Thermalism in Brazil

THE NEW FRONTIERS OF THE EUROPEAN HEALTHCARE SYSTEM 2013 The implementation of the EU Directive on the application of patients' rights in cross-border traditional and thermal healthcare

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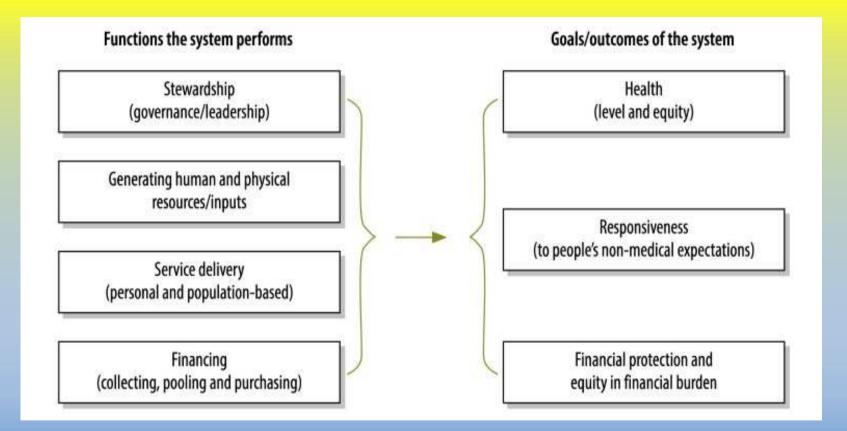
EU Global Health Research requires

- greater levels of (bio-medical and public health) research from and for developing countries,
- greater equity and pertinence to the priorities in developing countries;
- improved ownership of the national institutions and participation of civil society
- a more structured and effective link with evidence-based decision making; closely linked with the EU challenge of enhanced health sector policy dialogue.
- the global research funding architecture needs to be harmonised and aligned.
- the EU will recall the international attention to the global public good for health and call for global investments in the advance of humanity in health, beyond and in addition to development and research efforts.

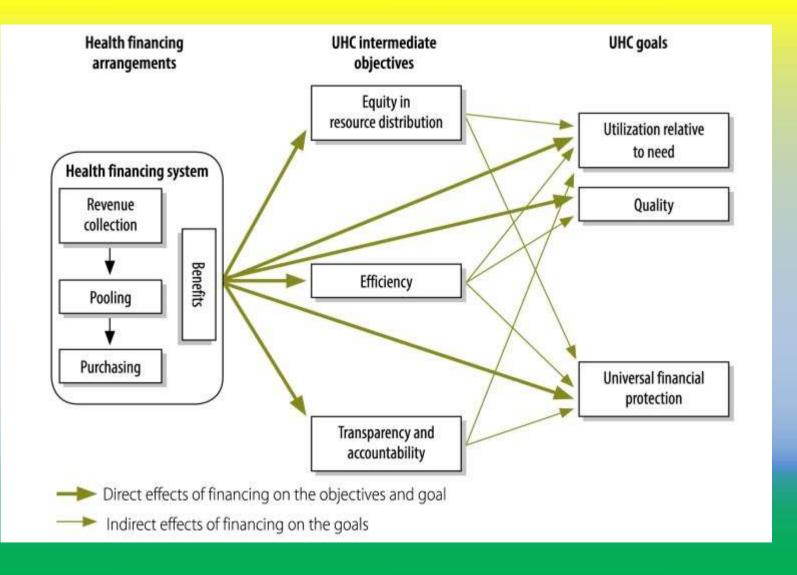
http://ec.europa.eu/health October – December 2009

Health system functions and goals

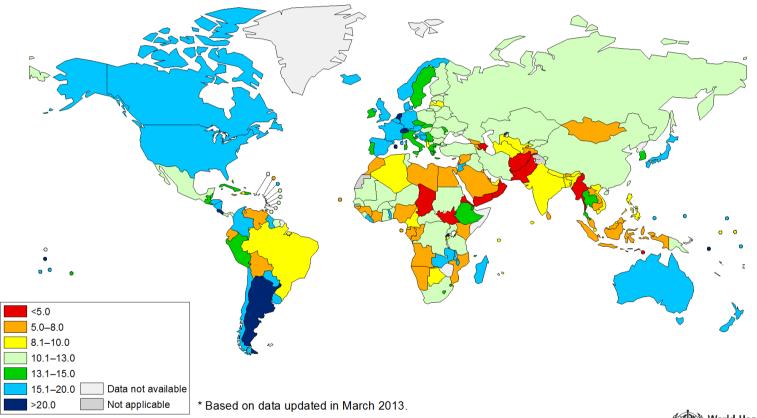
(Adapted from Duran et al., 2011)



Intermediate objectives and final goals of universal health coverage (UHC) that health financing can influence



General government expenditure on health as a percentage of total government expenditure (in US\$), 2011 *

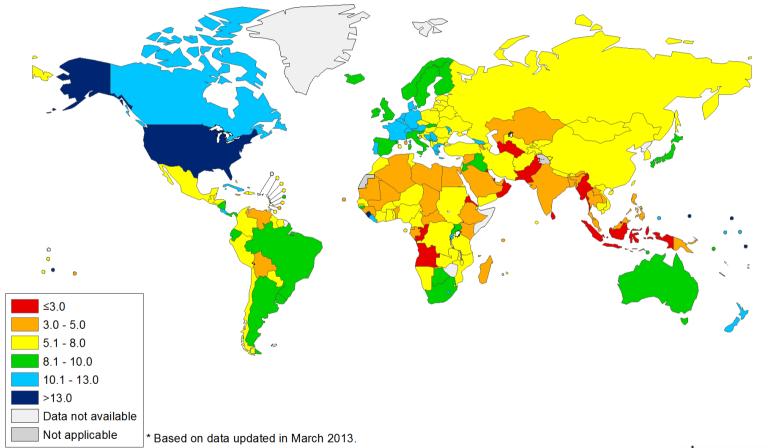


The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement. Data Source: Global Health Observatory, WHO Map Production: Public Health Information and Geographic Information Systems (GIS) World Health Organization



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Total expenditure on health as a percentage of the gross domestic product, 2011 *



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OOP expenditure as a proportion of total health expenditure in the countries in the European Region, 2009 European Health for All database. *Note*: a WHO European Region



Selected cost-of-illness studies in which cost is expressed as percentage of national health expenditure Suhrcke et al. (2005)

Condition/risk factor	Country	Percentage of national health expenditure	Year
Coronary heart disease	United Kingdom	11	1999
Schizoprenia	France	2	1992
	United Kingdom	1.7	1992-03
	Netherlands	1.6	1989
Depression	United Kingdom	0.9	1990-01
Mental illness	United States	7	1990
Obesity	France	2	1992
	Portugal	3.5	1996
Diabetes	Various	2.5-15	Various
Tobacco	Germany	5.6	1993

Stephens & Satterthwaite, 2008)

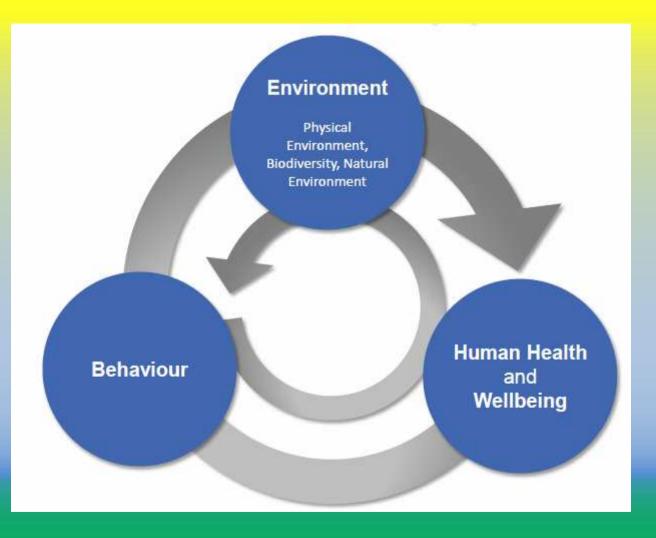
- The population of each urban center and its rate of change are also influenced not only by such international and national factors but also by local factors related to each very particular local context
- including the site, location, natural resource endowment, demographic structure, existing economy, and infrastructure
- (the legacy of past decisions and investments) and the quality and capacity of public institutions.

European Centre for Environment & Human Health

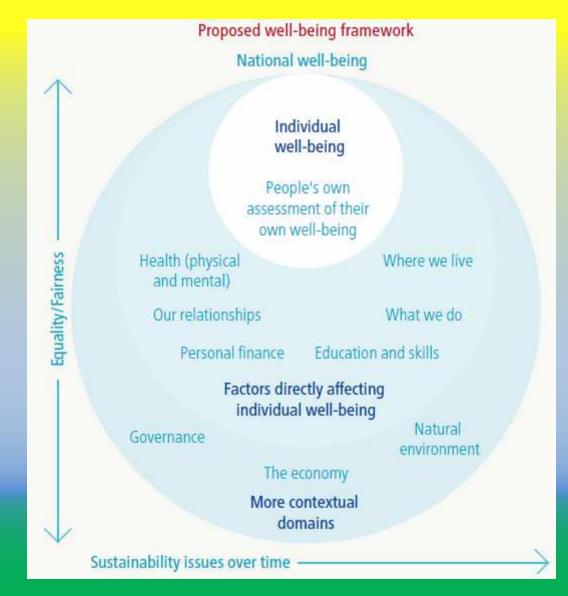
Health and Wellbeing from the Environment

- The health and well-being impacts (both positive and negative) taking part in environmental enhancement/conservation activities for different groups of people.
- Academic theories include BIOPHILIA which suggest an evolutionary connection between humans and the natural world which causes individuals to seek out contact with nature and for them to experience negative health impacts when unable to do so (Wilson 1984).
- Climate change and weather is part and parcel of the environmental context and the drivers of behavioural change.
- Examining the barriers and motivators that influence public usage of the marine environment for recreation, particularly from a health and well-being perspective and whether those motivating factors have the potential to be used to encourage more people to use the sea and coast for the health and well-being benefits.
- Healing or restorative places environment.

Interconnections: Environment & Human Health



United Kingdom Office for National Statistics (ONS, 2010)



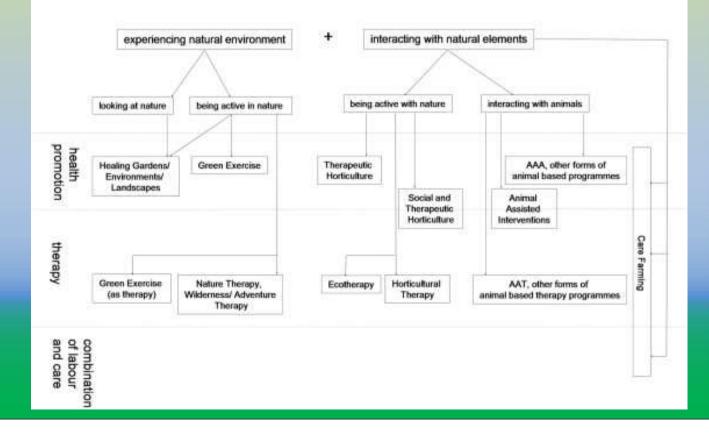
The four dimensions of embeddedness (Koon et al., 2013)



Green Care and Traditional Health Care

Agriculture, Gardening, (Landscape) Conservation, Animal Keeping and Husbandry

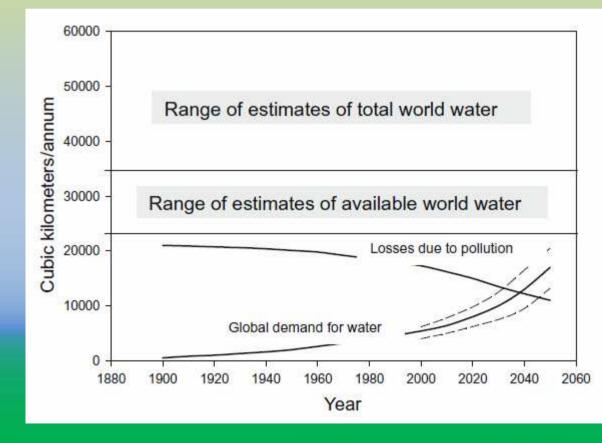
Overview Sectors of Green Care



Environmental health services and Medical Geology = just negative evidences research - Millenium indicators database (UN Project)

integrated urban water management (IUWM)

• Scenarios for world water resources and demands (Edmunds, 2009)



EU Water Legislation

The European Council Directive 80/777/EEC of 15 July 1980 on the approximation of the laws of the Member States relating to the exploitation and marketing of natural mineral waters (Official Journal L 47 of 20.02.1981) was amended by the European Parliament and Council Directive 96/70/EC of 28 October 1996.

