



TOM MBOYA UNIVERSITY

KNOWLEDGE FOR SUSTAINABLE INNOVATION ENTERPRISE

DEPARTMENT OF HEALTH SERVICES

(Quality Health for All)

SUICIDE AWARENESS AND PREVENTION

The World Health Organization estimates Kenya's crude suicide rate at 6.1 per 100,000 people with age standardized suicide rate 11.0 per 100,000 people which translates to about 4 suicide deaths every day.

What is suicide?

Suicide is an act of deliberate, self-inflicted, intentional, taking of one's own life. Attempted suicide (para-suicide) is the act of self - intentional injury carried out by a person to die but survives.

Who is at risk?

- ◆ People who have attempted suicide before.
- ◆ Depression and other mental disorders.
- ◆ Financial problems.
- ◆ Relationship breakups.
- ◆ Marital problems.
- ◆ Failure in examinations.

- ◆ Occupational difficulties.
- ◆ Loss or death of loved ones.
- ◆ Loss of a job, work, business e.t.c.
- ◆ Chronic pain and illness.

Warning signs of suicide

- ◆ Appearing depressed or sad most of the time.
- ◆ Feeling hopeless, expressing hopelessness.
- ◆ Withdrawing from family and friends.
- ◆ Sleeping too much or too little.
- ◆ Losing interest in most activities.
- ◆ Giving away prized possession.
- ◆ Neglecting personal hygiene.
- ◆ Making out a will.
- ◆ Self-destructive behavior.

Prevention and control:

1. You can prevent suicide by recognizing the warning signs and taking them seriously - if you think a friend or family member is considering suicide, there is plenty you can do to save a life.

2. Speak up- Its natural to feel uncomfortable or afraid to talk about suicide. But the people who show warning signs need immediate help - the sooner the better.
3. Respond quickly in a crisis - if suicide attempt seems imminent, seek help. Remove all the potentially lethal objects, but do not, under any circumstance leave a suicidal person alone.
4. Be there with them - listen carefully what they feel. Let your friends and family members know that they are not alone and that your care can instill hope in the suicidal person.

Who can help?

(Health care professionals) Mental health care professionals (psychologists, psychiatrists, social workers) Counsellors.

NOTE: The Department of Health Services offers psychological support services. Please reach out to book a session with the counselling psychologist at the clinic.

Incharge, Health Services
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PEPTIC ULCERS DISEASE (PUD)

Peptic ulcers are open sores on the inner lining of the stomach and the upper part of the small intestine.

SIGNS AND SYMPTOMS

Many people with peptic ulcers don't have symptoms. If there are symptoms, they may include:

- Dull or burning stomach pain. For some people, pain may be worse between meals and at night. For others, it may be worse after eating.
- Feeling of fullness or bloating.
- Belching.
- Heartburn.
- Nausea.

Peptic ulcers can cause bleeding from the ulcer. Then symptoms might include:

- Vomiting blood, which may appear red or black.
- Having dark blood in stools, or stools that are black or tarry.
- Feeling dizzy or fainting.

CAUSES

Peptic ulcers happen when acid in the organs that food travels through, called the digestive tract, eats away at the inner surface of the stomach or small intestine. The acid can create a painful open sore that may bleed.

Your digestive tract is coated with a mucous layer that most often protects against acid. But if the amount of acid increases or the amount of mucus decreases, you could develop an ulcer.

Common causes include:

- **Helicobacter pylori.** This germ lives in the mucous layer that covers and protects tissues that line the stomach and small intestine. The H. pylori germ often causes no problems. But it can cause swelling and irritation, called inflammation, of the stomach's inner layer. When this happens, it can cause an ulcer.

It's not clear how H. pylori infection spreads. It may go from person to person by close contact, such as kissing. People also can contract H. pylori through food and water.

- **Regular use of certain pain relievers.** Taking aspirin or nonsteroidal anti-inflammatory drugs (NSAIDs) over time can irritate or inflame the lining of the stomach and small intestine. These medicines include ibuprofen (Advil, Motrin IB, others), naproxen sodium (Aleve, Anaprox DS, others), ketoprofen and others. They do not include acetaminophen (Tylenol, others).

RISK FACTORS

If you take NSAIDs, the following factors may increase your risk of peptic ulcers:

- **Old age.** This includes people older than 60.
- **Prior peptic ulcer.** People who have had a peptic ulcer before have a higher risk of having another one.
- **NSAIDs use.** Taking high doses of NSAIDs or two or more NSAIDs increases the risk. So does taking NSAIDs with certain other medicines.

These include other pain relievers, steroids, blood thinners, certain antidepressants called selective serotonin reuptake inhibitors (SSRIs) and medicines to treat the bone-thinning disease osteoporosis. These include alendronate (Fosamax, Binosto) and risedronate (Actonel, Atelvia).

