
Cultural Influences on Health

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- The concept of culture draws attention to the way things are formulated and conceptualized as a matter of practice or technique. People's values are based in their ideas about the world; conversely ideas shape how people think and react.
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- Ideas always work in the context of other ideas, and contexts form semantic (cultural) domains that separate ideas as much as they connect them.
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Marilyn Stathern (1997) "The Work of Culture: An Anthropological Perspective," in A. Clarke & E. Parsons (eds) *Culture, Kinship and Genes* London: MacMillan Press Ltd Pp. 40-53.

Percentage distribution of menopause status in each study

Menopausal Status	Japan	Canada	USA
Natural menopause	35.7	35.5	43.9
Perimenopause	31.5	26.2	38.2
Premenopause	32.8	38.3	17.9
Surgical Menopause	9.9	20.5	28.6
Total (100%) number of subjects	1225	1307	7802

Reports of vasomotor symptoms by menopausal status

	Japan	Manitoba	Massachusetts
Hot Flushes			
Premenopause	6.4	13.8	17.9
Perimenopause	13.5	39.7	38.1
Postmenopause	15.2	41.5	43.9
Total number of subjects	1,104	1,039	5,505
Night Sweats			
Premenopause	4.1	10.6	5.5
Perimenopause	4.0	27.6	11.7
Postmenopause	3.0	22.2	11.3
Total number of subjects	1,104	1,039	5,484

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Conclusions

1. The embodied experience of physical sensations, including those of well being, health, distress and illness is informed in part by the material body, itself contingent upon evolutionary, environmental, and other factors.
2. Embodiment is also constituted by the way in which self and others represent the body, drawing upon local categories of knowledge, language usage, and experience.
3. If embodiment is to be made social, then history, politics, language, and local knowledge, including scientific knowledge to the extent that it is available, must inevitably be implicated.
4. The body cannot stand as an entity that is black-boxed and assumed to be universal with social and cultural variables layered over it.
5. Biological and socio/cultural variables are both contingent – both local.

Cross-cultural research into dementia:

1. Constant rate of increase of risk of dementia with age is essentially the same everywhere. For example, odds ratio between age and AD same in Ibadan, Nigeria and Indianapolis, USA, although the prevalence is quite different.
2. Above findings strongly suggest that biological processes of aging are implicated.
3. But, genetic and environmental factors shift absolute level of risk 'up' or 'down' and alter age-specific rates significantly.
4. Cross-cultural surveys are fraught with methodological problems, making it difficult to assess how the numerous variables interact.

Hendrie et al. *JAMA*: 2001.

- Nigerians have a significantly lower prevalence of dementia than do African Americans.
- Assumed shared genetic origin
- High frequency of APOE e4 in both groups, but effects appear to be different.
- Assumption that difference can be explained by environmental variables, lower cholesterol levels, and lower CHD among Nigerians.

L. Farrer et al. *JAMA*: 1997

- Meta analysis based on data derived from nearly 6000 patients diagnosed with probable AD obtained from 40 research teams.
- The control group comprised 8607 non-demented individuals recruited from clinics, communities, and autopsy based studies.
- Variables considered:
 - APOE genotype, age at disease onset, sex, ethnic background
 - Ethnicity: Caucasian, African America, Hispanic, Japanese.
- Findings: The APOE e4 allele represents a major risk factor for AD in all four ethnic groups, across all ages between 40 and 90 and in both men and women.
- African Americans in the above study have higher frequencies of APOE e4 than the other groups, but the presence of the allele appears not to pose such a great risk as it does in Caucasian populations.

Indo- US Cross-National Dementia Study. Ganguli et al., *Archives of Neurology*, 2000.

- Sample of 4450 aged 55 and older in Ballabgarh, Northern India
- Prevalence of AD and other dementias reported to be very low indeed.
- APOE e4 is associated with an increased risk for AD in this sample
- Effects of the APOE e4 appear to be similar in both this and a comparable US sample.
- But APOE e4 frequency is significantly lower than a comparable US sample.
- Difference in prevalence of dementia may therefore be in part due to lower APOE e4 frequency.