The Directives concern the water extracted from the ground of a Member State and recognised as the natural mineral water by the responsible authority. They also concern the water extracted from the ground of the **Third-World countries. The Directive 96/70/EC also sets the validity of the certification of water extracted from the ground of a Third-World country at 5 years**.

CAIM

- That CAM use is expanding and is now being addressed in a much more formal way than before necessitates greater attention by conventional (allopathic) health care practitioners, decision-makers and researchers.
- Chronically ill people are reported to use CAM two to five times more often than non-chronically ill people.
- Demand for CAM services is expected to rise particularly as a result of population aging and a subsequent likely increase among people who will experience one or more chronic health problems.

General recommendations for EU based on the global analysis of the CAM R&D situation

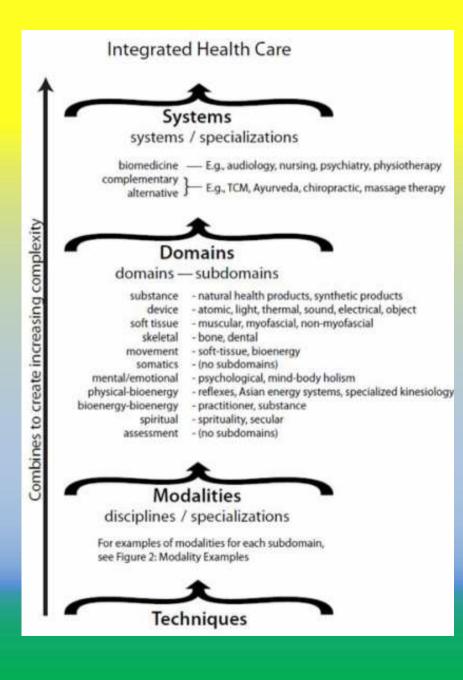
- A broad range of mixed methods research strategies should be used to investigate CAM within the EU. The choice of method(s) for any particular project or experiment should be based on the specific scientific question and should focus on delivering safe and effective health interventions to EU citizens.

- The CAM research strategy for Europe should be based on the popularity of a specific intervention and related to the national or regional public health needs and disease burden.

- We suggest the formation of a centralised EU CAM centre with the responsibility to operationalise the CAMbrella recommendations in collaboration with selected EU member states and appropriate (worldwide) academic institutions to enable evidence based health sector reform with appropriate CAM interventions in the EU.

Search results when applying broad CAM terms (Franzel et al., 2013)

	(Qualitative research)	CAm	(Complementary and alternative medicine)	(Qualitative research) AND CAM	(Qualitative research) AND (Complementary and Alternative Medicine)	Number of included publications in meta- ethnography (precision)
PubMed	61.067	25.339	4.194	259	157	26
MedPilot	233.402	178.706	15.423	960	1.441	1
Cochrane library	/ 662	86	321	14	1	0
CAMbase	349	183	280	1	0	0
CAM-QUEST®	1	15.856	43	1	0	0
API-on©	16	6	0	0	0	0
CINHAL	7.061	2.684	8.438	31	46	1
GreenPilot	265.822	255.664	8.230	34.147	1.422	0
Heclinet	7	0	0	0	0	0
Psydoc	10	33	0	0	0	0
PsynINFO	133	3	20	0	5	1
Sinbad	2	1	1	0	0	0
Somed	65	24	16	0	0	0
DIMDI incl. AMED	55.479	87.008	14.725	191	187	1



Taxonomy overview (Porcino & MacDougall, 2009)

CAM: Modality examples (Porcino & MacDougall, 2009)

DOMAIN	SUBDOMAINS	MODALITY examples				
Assessment (none)		- diagnostic imaging, iridology, medical intuition				
Spiritual	- spirituality - secular	 prayer, Johrei, lomi ka'ala hoku, shamanism soulwork, trancework, inner journeying, meditation 				
Bioenergy modulation	- practitioner - substance	 energy work, Healing Touch, Jin Shin Jyutsu, Reiki homeopathy, flower essence 				
Physical- Bioenergy manipulation	 reflexes Asian/Oriental energy systems specialized kinesiology 	- reflexology - shiatsu, nuad bo rarn - BodyTalk, Touch for Health				
Mental/ Emotion	- psychological - mind-body holism	 Adlerian, Jungian, art therapy, groups, dream work doula, Emotional Freedom Technique, hypnotherapy 				
Somatics Education	(none)	- Alexander, Rosen method, Trager, Feldenkrais				
Fitness/ Movement	- soft-tissue - bioenergy	 pilates, aerobics, weight training tai chi, yoga, chi gong 				
Skeletal manipulation	- bone - dental	- chiropractic adjustments, craniosacral therapy				
Soft-tissue manipulation - muscular - myofascial - non-myofascial tissues		 Iomilomi, Swedish, Esalen Bowen, Hurley-Osborn, structural integration manual lymph drainage, surgery 				
- atomic - light - thermal - sound - electrical - object		 radiation treatments colour puncture, colour therapy, laser treatments stone therapy, hydrotherapy sound therapy, music therapy\ bioneurofeedback, TENS, electroacupuncture colonic hydrotherapy, acupuncture, cupping 				
Substance	 natural health products synthetic products 	 diets, herbology, vitamins, minerals, essential oils pharmaceuticals, chelation therapy 				

Lista of CAM therapies The Cochrane Library (Wieland et al., 2011)

Acupressure
Acupuncture (e.g., needle acupuncture, electroacupuncture)
Alexander technique
Aromatherapy
Arts therapy (e.g., dance therapy, drama therapy, music therapy)
Ayurvedic traditional medicine (Ayurveda)
Balneotherapy
Bee products (eg, honey, pollen, propolis, royal jelly, venom)
Biofeedback
Chelation therapy ^{\pm}
Chinese traditional medicine
Chiropractic (i.e., spinal manipulation)
Color therapy (i.e., chromotherapy)
Craniosacral manipulation
Dietary supplements (non-herbal) [±] (e.g., vitamins, hormones, amino
acids)
Diet therapy ^{\pm} (e.g. low fat diets, vegan diets)
Distant healing
Electric stimulation therapy [±] (eg, transcutaneous electrical nerve
stimulation)
Electromagnetic therapy ¹
Eye Movement Desensitization and Reprocessing (EMDR) Feldenkrais method
Herbal supplements (eg, echinacea, garlic)
Homeopathy
Hydrotherapy
Hyperbaric oxygenation [±]
Hypnosis

Imagery (i.e., visualization techniques) Light therapy[±] (phototherapy) Magnetic field therapy^{\pm} (eg, transcranial magnetic stimulation) Massage Meditation Morita therapy Moxibustion Naturopathy Osteopathic manipulation Ozone therapy[±] Play therapy Prolotherapy Qi gong Reflexology Reiki therapy **Relaxation techniques** Snoezelen Speleotherapy Spiritual healing (eg, prayer) Tai chi Therapeutic touch Traditional healers and healing practices (other than Chinese) (eg, Kampo, Shamanism) Tui na Ultrasonic therapy Yoga

Totals CAM include reviews in progress (protocols) The Cochrane Library (**Wieland et al., 2011**)

Alternative Medical Systems (107)

- Ayurvedic Medicine (4)
- Chinese Traditional Medicine (87)
- Chinese herbal drugs (87)
- Homeopathy (12)
- Japanese traditional medicine(1)
- ► Naturopathy (1)
- ► Tibetan traditional medicine (2)

Natural Product Based Therapies (354)

Chelation therapy (1)

► Hydrotherapy (3)

Nutrition therapy (280)

Diet therapy (22)

- Calorie control or calorie restriction (2)
- Carbohydrate-restricted diet (1)
- Casein-free diets (1)
- ► Fat-restricted diet (2)
- ► Gluten-free diet (1)
- ► High-fiber diet (2)
- ► Low glycemic-index diet (4)
- ► Protein-restricted diet (3)
- ► Sodium-restricted diet (3)
- ► Vegetarian or vegan diet (1)

- Other plants or plant extracts (29)
- ► Prolotherapy (1)
- Speleotherapy (1)
- ► Topical therapies (5)

Unconventional synthetic drugs (1)

- ► Laetrile
- ► Procaine (1)

Energy Therapies (154) Acupuncture therapy (87)

- ► Acupressure (5)
- Acupuncture (69)
- ► Electroacupuncture (6)
- ► Laser acupuncture (6)
- ► Moxibustion (1)

Breathing exercises (0) Qi gong (0)

- ▶ Distant healing (1)
- ► Electric stimulation therapy (32)
- ► Magnetic therapy (11)
- ► Phototherapy (7)
- ► Reiki therapy (2)
- ► Therapeutic touch (3)
- ► Ultrasonic therapy (11)

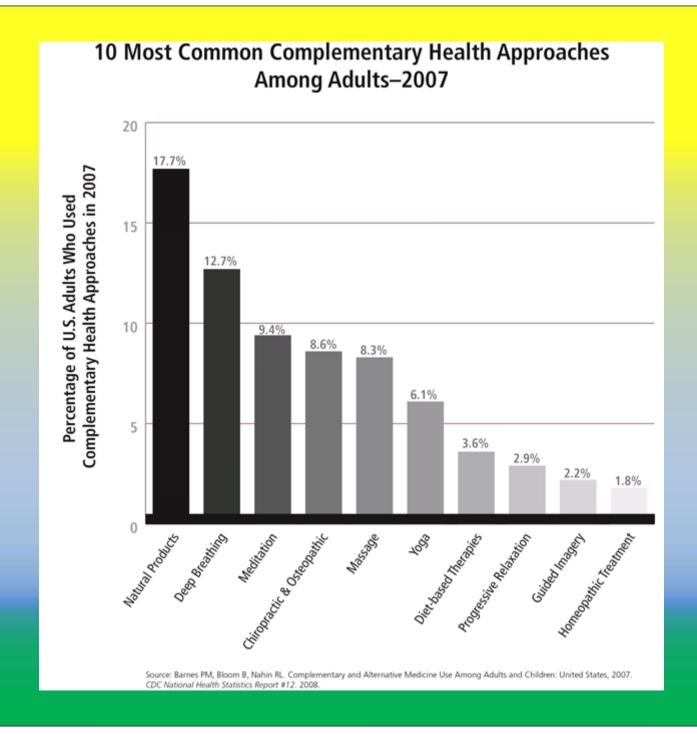
► Other diet therapies (2) Dietary supplements (258) Amino acids (20) Enzymes and coenzymes (7) ► Fats (26) Hormones (10) Minerals (56) ▶ Probiotics (23) ► Vitamins (76) ► Other supplements (39) Oxygen therapy (5) ► Ozone therapy (1) Herbal Medicine (56) ► African prune (1) Artichoke leaf (1) ► Cavenne (1) Cranberry (2) ► Devil's claw (1) Echinacea (1) ► Feverfew (1) ► Garlic (5) ► Ginkgo biloba (6) ► Horse chestnut (1) Kava (1) ► Milk thistle (1) ► Passiflora (1) ► Saw palmetto (1) St. John's wort (1) ► Valerian (1)

