.16	540.15	958.75	549.71	155.50	103.21	743.84	279.39	0.29	1.56	0.00	173.45
17	Tuv	7062.19	53.63	19.28	9.81	43.82	33.43	676.76	430.63	200.71	841.53	1190.57	1587.89	272.03	187.25	1140.59	168.53	3.54	20.08	0.11	110.68
18	Uvs	6059.35	107.95	26.23	57.76	58.51	65.57	219.80	148.43	121.44	674.03	1311.74	996.86	283.36	142.75	1112.75	457.00	2.40	10.47	5.30	155.49
19	Khovd	3979.40	87.96	17.52	20.69	24.76	42.40	224.20	32.56	46.58	529.80	929.92	506.85	207.81	190.62	513.97	392.21	0.79	17.98	0.00	88.64
20	Khuvsugul	5524.07	220.52	12.95	38.20	45.72	54.30	518.48	301.20	141.05	729.13	895.43	613.57	330.17	132.31	872.93	353.48	0.16	13.43	0.00	150.44
21	Khentii	5429.02	134.77	9.69	16.57	29.90	43.94	287.09	168.88	124.10	451.48	1444.15	953.08	221.11	192.05	660.10	305.62	0.56	9.69	0.00	208.47
22	Aimag average	5575.45	137.34	22.27	30.43	47.53	83.68	328.72	173.79	118.10	679.21	1140.85	914.30	246.68	152.93	841.05	354.37	4.54	12.81	1.01	183.07
23	Ulaanbaatar	6600.99	205.51	283.98	18.75	119.30	125.21	418.18	266.07	83.80	679.77	860.15	880.07	425.44	156.97	631.00	444.61	22.51	32.06	4.23	763.31
24	Country average	5988.75	164.81	127.74	25.72	76.46	100.42	364.77	210.98	104.28	679.44	1027.73	900.51	318.72	154.56	756.40	390.74	11.78	20.57	2.31	416.91

Outpatient Morbidity per 10000 population, 2009



Inpatient Morbidity per 10000 population, 2009