Factors that don't cause peptic ulcers but can make them worse include:

- **Smoking.** This may increase the risk of peptic ulcers in people who are infected with *H. pylori*.
 - **Drinking alcohol.** Alcohol can irritate and erode the mucous lining of the stomach. And it increases stomach acid.
 - **Having untreated stress.**
 - **Eating spicy foods.**
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COMPLICATIONS

Untreated peptic ulcers can cause:

- **Bleeding in the stomach or duodenum.** Bleeding can be a slow blood loss that leads to too few red blood cells, called anemia. Or you can lose enough blood so that you need to be in a hospital or get blood from a donor. Severe blood loss may cause black or bloody vomit or black or bloody stools.
 - **A hole, called a perforation, in the stomach wall.** Peptic ulcers can eat a hole through the wall of your stomach or small intestine. This puts you at risk of infection of your abdomen, called peritonitis.
 - **Blockage.** Peptic ulcers can keep food from going through the digestive tract. The blockage can make you feel full easily and cause you to vomit and lose weight.
 - **Stomach cancer.** Studies have shown that people infected with *H. pylori* have an increased risk of stomach cancer.
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PREVENTION

To help prevent peptic ulcers:

- **Take care with pain relievers.** If you often use NSAIDs, which can increase your risk of peptic ulcer, take steps to reduce your risk of stomach problems. For instance, take pain relievers with meals.

If you need an NSAID, you also may need to take other medicines to help protect your stomach. These include antacids, proton pump inhibitors, acid blockers or cytoprotective agents.

A class of NSAIDs called COX-2 inhibitors may be less likely to cause peptic ulcers. But these medicines may increase the risk of heart attack.

- **If you smoke, find a way to quit.** Quitting smoking can lower your risk of peptic ulcer. Talk with your healthcare professional for help with quitting.

MANAGEMENT

Managing PUD often involves a combination of dietary changes, lifestyle modifications and, in some cases, medical treatment.

- **Switch pain relievers.** If you use pain relievers regularly, ask your healthcare professional whether acetaminophen (Tylenol, others) might work for you.
- **Control stress.** Stress may make the symptoms of a peptic ulcer worse. Think about what causes your stress and what you can do to ease it. There are many ways to cope with stress. These include exercise, spending time with friends, deep breathing, writing in a journal or meditating.
- **Don't smoke.** Smoking may harm the lining of the stomach, raising the chance of getting an ulcer. Smoking also increases stomach acid.
- **Limit or avoid alcohol.** Too much alcohol can irritate and eat away the mucous lining in your stomach

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SEXUALLY TRANSMITTED INFECTIONS (STI's)

- More than 1 million curable sexually transmitted infections (STIs) are acquired every day worldwide in people between 15–49 years old, the majority of which are asymptomatic.
- In 2020 there were an estimated 374 million new infections in people 15–49 years with 1 of 4 curable STIs: chlamydia, gonorrhoea, syphilis and trichomoniasis.
- More than 500 million people aged 15–49 years are estimated to have a genital infection with herpes simplex virus (HSV or herpes).
- Human papillomavirus (HPV) infection is associated with over 311,000 cervical cancer deaths each year.
- STIs have a direct impact on sexual and reproductive health through stigmatization, infertility, cancers and pregnancy complications and can increase the risk of HIV.
- More than 30 different bacteria, viruses and parasites are known to be transmitted through sexual contact, including vaginal, anal and oral sex.
- Some STIs can also be transmitted from mother-to-child during pregnancy, childbirth and breastfeeding.
- Eight pathogens are linked to the greatest incidence of STIs. **Of these, 4 are currently curable: syphilis, gonorrhoea, chlamydia and trichomoniasis.** The other 4 are viral infections: hepatitis B, herpes simplex virus (HSV), HIV and human papillomavirus (HPV).

Symptoms of STI's

STIs can have a range of symptoms, including no symptoms. That's why sexually transmitted infections may go unnoticed until a person has complications or a partner is diagnosed.

STI symptoms include:

- Sores or bumps on the genitals or in the oral or rectal area.
- Painful or burning urination.
- Discharge from the penis.
- Unusual or odorous vaginal discharge.
- Unusual vaginal bleeding.
- Pain during sex.
- Sore, swollen lymph nodes, particularly in the groin but sometimes more widespread.
- Lower abdominal pain.
- Fever.
- Rash over the trunk, hands or feet.

Sexually transmitted infection symptoms may appear a few days after exposure. But it may take years before you have any noticeable problems, depending on what's causing.

Consequences of STI's.

- STIs like herpes, gonorrhoea and syphilis can increase the risk of HIV acquisition.
- Mother-to-child transmission of STIs can result in stillbirth, neonatal death, low-birth weight and prematurity, sepsis, neonatal conjunctivitis and congenital deformities.
- HPV infection causes cervical and other cancers.
- Hepatitis B resulted in just over 1 million deaths in 2022, mostly from cirrhosis and hepatocellular carcinoma.
- STIs such as gonorrhoea and chlamydia are major causes of pelvic inflammatory disease and infertility in women.

Prevention of STIs

- Abstain from vaginal, anal, or oral sex.
- Get vaccinated for hepatitis B and HPV.
- Reduce your number of sexual partners.
- Talk honestly with potential partners about sexual histories.
- Get tested before having sex.
- Avoid sexual contact when under the influence of alcohol or drugs.
- Use condoms, dental dams, or gloves with lubricant during sexual activities.

When to see a doctor

See a health care professional immediately if:

- You are sexually active and may have been exposed to a sexually transmitted infection.
- You have symptoms of a sexually transmitted infection.

NOTE: The Department of Health Services offers STI screening services. Please reach out to get earlier treatment at the clinic.

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