► White willow (1)

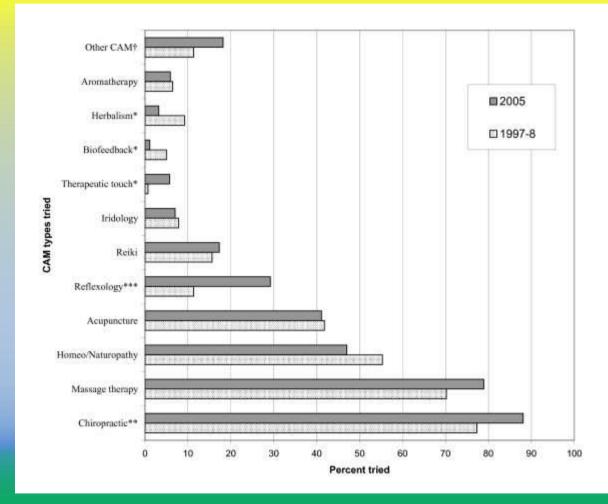
Manipulative and Body-Based Methods (21)
Alexander Technique (1)
Chiropractic Manipulation/Spinal Manipulation (8)
Craniosacral Massage (0)
Feldenkrais Method (0)
Massage (10)
Osteopathic Manipulation (0)
Reflexology (2)

Mind-Body Interventions (54)

- Biofeedback (3)
- Hypnosis (7)
- Imagery (0) ► Meditation (2)
- ▶ Play therapy (1)
- Fildy therapy (.
- Relaxation techniques (7) Sensory art therapies (24)
- Aromatherapy (5)
- Art therapy (1)
- Color therapy (0)
- ► Dance therapy (2)
- Drama therapy (1)
- Music therapy (14)
- ► Other sensory therapies (1)
- Tai Chi (5)
- Unconventional psychotherapies (1)
- Morita therapy (1)
- ► Yoga (4)

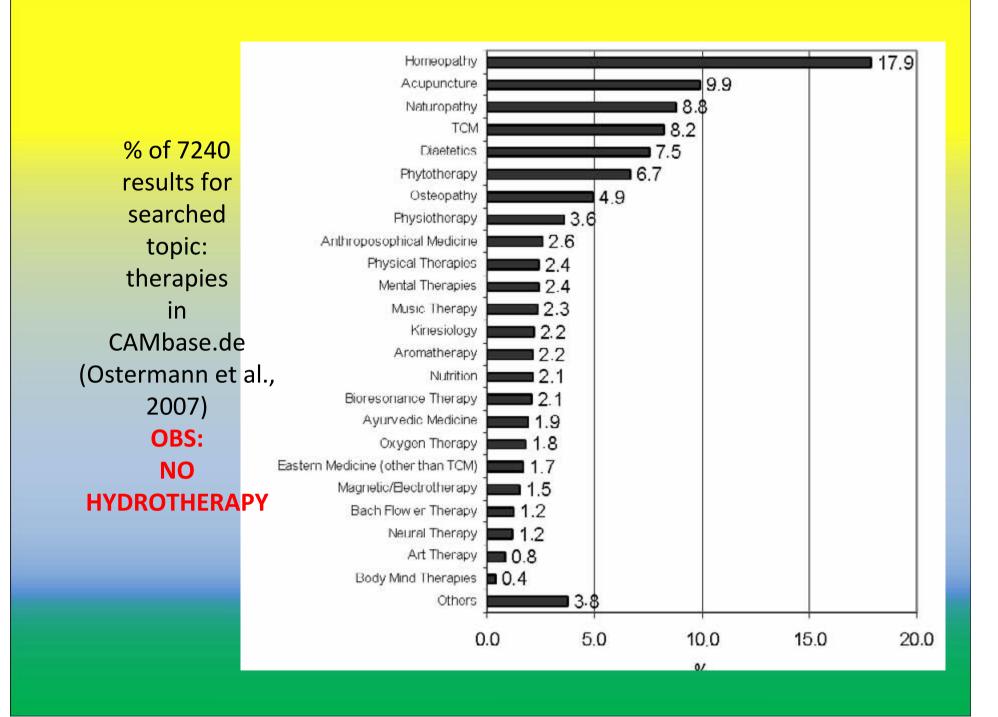


The use of specific CAM practitioners and products by 1997–8 and 2005 Canadian consumers (Sirois, 2008) (Others include hydrotherapy)



Most frequently provided CAM Disciplines in the EU 27+12 (by end of 2010) CAMBRELLA, 2013

Therapists		non-medical practitioners	MDs (physicians)	MDs + non- medical	therapists per 100'000
CAN	1 discipline			practitioners	inhabitants
1	acupuncture	16'380	80'000	96'380	21
2	individualised homeopathy	5'250 by March 2013	45'000	50'250	11
3	herbal medicine/ phytotherapy	29'000	??	>29'000	6.5
4	Reflexology	24'600	?	>24'600	5.5
5	naturopathy (GER: "Naturheilverfahren")	7'300	15'000	22'300	5.0
6	antihomotoxicology	20'000	??	>20'000	4.5
7	humoral/drain-off therapy (purgation therapy)	17'000	?	>17'000	3.8
8	kinesiology	7'600	??	> 7'600	1.7
9	shiatsu	7'400	?	> 7'400	1.7
10	orthomolecular therapy	7'000	??	> 7'000	1.5
11	manual therapies (chiropractic, osteopathy)	4'900	??	> 5'000	1.2
12	anthroposophic medicine	(GER: 20)	4'500	4'500	1.0
13	oxygen/ozone therapy	3'000	??	> 3'000	.6
14	Kneipp therapy (GER)	2'500	?	> 2'500	.5
15	Neural therapy (Huneke)		1'500	1'500	.3
	Total	≈ 159'000 (??)	≈ 145'000 (??)	≈ 304'000 (100%) (??)	65 (?)
	Total CAM practitioners per 100'000 EU-inhabitants	35	30	65	
	Total GPs per 100'000 EU- inhabitants (population)		95	reference: www.eustat.eu	



Uncommon Citations

- WHO = no healthy nature and thermalism
- Pan-European research network for CAM (CAMBRELLA)
- NCCAM (USA)
- IOM (SPA therapy): 2
- MEDLINEPLUS-NIH (SPA therapy): 26
- CLINICALTRIALS.GOV (SPA therapy): 11

CAM unusual or not related?

- Hydrotherapy
- SPA therapy
- Balneotherapy
- Crenotherapy
- Water Cure
- Thermalism
- Kneipp
- Shiatsu

Key words	ncbi.nlm.nih.gov/ pubmed	<u>clinicaltrials.gov</u>	<u>thecochranelibrar</u> <u>y.com</u>	onlinelibrary.wiley	apps.webofknowl edge.com	medify.com	pubmed/trials	pubmed/review	pmc
"mineral water"	208	67	310	8018	1405	484	156	52	1569
"mineral spring"			26	704315	257	4			7605
balneotherapy	1070	7	103	9	548	229	598	473	917
"medical hydrology"	107	0	1	12295	24	3	81	38	1701
crenotherapy	296	1	5	5	38	22	8	17	14
hydrotherapy	2651	2575	169	25	1326	3636	1472	1187	2498
balneology	1038	6	116	15	205	263	590	449	722
"health resort medicine"	60	1	72	5	378	317		26	3
climatotherapy		2	14	1	134	88			
"spa therapy"	220	131	44	5	245	139	47	84	3942
"spa water"	611	9	59	3	260		53	36	116
"mineral water" + "biological activity"	11	18		2	14		9	2	22
"mineral water"+"effectiveness"	39	42	13	3	5		9	11	133
"natural water health"	1491	43	47	2	26		56	110	1038



ShiatsuProvision by MD and Non-Medical Practitioners per 100'000 Inhabitants (EU 27+12)

no provision: white 🔿 | no data: off-white 🔿 |< 1: light gray 🔿 |< 5: gray 🌍 |< 10: dark grey 🌒 | > 10: black ●

OBS

- Thermalism places x other CAIM diferences
- Brazilian other CAIMs
- Other possible links:
 - Water Cure Associations
 - SPAs Associations
 - . ESPA
 - USA Thermalism Association
 - FLT (Federacion Latino Americana de Termalismo)

Bathing water quality for coastal zones in countries of the EU (WHO-EUROPE, 2010)

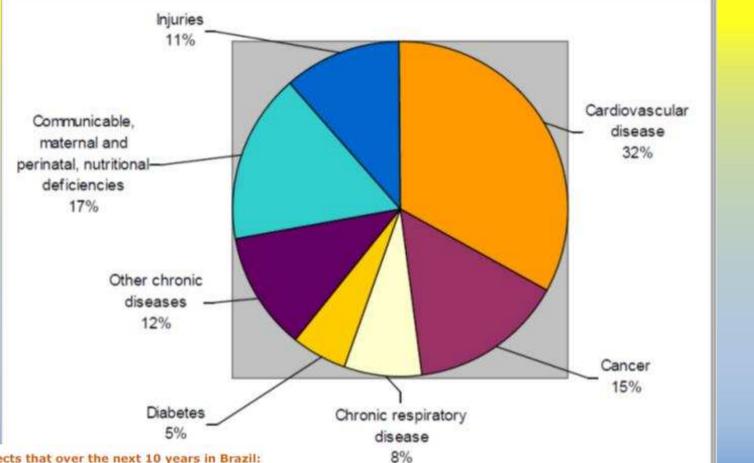


- Brazilian Law 971/2006 including Thermalism like official CAIM (Complementary Alternative Integrative Medicine) in Brazilian SUS Healthcare System (HCS) <u>http://www.saude.gov.br/dab</u>
- Brazilian Crenology Comission

Descriptive measures for the included stakeholders

Stakeholder	Date Established and Time of Operation	Budget estimates**	Financial support	Finances external research	Performs own research
Federal Ministry of Health (MoH), Brazil	1953-	<u>Total CAM investment (</u> 2003- 2008): €4,740,596	Federal	Yes	Yes
Natural Health Products Directorate (NHPD), Health Canada	2003-08	Total investment (2003-2008): €2,378,010 [NHPD, 2008]	Federal	Yes, ~11.5% of budget for partner- ship	No
Korean Institute of Oriental Medicine (KIOM)	1994-	€29,149,799 (2011) €19,944,599 (2010) €15,341,999 (2009)	Federal	Yes, ~10% budget goes to external research projects	Yes
National Center for Comple- mentary and Alternative Medicine (NCCAM), National Inst. of Health NIH	1998-	*)€101,260,265 (2011 plan) €98,795,573 (2010); €93,352,232 (2009)	Federal	Yes	Yes
National Institute of Complementary Medicine (NICM)	2007-09	€6,044,748 (2009)	2009: €1,380,780 (federal support), €4,663,968 (univer- sities, other collab. Partners)	No	Yes

Projected deaths by cause, all ages – Brazil (WHO, 2005)



WHO projects that over the next 10 years in Brazil:

- Over 10 million people will die from a chronic disease.
- · Deaths from infectious diseases, maternal and perinatal conditions, and nutritional deficiencies combined will decrease by 22%.
- · Deaths from chronic diseases will increase by 22% most markedly, deaths from diabetes will increase by 82%.

Facts:

- · In Brazil, chronic diseases are projected to account for 72% of all deaths (see below).
 - Total projected deaths in Brazil, 2005 = 1,289,000.
 - Total projected deaths due to chronic disease in Brazil, 2005 = 928,000.

