

Funding: The project was funded by the Radiological Society of North America.

Abstract #: 1.026_NEP

Hypertension prevalence in Zanskar, India: a study to guide future health interventions in rural health clinics

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Background: Zanskar, India is a high-altitude, remote region located near the Himalayan mountain range in Ladakh, in northern India. Due to its isolation, much of the population, especially in the farming villages, lack access to regular medical care. The aim of the study was to assess the prevalence of hypertension and to consider risk factors specific to this population.

Methods: Data was collected from 318 patients aged 20 to 90 years who presented at temporary medical camps in the villages of Sani and Raru in July 2015. Patients had their blood pressure measured twice and the mean systolic and diastolic pressures were calculated. Through a translator, patients completed a questionnaire about their knowledge of their medical conditions and lifestyle risk factors. The population was stratified by age and gender and then categorized by their blood pressure status.

Findings: Of the 318 patients we surveyed, 33% were pre-hypertensive and 25% were hypertensive, with 60% of that group unaware of their hypertension status. 90% of patients who were aware of their hypertension were not taking medications at the time of presentation to the clinic. The prevalence of hypertension increased with age while the prevalence of prehypertension remained relatively stable at all surveyed age groups. At 36%, the prevalence of hypertension for men was higher than that for women (21%). Men also had a higher prevalence of prehypertension (40%) than that of women (30%).

Interpretation: The prevalence of hypertension is relatively high in the two villages in Zanskar, India, indicating that hypertension is not limited to urban Westernized populations and can also affect isolated, rural populations. More thorough epidemiological studies should be conducted to identify specific risk factors in other parts of Ladakh. We believe that cultural, socioeconomic, and geographical factors likely greatly influence hypertension risks in Zanskar. Our findings suggest that future interventions in similar populations should prioritize hypertension as a serious public health issue.

Funding: New York University School of Medicine, International Health Program.

Abstract #: 1.027_NEP

Analysis of refugee mental health screening and referral processes at the Newcomers Health Program, San Francisco General Hospital's Refugee Medical Clinic: a quality improvement study

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Program/Project Purpose: The *Newcomers Health Program (NHP)* is a clinic-based and community-based health program that serves refugees, asylees, and immigrants. NHP is working in collaboration with the *UCSF Trauma Recovery Center/Survivors International* to improve mental health screening and referral processes as a part of the Refugee Health Assessment Program (RHAP). Survivors International is a non-profit organization providing psychological, social, and medical services for survivors of torture. At the NHP, refugees/asylees are generally seen for two clinic visits: a screening visit, and a screening follow-up visit. The State of California recently designed a new comprehensive screening form to be used at all the California county refugee health assessment programs, and it has been in use at the NHP since October 2013. In particular, it includes a much more comprehensive mental health screening – including questions about post-traumatic stress disorder, depression, generalized anxiety disorder, trauma, and persecution.

Structure/Method/Design: The aim of the quality improvement study was to evaluate the efficacy of the new mental health screening tool in comparison to a previous screening tool used at NHP. We first analyzed a subset of patient records during a time period when the previous screening tool was used (September – October 2013), and key indicators were documented: positive mental health screen, referral made, and outcome of referral. Specifically for survivors of torture, we analyzed to see if torture was identified, and whether a referral to *UCSF Trauma Recovery Center/Survivor's International* was made. Next, we analyzed a subset of patient records during a time period when the new screening tool was used (January – February 2014) with similar indicators as above.

Outcome & Evaluation: The new mental health screening tool increased the number of patients who screened positive during screening visits, and who would therefore be eligible for referral services. Currently, a RHA outreach pilot project is being conducted between initial screening and follow-up visits to serve as an additional measure in identifying potential torture/persecution survivors and to facilitate referrals.

Going Forward: Next steps for enhancing mental health services include improving the clinical workflow, training for providers, improving referral coordination, and sharing best practices with other counties.

Abstract #: 1.028_NEP

Stigma and knowledge of Hepatitis B virus in an urban Vietnamese population compared to that of a Vietnamese immigrant community in Chicago

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Background: Hepatitis B virus (HBV) infection is particularly common in Asia and among Asian immigrants in the United States. We conducted this study to evaluate HBV stigma and knowledge in a large group of persons in Vietnam and to compare their views and understanding of HBV to those of Vietnamese immigrants in the United States.