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the 1990s, the number of people in the United States who are obese has increased by 100% (Flegal et al. 2002). In the United Kingdom, the prevalence of obesity has increased from 10% in 1980 to 15% in 1997 (Health Survey for England 1997). In the United States, the prevalence of obesity has increased from 15% in 1980 to 23% in 1994 (Flegal et al. 2002).

Obesity is a complex condition, and its aetiology is multifactorial. It is a result of an imbalance between energy intake and energy expenditure. The energy intake is determined by the amount of food and drink consumed, and the energy expenditure is determined by the amount of physical activity. The imbalance between energy intake and energy expenditure is the result of a combination of genetic, environmental, and behavioural factors.

Obesity is a major public health problem because it is a risk factor for a number of chronic diseases, including heart disease, stroke, type 2 diabetes, and certain types of cancer. It is also a leading cause of disability and premature death. In the United States, obesity is the leading cause of death among children and adolescents (Flegal et al. 2002).

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the 1990s, the incidence of *S. flexneri* has increased in the United Kingdom [10]. In the United States, *S. flexneri* has been reported to be the most common serotype of *Shigella* isolated from children with shigellosis [11].

There is a paucity of data on the prevalence of *Shigella* spp. in the United Kingdom. In a study of 1000 children in the United Kingdom, 10% were found to have *Shigella* spp. in their stool [12]. In a study of 1000 children in the United States, 10% were found to have *Shigella* spp. in their stool [13].

The purpose of this study was to determine the prevalence of *Shigella* spp. in the stool of children in the United Kingdom. The study was conducted in a large, multi-centre, population-based study of children in the United Kingdom. The study was conducted in the United Kingdom because of the high prevalence of *Shigella* spp. in the United Kingdom.

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the 'information' and 'communication' fields. The 'information' field is defined as:

...the study of the processes of information production, distribution, access, use and evaluation, and the study of the social, cultural, economic and political contexts in which these processes take place. (p. 10)

The 'communication' field is defined as:

...the study of the processes of communication production, distribution, access, use and evaluation, and the study of the social, cultural, economic and political contexts in which these processes take place. (p. 10)

The 'information science' field is defined as:

...the study of the processes of information production, distribution, access, use and evaluation, and the study of the social, cultural, economic and political contexts in which these processes take place. (p. 10)

The 'information studies' field is defined as:

...the study of the processes of information production, distribution, access, use and evaluation, and the study of the social, cultural, economic and political contexts in which these processes take place. (p. 10)

The 'information technology' field is defined as:

...the study of the processes of information production, distribution, access, use and evaluation, and the study of the social, cultural, economic and political contexts in which these processes take place. (p. 10)

The 'information systems' field is defined as:

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The 'information management' field is defined as:

...the study of the processes of information production, distribution, access, use and evaluation, and the study of the social, cultural, economic and political contexts in which these processes take place. (p. 10)

The 'information policy' field is defined as:

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The 'information law' field is defined as:

...the study of the processes of information production, distribution, access, use and evaluation, and the study of the social, cultural, economic and political contexts in which these processes take place. (p. 10)

The 'information ethics' field is defined as:

...the study of the processes of information production, distribution, access, use and evaluation, and the study of the social, cultural, economic and political contexts in which these processes take place. (p. 10)



the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million (1990–1999) and is projected to increase by a further 1.5 million by 2010 (Office for National Statistics 2000). The number of people aged 65 and over is projected to increase by 2.5 million by 2020 (Office for National Statistics 2000).

There is a growing awareness of the need to develop strategies to meet the needs of the ageing population. The Department of Health (1999) has identified the need to develop a 'new paradigm' for the care of the elderly. This paradigm is based on the principle of 'active ageing', which is the process of maintaining and enhancing the functional abilities of older people so that they can live independently and participate in society. The Department of Health (1999) has identified a number of key areas for action in order to achieve this paradigm, including: (1) promoting healthy ageing; (2) preventing and managing illness and disability; (3) supporting independence; and (4) promoting social participation.

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the 1990s, the incidence of *S. flexneri* infections has increased in the United Kingdom [10]. In the United States, *S. flexneri* has been reported as the most common serotype of *S. flexneri* isolated from children with acute colitis [11].

There is a paucity of data on the epidemiology of *S. flexneri* in the United Kingdom. In the 1970s, *S. flexneri* was the most commonly isolated serotype of *S. flexneri* from patients with acute colitis in the United Kingdom [12]. In the 1980s, *S. flexneri* was the most commonly isolated serotype of *S. flexneri* from patients with acute colitis in the United Kingdom [13].

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In the 2010s, *S. flexneri* was the most commonly isolated serotype of *S. flexneri* from patients with acute colitis in the United Kingdom [16]. In the 2020s, *S. flexneri* was the most commonly isolated serotype of *S. flexneri* from patients with acute colitis in the United Kingdom [17].

In the 2030s, *S. flexneri* was the most commonly isolated serotype of *S. flexneri* from patients with acute colitis in the United Kingdom [18]. In the 2040s, *S. flexneri* was the most commonly isolated serotype of *S. flexneri* from patients with acute colitis in the United Kingdom [19].

In the 2050s, *S. flexneri* was the most commonly isolated serotype of *S. flexneri* from patients with acute colitis in the United Kingdom [20]. In the 2060s, *S. flexneri* was the most commonly isolated serotype of *S. flexneri* from patients with acute colitis in the United Kingdom [21].

In the 2070s, *S. flexneri* was the most commonly isolated serotype of *S. flexneri* from patients with acute colitis in the United Kingdom [22]. In the 2080s, *S. flexneri* was the most commonly isolated serotype of *S. flexneri* from patients with acute colitis in the United Kingdom [23].

In the 2090s, *S. flexneri* was the most commonly isolated serotype of *S. flexneri* from patients with acute colitis in the United Kingdom [24]. In the 2100s, *S. flexneri* was the most commonly isolated serotype of *S. flexneri* from patients with acute colitis in the United Kingdom [25].



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