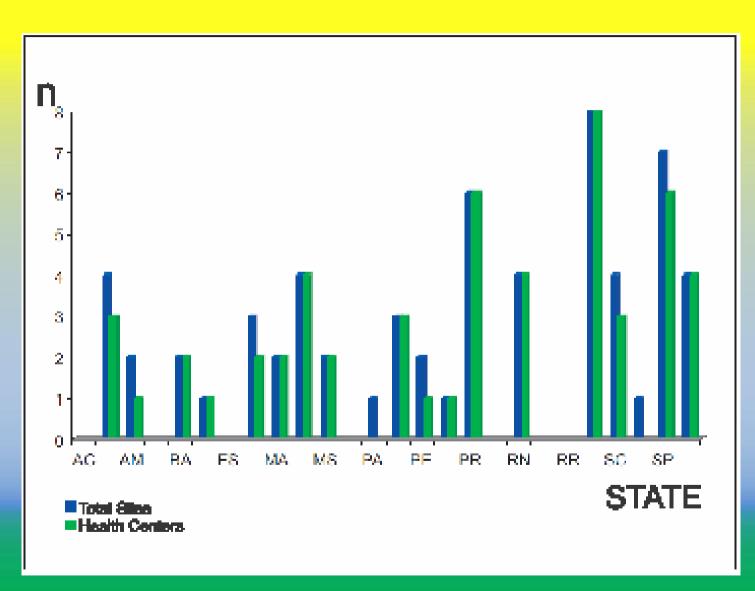
There are three primary benefits that may be derived from improved chronic disease management:

• improved health (i.e. quantity and quality of life years gained), experienced by the patient

 long-term cost savings from complications avoided and healthcare utilization reduced, experienced by the plan, the providers and potentially employers

• workplace productivity gains, experienced by patients and their employers.

Brazilian cities with thermalism/hydrotherapy practice (De Simoni et al., 2008)



Number and percentage of health services in complementary and integrative practices (2007-2011) by type of provider

(National Register of Health Service Establishments/Ministry of Health/Brazil http://cnes.datasus.gov.br)

Practice Type	ce Type Public				Private				
	2007		201	2011		2007		2011	
	n	%	n	%	n	%	n	%	
Acupuncture	93	20	484	15	21	54	255	56	
Phytotherapy	28	6	61	2	**	**	8	2	
Chinese Traditional Medicine	68	15	376	12	6	15	34	7,5	
Body-Based Practices	230	49	2.064	66	3	8	98	22	
Homeopathy	38	8	96	3	7	18	47	10	
Thermalism/Hydrotherapy	3	1	21	1	1	2,5	4	1	
Anthroposophic Medicine	6	1	10	1	1	2,5	7	1,5	
Total	466	100	3.112	100	39	100	453	100	

Brazilian health trials

- Águas de Lindóia/SP (Taveira & Penachi, 2012): Chronic wounds
- Caldas Novas/GO (Haesbaert, 2013): Chronic wounds
- Rio de Janeiro/RJ (Cantinho & Silva, 2009): Large burns
- Peruíbe/SP (Gouvea, 2011): Gonarthrosis (Mudtherapy)
- Natal/RN (Andrade et al., 2008): Fibromyalgia (Thalassotherapy)
- Presidente Prudente/SP (Liborio & Penatti, 2007): Low back pain
- Araxá/MG (Pires, 2006): Rheumatoid arthritis
- Japi/SP (Nunes & Tamura, 2011): Dermatology
- Guarapari/ES (Mello, 1971): Rheumatology (Psamotherapy Monazitic)

Past clinical researchs in Brazil (almost 100 years ago = traditional medicine?): -Poços de Caldas, Lambari, Caxambú and Araxá/MG -Águas de São Pedro, Águas de Lindóia and Ibirá/SP -Caldas de Cipó/BA

Brazil Features

- Preserved and unexplored natural endowment
- Tropical and diversified bioclimates
- Healing natural resourses:
 - Mineral Springs (Hydrodiversity)
 - Safe special mud and clay
 - Hot Thalassotherapy places
 - Monazite Sand
 - Amazon evapotranspiration and biodiversity
- Promissed Economy and Consumer Market
- Favorable people acceptance to CAM
- Current government support and interest in this CAM
- Medical Tourism
- Obvious need for increased scientific knowledge about these kind of clinical trials

ESTÂNCIAS HIDROMINERAIS – Brazil (EMBRATUR, 2002)

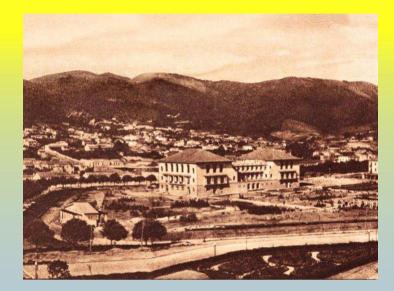
#	UF	Μυνιείριο	N	
1	GO	Caldas Novas, Pirapitinga e Rio Quente	71,72,350	
2	MG	Araxá	26	
3	MG/SP	Águas da Prata/SP,Caldas(Pocinhos Rio Verde) e Poços de Caldas	1,70,326	
4	MG	Cambuquira, Caxambú, Lambari e São Lourenço	74,96,227,393	
5	RJ	Paraíba do Sul, Tres Rios	293,429	
6	RJ	Itaperuna(Raposo), Santo Antonio de Pádua	199,372	
7	SP	Águas de Lindóia,Amparo,Lindóia,Monte Alegre do Sul,Serra Negra, e Socorro	3,15,230,258, 408,413	
8	SP	Ibirá	170	
9	SP	Águas de Santa Barbara	4	
10	SP	Paraguaçú Paulista	292	
11	PR	Mallet	241	
12	SC	Gravatal,Santo Amaro da Imperatriz e Tubarão	160,371,432	
13	RS/SC	Marcelino Ramos/RS, Piratuba/SC	244,320	
14	SC/RS	Águas de Chapecó/SC e Iraí e Vicente Dutra/RS	2,180,445	
15	BA	Сіро́	103	
16	SE	Salgado	355	
17	РВ	São João do Rio do Peixe	387	



700 Springs Brazil

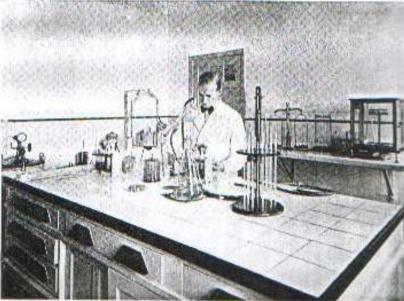








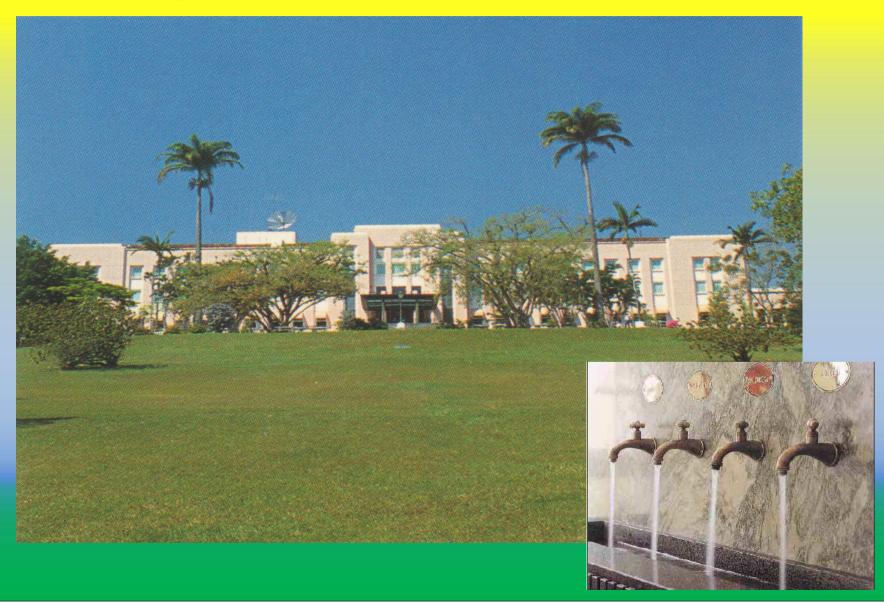








Águas de São Pedro - SP



Cipó - BA



Poços de Caldas - MG



Caxambú - MG



Ibirá - SP

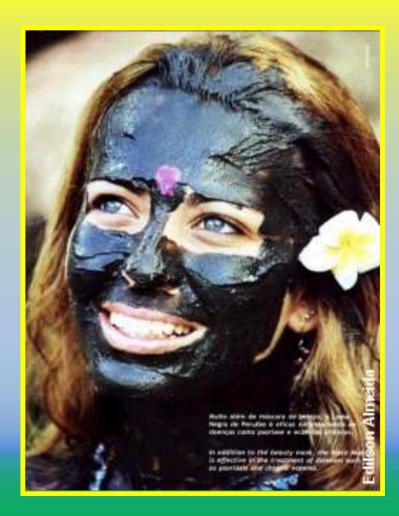


Fernandópolis

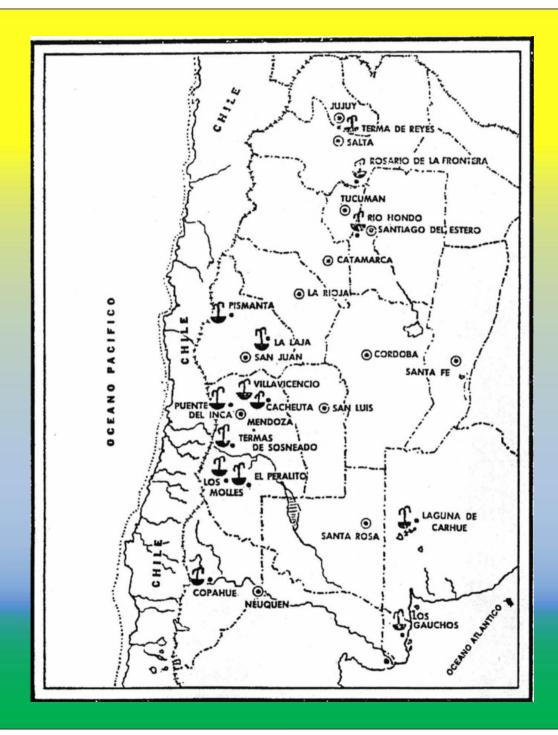


Lamas Negras Brasil

Itacaré, Peruibe, Comandatuba, Morro de São Paulo...





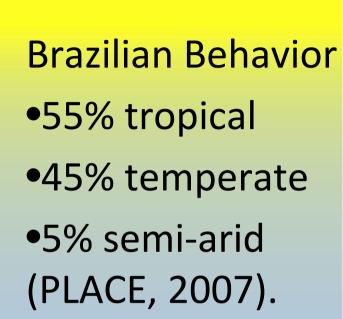


Brazilian bottled water monuments











The map of South America and the bar chart provide a comparison of climate data from two related sources. The map data are climate zones from the Köppen Climate Classification map of the world. The chart data are the percent population living in these climate zones from the PLACE dataset.

