Perspective

iMedPub Journals
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Journal of Preventive Medicine
ISSN 2572-5483

2022
Vol.7 No.11:173

# Improve Foodborne Disease Prevention, Foster Global Health Security

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**Received date:** October 24, 2022, Manuscript No. IPJPM-22-14925; **Editor assigned date**: October 26, 2022, PreQC No. IPJPM-22-14925 (PQ); **Reviewed date**: November 07, 2022, QC No. IPJPM-22-14925; **Revised date**: November 17, 2022, Manuscript No. IPJPM-22-14925 (R); **Published date**: November 24, 2022, DOI: 10.36648/2572-5483.7.11.173

**Citation**: Krasny Z (2022) Improve Foodborne Disease Prevention, Foster Global Health Security. J Prev Med Vol. 7 No.11:173

## Description

The distribution of food-borne diseases is shifting. New pathogens may emerge, despite the fact that numerous existing problems remain unsolved; laid out microbes might secure novel attributes and show up in surprising food vehicles. Throughout the year, consumers demand more fresh food, the population ages and migrate, and food production technologies and practices evolve. In order to preserve general health and reduce the burden of foodborne illness, it is necessary to look for something extraordinary and be prepared to identify it when it occurs so that appropriate action can be taken. New diagnostic tests alter the ease and specificity of routine diagnosis, new diseases are deemed worthy of notification, and social interest in particular issues varies. Also, public health surveillance is always changing. Accurate estimates of the burden of foodborne diseases, as well as foodborne disease prevention, global health security, economic expansion, and evidence-based policymaking, can all benefit from accurate health information.

## Public Health

Both the number of studies focusing on racial health disparities and the capabilities for measuring the effects of racism have significantly increased in recent years. However, it is still necessary to have a framework for public health that goes beyond merely documenting disparities and works toward their elimination. Critical Race Theory, or CRT, has dominated racial scholarship ever since the 1980s.However, due to its jurisprudential roots, its application to public health research has been limited to date. This paper introduces the Public Health Critical Race Praxis (PHCR) to facilitate the use of CRT in health equity research. PHCR sheds light on disciplinary conventions that may accidentally reinforce social hierarchies, facilitates the study of contemporary racial phenomena, and provides tools for racial equity approaches to knowledge production. The deliberate release or threat of the deliberate release of biologic agents (such as viruses, bacteria, fungi, or their toxins) with the intention of causing disease or death among the human population, food crops, or livestock, terrorizing the civilian population, or manipulating the government has emerged as a real possibility in the current scenario of increased terrorist activity. The distinguishing evidence of the occasion is the primary move toward the occasion of a bioterrorist attack. Raising awareness, having a high level of suspicion, and having a dependable surveillance system that will assist you in quickly locating the perpetrator are all ways to accomplish this.

Bioterrorist attacks can be carried out in secret or in public by virtually any pathogenic microorganism. The five phases of activities in dealing with a bioterrorist attack are the preparedness phase, the early warning phase, the notification phase, the response phase, and the recovery phase. Bioterrorist agents of major concern have been categorized as A, B, and C based on their priority in posing a threat to national security and ease of dissemination.

## Incomplete Energy

A bioterrorism attack in a public place is a public health emergency. Early detection and prompt investigation are essential for stopping such attacks. The public health epidemiologist's role is crucial for the effective implementation of interventions in addition to determining the attack's scope and magnitude. Major health risk characteristics have been the focus of a multidisciplinary literature review. In order to evaluate the economic value of the cancer plan in France, the study makes use of secondary data on the costs of cancer that the National Institutes of Health collected and published in 2004. In recent years, energy consumption has been steadily rising alongside economic growth, which has had a significant impact on both social progress and economic expansion. The sustainable supply of energy is one of the most pressing issues in the world, particularly in large developing nations like China. It has been determined that pollutants like SO2, methane, micrometals, and inhalable particulate matter (PM) have a negative impact on both the environment and public health. In developing nations, respiratory infections caused by air pollution from incomplete energy combustion pose the greatest threat to children's health. As a result, respiratory infections would result in the deaths of 43 million people annually. The development of a strategy for responding to and managing respiratory infections is currently the primary focus of numerous health projects worldwide. Studies on the effects of energy use on public health and the environment have been conducted since the 1980s.This study's primary focus was on how energy technology innovation and energy substitute policy could lessen harm to public health and the environment. Energy and public health have not been examined together in a single framework until recent years, and the environment is typically viewed as the media in the chain

that links energy, emissions, the environment, and human health. Smith reviewed the link between energy use and air pollution, introduced the exposure assessment method, and assessed the health effects of air pollution in China using the "Total exposure assessment" theory.