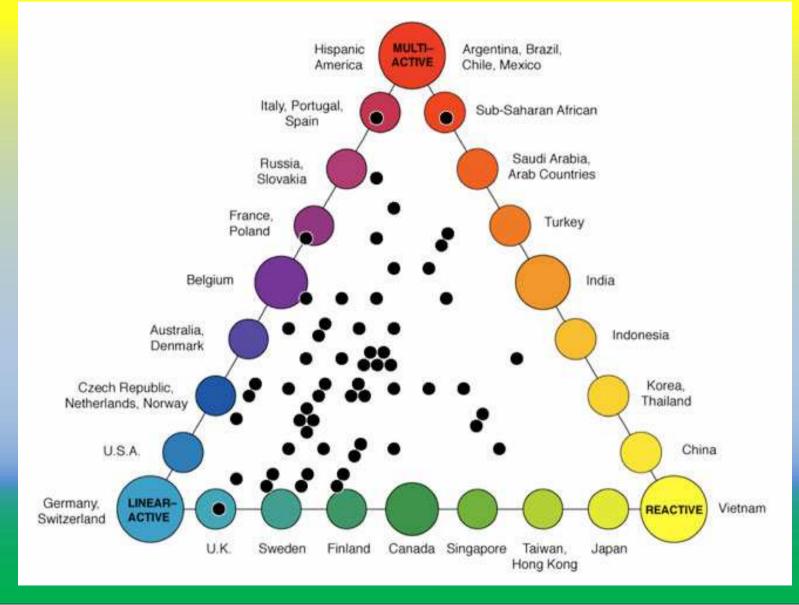


Copyright 2007. The Trustees of Columbia University in the City of New York. Source: Center for International Earth Science Information Network (CIESIN). Columbia University, Population, Landscape, and Climate Estimates (PLACE): Further information available at http://sedac.cleain.columbia.edu/alace/

Publish Date: 02/23/07

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Multi-active index - Lewis Model of Culture for encouraging effective intercultural communication (http://www.crossculture.com)

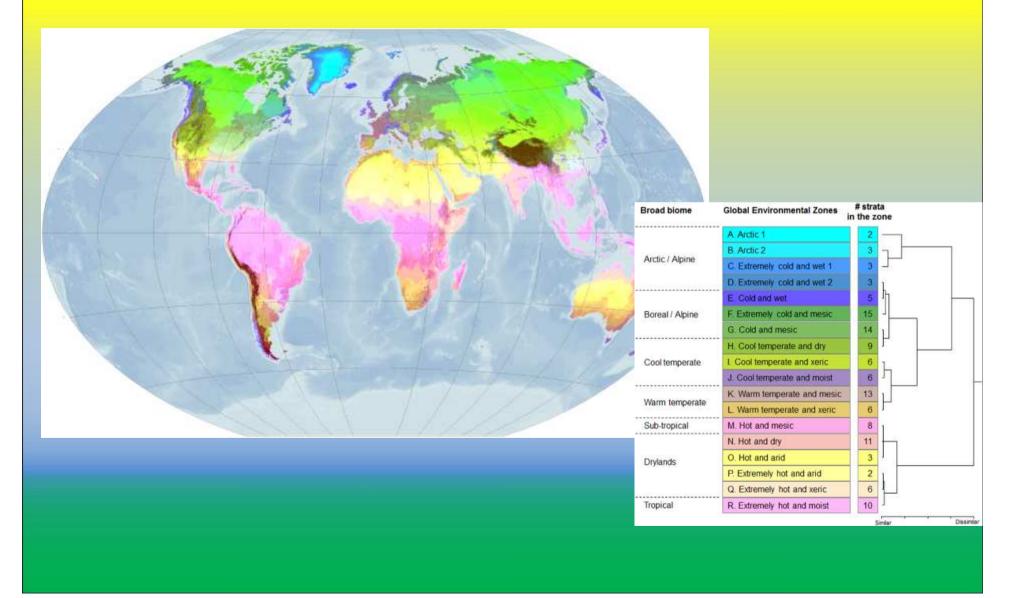


Amazon Geodiversity

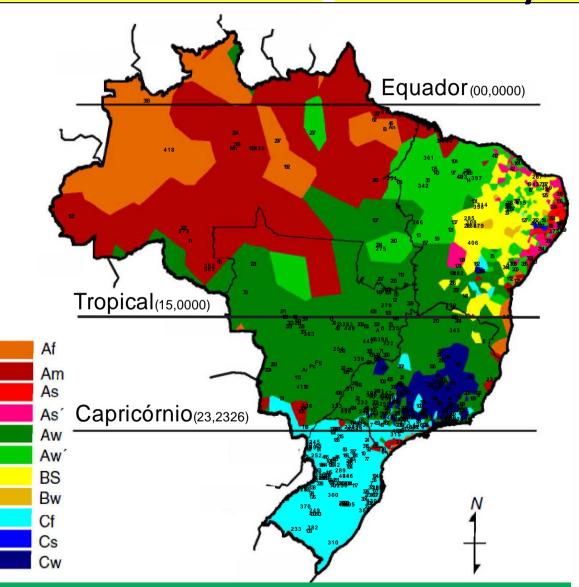




A high-resolution bioclimate map of the world: a unifying framework for global biodiversity research and monitoring (Metzger et al., 2012)

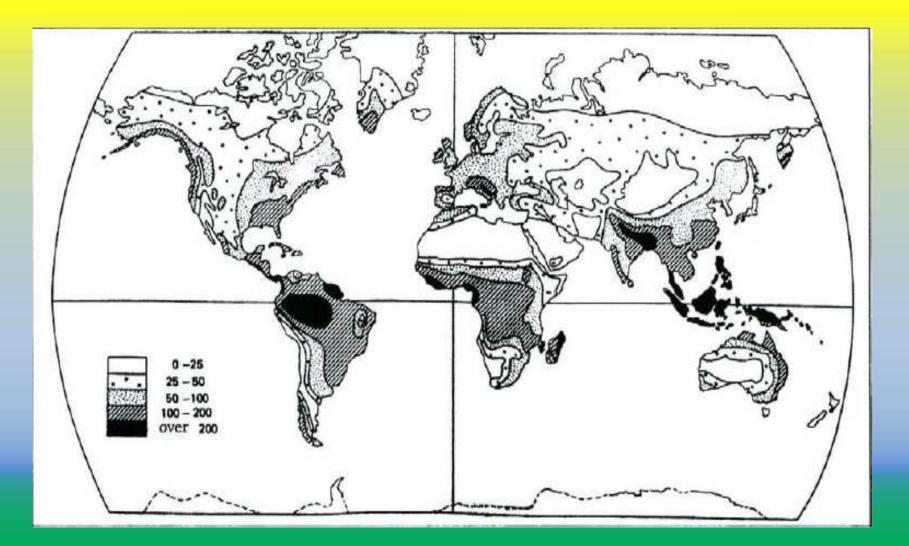


Climate-diversity

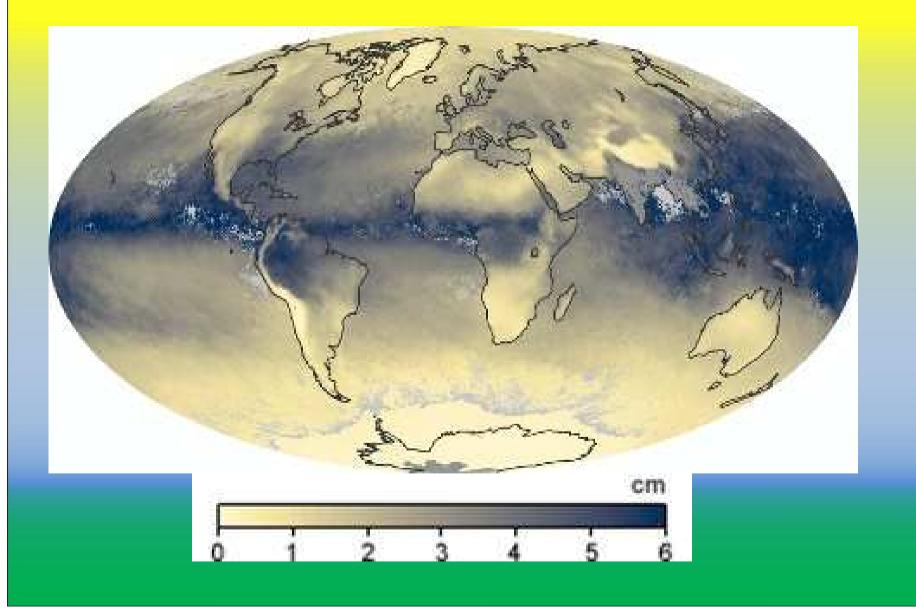


Average distribution of precipitation in the Earth

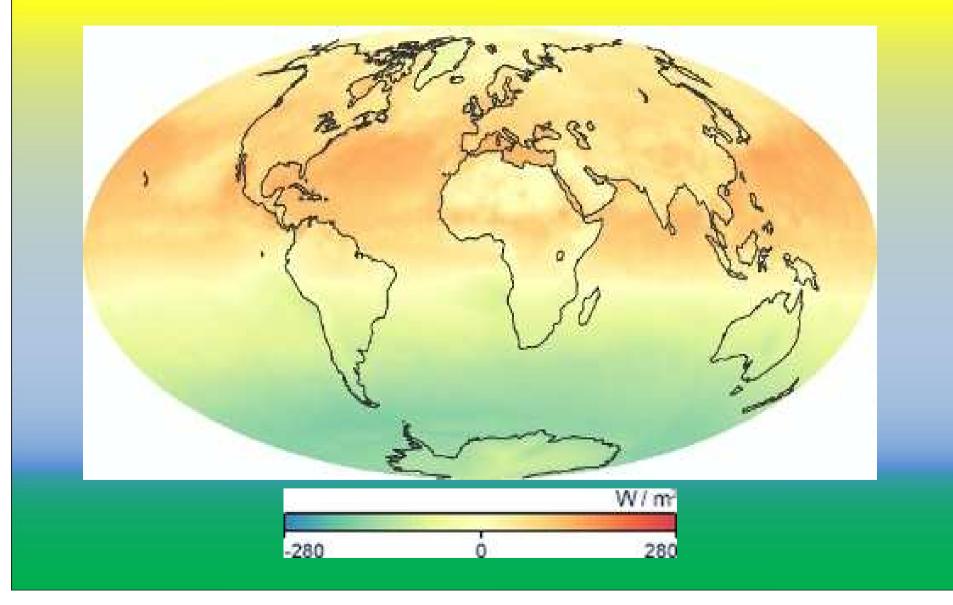
(average values of precipitation height, in cm)



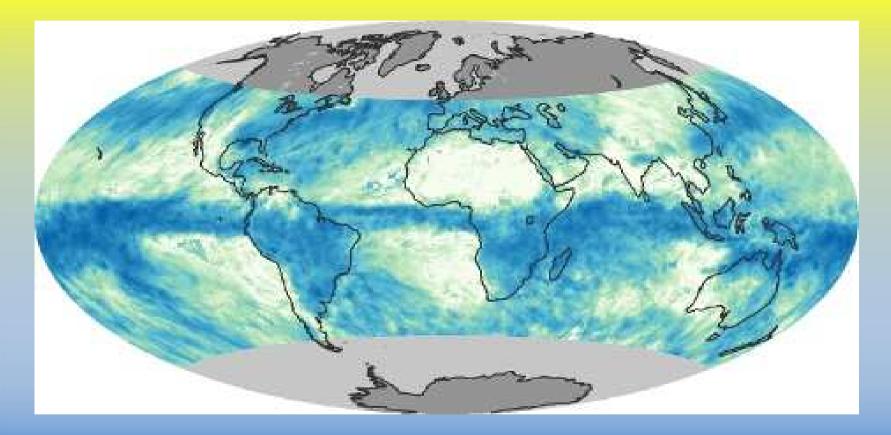
Water Vapor (<u>http://earthobservatory.nasa.gov</u> - 2002)



Net Radiation

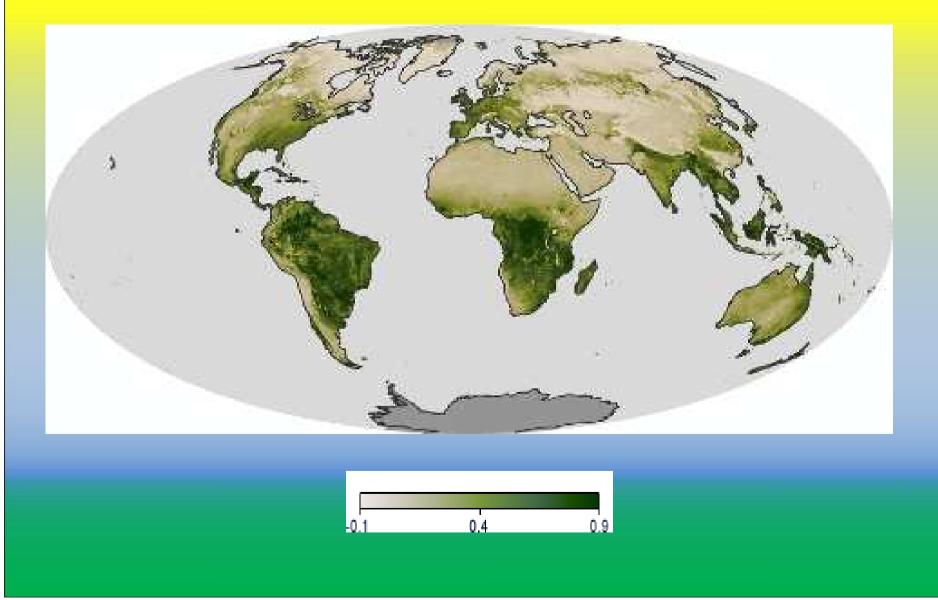


Total Rainfall

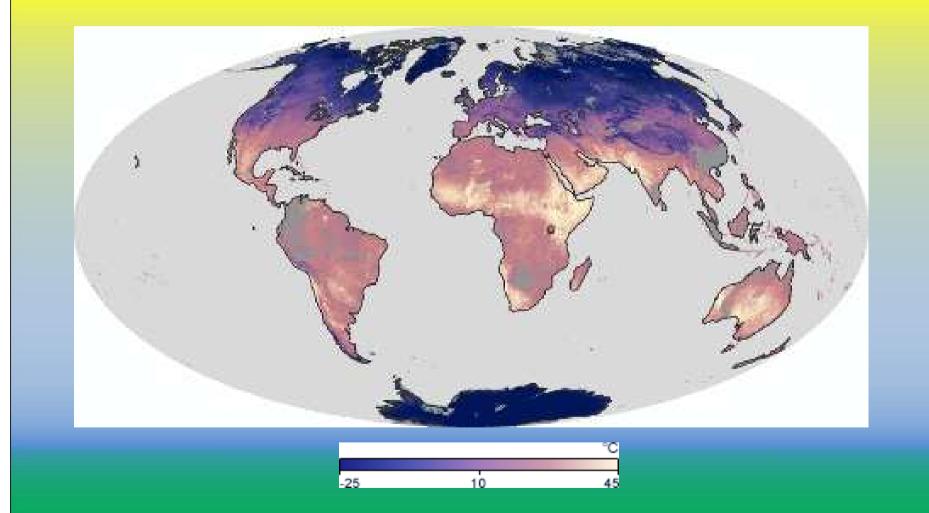




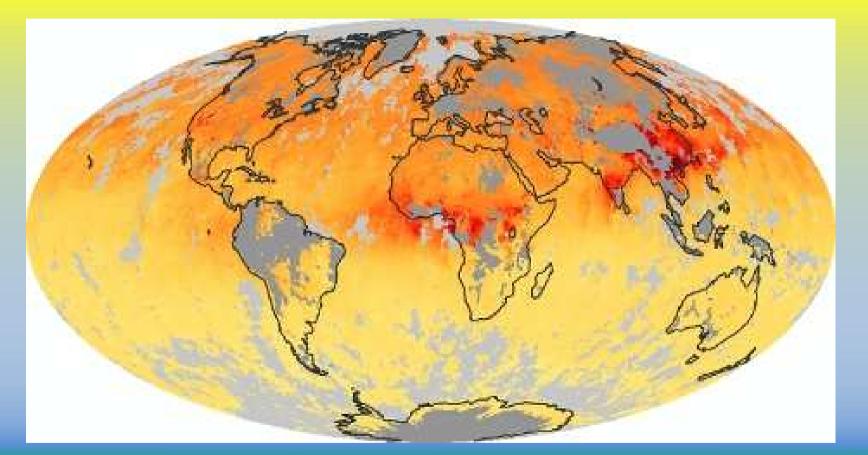
Vegetation



Land Surface Temperature

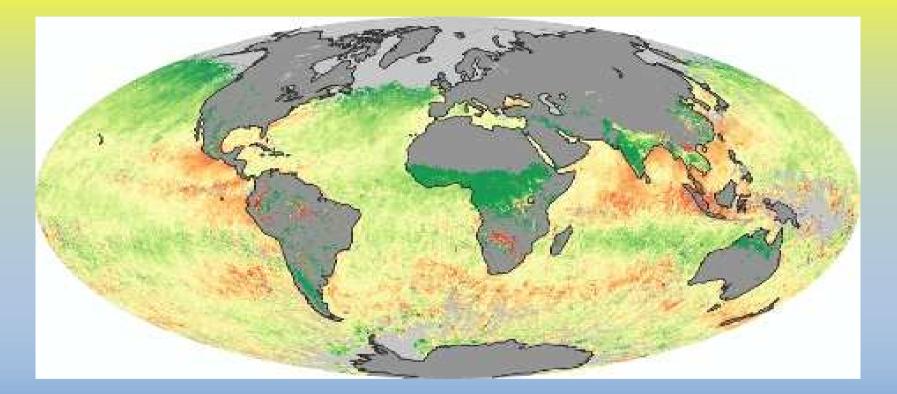


Carbon Monoxide

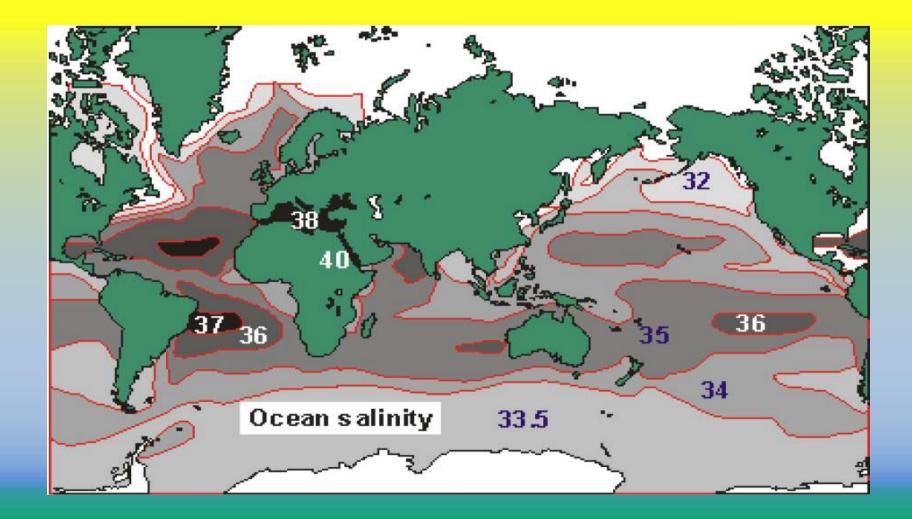


parts per billion by volume (ppbv)

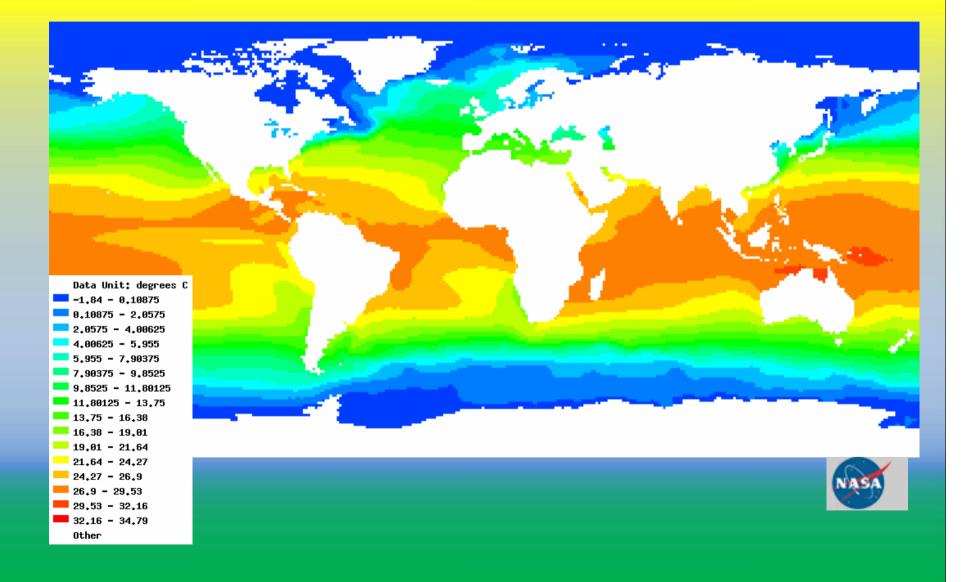
Aerosol Size



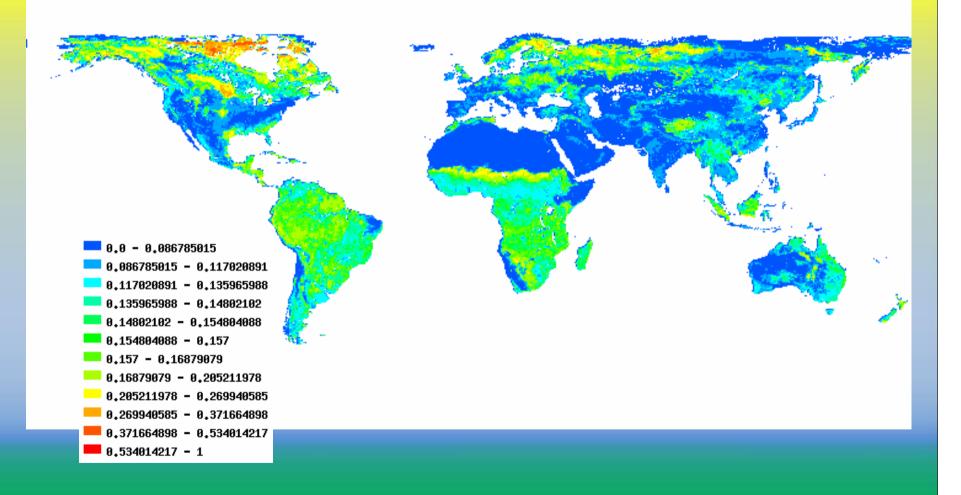
	р	ercenta	ge of sm	hall part	icles
ò	20	40	60	80	100

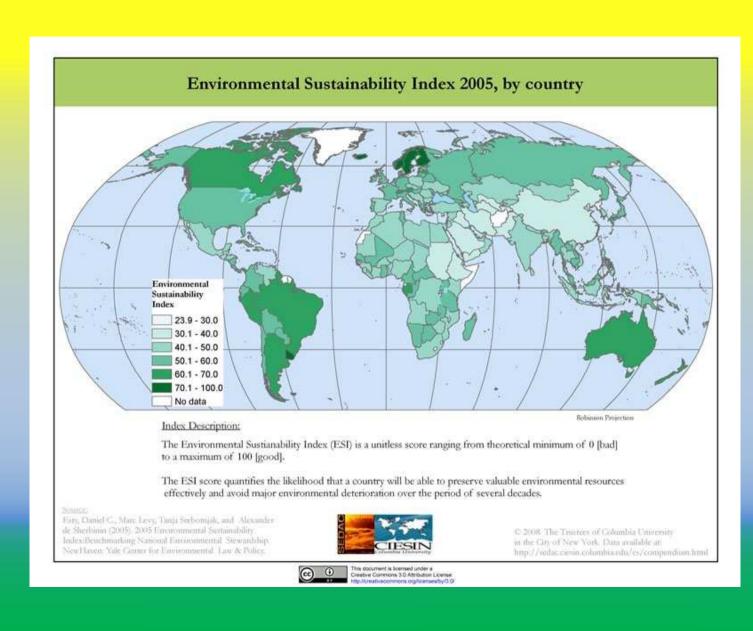


Monthly SST Climatology from 1971 to 2000 (Jan)

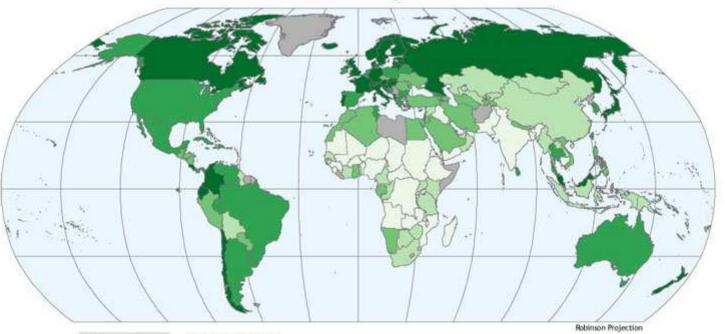


Albedo Visible Broadband (350-680 nm) Isometric BRDF Model Parameter 1995-02 (0.25 degree-resolution) (<u>http://webmap.ornl.gov</u>)





2008 Environmental Performance Index



rei	formance Index
	0.0 - 60.3
	60.4 - 70.3
	70.4 - 78.1
	78.2 - 83.1
	83.2 - 100.0
	no data

Index Description:

The Environmental Performance Index (EPI) is a unitless score based on a theoretical range from 0 to 100 (0 representing the farthest from target and 100 representing attainment of the target).

The EPI score quantifies a country's performance towards: (1) reducing environmental stresses on human health, and (2) promoting ecosystem vitality and sound natural resource management.

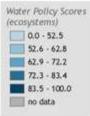
© 2008. The Trustees of Columbia University in the City of New York. Esty, Daniel C., M.A. Levy, C.H. Kim, A. de Sherbinin, T. Srebotinjak, and V. Mara. 2008 Environmental Ferformance Index. New Naver: Yale Center for Environmental Law & Policy. Data available at: http://sedac.clenin.columbia.edu/es/epi/ and http://epi.yale.edu







Water (Effects on Ecosystems) Policy Category Scores (2008 EPI)



Index Description:

The Water (Effects on Ecosystems) Policy Category of the Ecosystem Vitality Objective from the 2008 EPI is a unitless score based on a theoretical range from 0 to 100 (0 represents the farthest from the target and 100 represents the attainment of the target). Scores are averaged across two constituent indicators: Water Quality and Water Stress. This policy category weight is 2.5% of the overall EPI.

© 2008. The Trustees of Columbia University in the City of New York. Esty, Daniel C., M.A. Levy, C.H. Kim, A. de Sherbinin, T. Srebotnjak, and V. Mara. 2008 Environmental Performance Index. New Hovers Yale Center for Environmental Law & Policy. Data available at: http://sedac.clevin.columbia.edu/es/epi/and.http://epi.yale.edu





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Productive Natural Resources Scores 72.9 - 78.6 78.7 - 83.8 83.9 - 88.6 88.7 - 100.0 no data

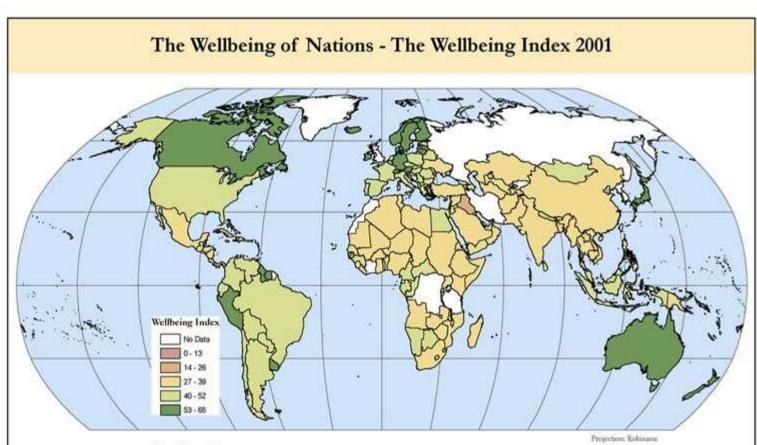
Index Description:

The Productive Natural Resource Policy Category of the Ecosystem Vitality Objective from the 2008 EPI is a unitless score based on the theoretical range from 0 to 100 (0 represents farthest from the target and 100 represents attainment of the target). Scores are averaged across the three constituent sub-categories: Forestry, Fishery and Agriculture. Countries with no forests, no active marine fishing fleets and industries, and no land used in agriculture may be missing certain indicators, associated with those activities. This category weight is 7.5% of the overall EPI.

© 2008. The Trustees of Columbia University in the City of New York. Esty, Daniel C., M.A. Levy, C.H. Kim, A. de Sherbinin, T. Srebotnyak, and V. Mara. 2008 Environmental Performance Index. New Haven: Yale Center for Environmental Law & Policy. Data available at: http://sedac.cleain.columbia.edu/es/epi/and http://epi.yale.edu







Index Description:

The Wellbeing Index (WI) is the average of the Human Wellbeing Index and the Ecosystem Wellbeing Index. It is a unitless score where 0 is the worst possible score and 100 is the best.

The WI reflects a community's readiness to achieve sustainability, measuring a combination that allows the least environmental costs in exchange for a high quality of human life. The data identifies three integral components that contribute to a high WI score: freedom, sound governance and education.

Source

Present-Allen, Robert (2001). The Wellbeing of Nationa: A Country-by-Country Index of Quality of Life and the Environment, Washington, DC: Island Press.

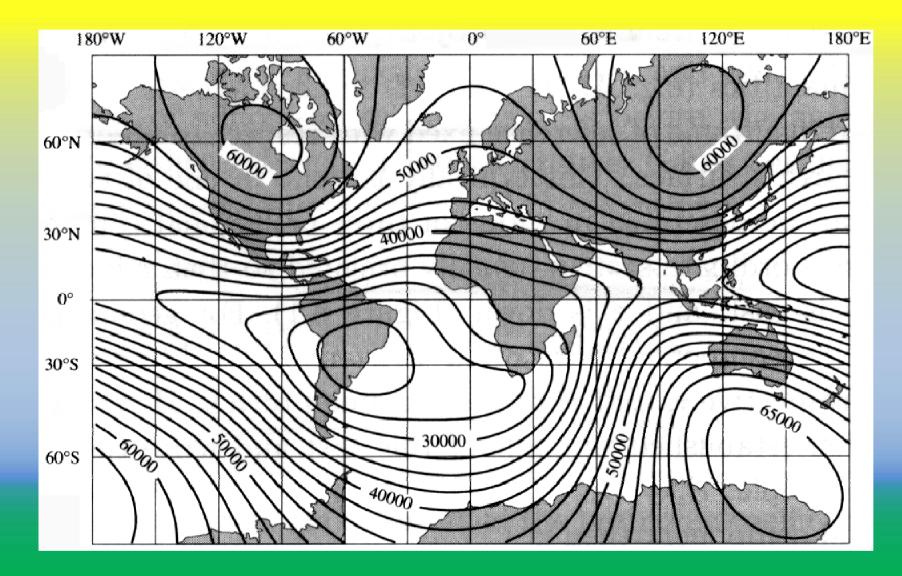


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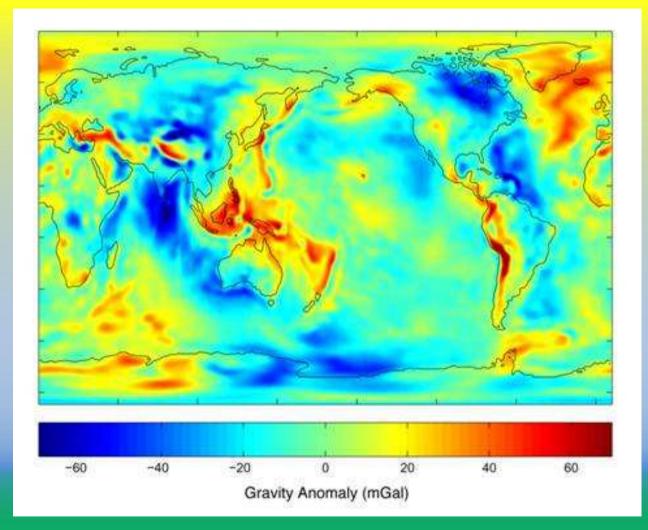


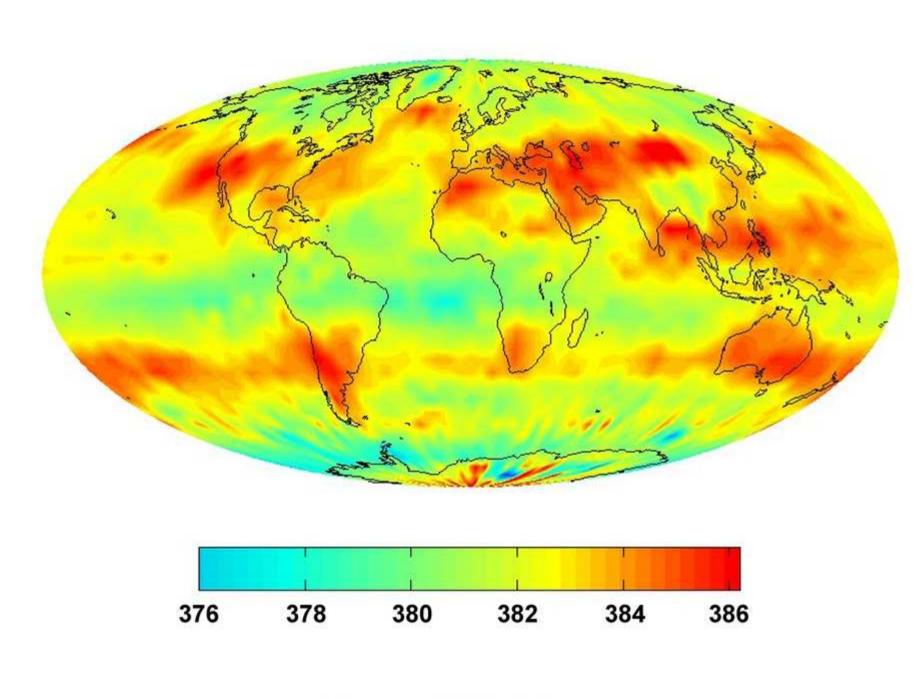
Total magnetic field presented in nanoTeslas

http://geophysics.ou.edu/solid earth/notes/mag earth/magnetic field a.gif



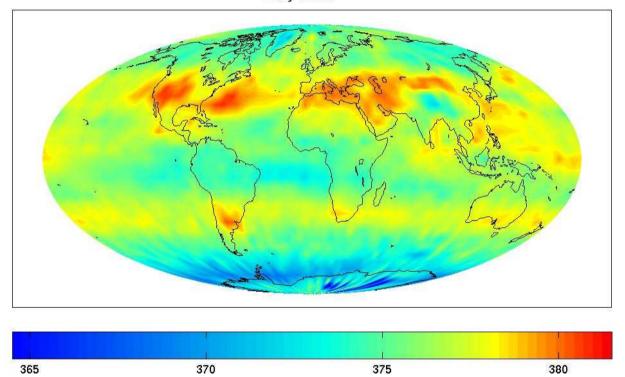
GRACE Gravity Model 01 based on 111 days of GRACE data (NASA, 2003)



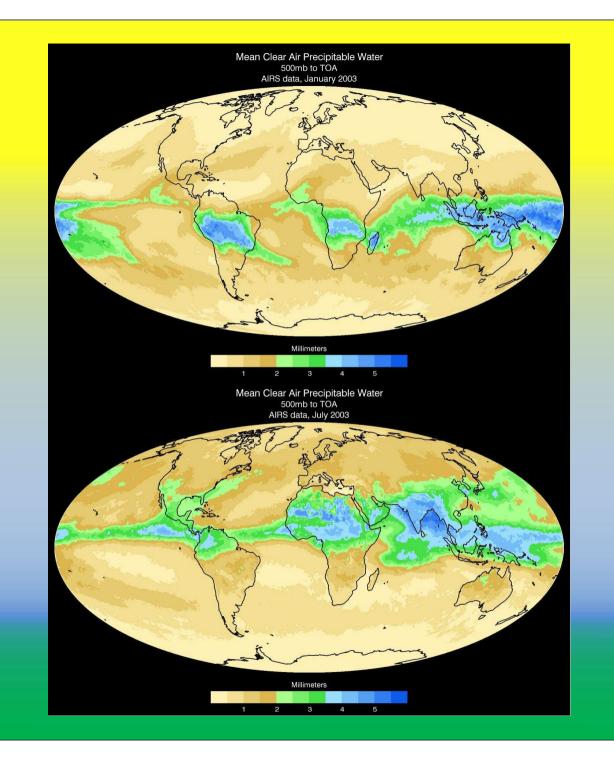


AIRS July 2008 CO (nnmy)

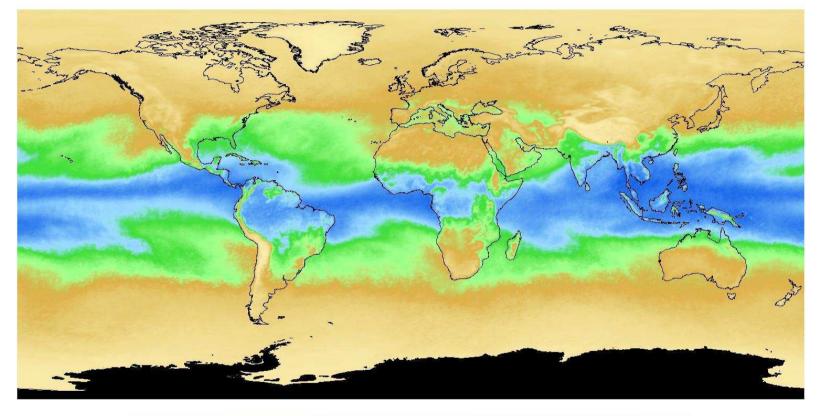
NASA AIRS Mid-Tropospheric (8km) Carbon Dioxide July 2003

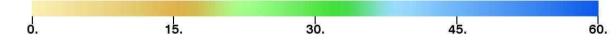


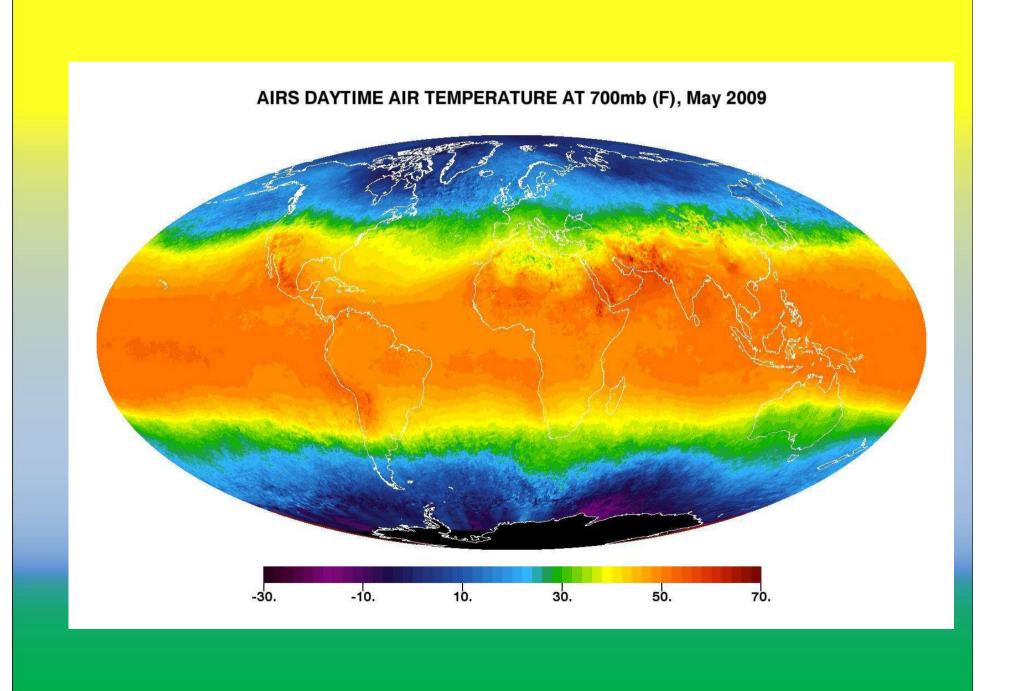
Concentration in parts-per-million by volume

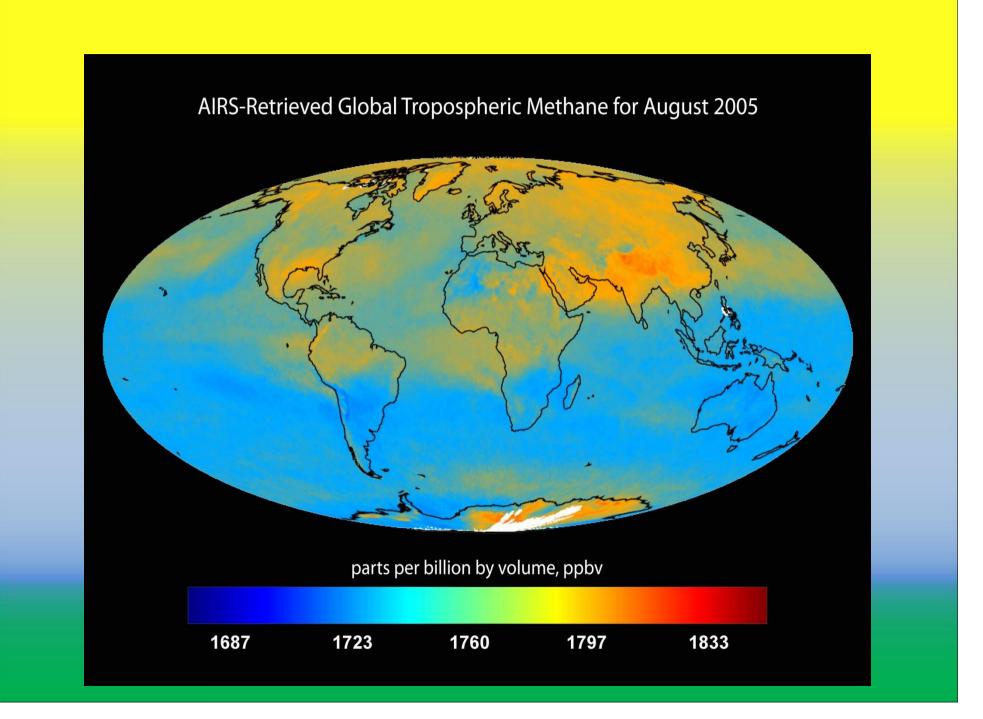


AIRS TOTAL PRECIPITABLE WATER VAPOR (mm), May 2009

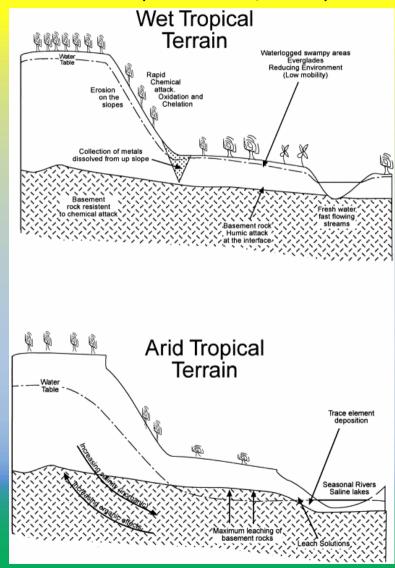




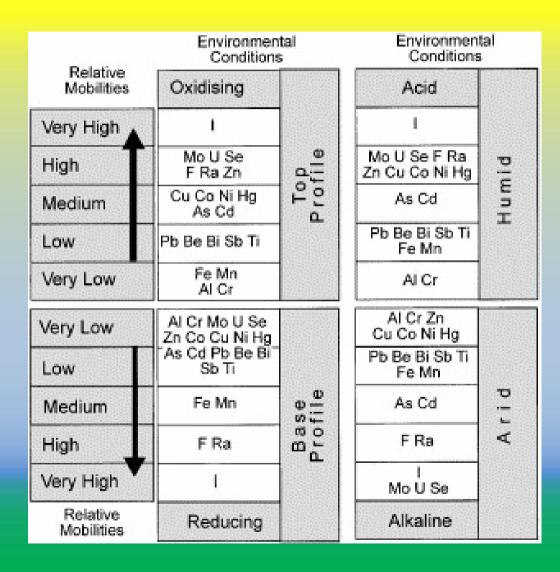




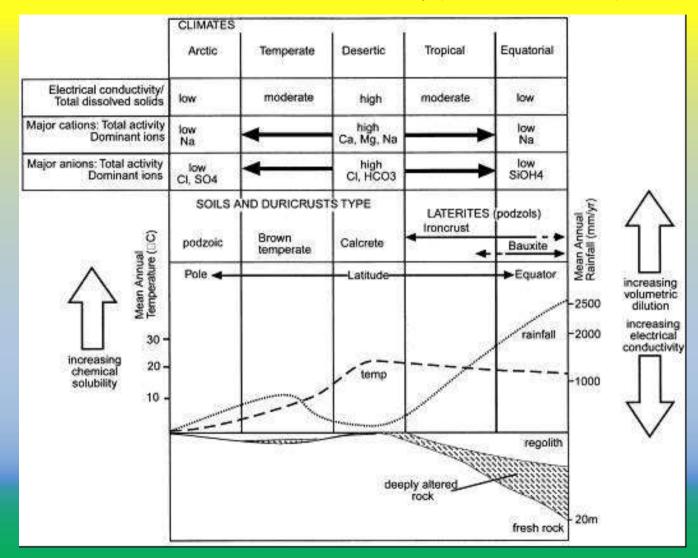
Comparison of typical relationships between wet and arid tropical environments (Plant et al, 2001)



The relative mobility of some essential and potentially toxic elements in different surface conditions (Plant et al, 2001



Generalised relationship between regolith, thickness of the weathering zone, climatic factors and water chemistry (Plant et al 2001)



Crenologia Brasil

.Disciplin in 2 Brazilian Universities untill 1950 .Comissão Crenológica Nacional Dr. Mário Mourão .Código das Águas, 1945 .Pharamacopoeias (include Brazil and USA) .Water and Natural Therapheutics Resources Laws

Salt, Sand, Mud, Algae/Plankton,...











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- Phyitotherapy
- Homeopaty
- Acunpunture
- Hydrotherapy
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- Antroposofhy
- Nutrition
- PBPk ADMNET Nature
- Cosmtics