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the 1990s, the number of people in the UK who are employed in the public sector has increased by 1.5 million, from 2.5 million in 1980 to 4 million in 1998 (Department of Health 1999). The number of people employed in the health sector has increased by 1.2 million, from 2.2 million in 1980 to 3.4 million in 1998.

There is a growing emphasis on the need to improve the efficiency of the health service, and to ensure that the health service is able to meet the needs of the population in a cost-effective manner. This has led to a number of initiatives, including the introduction of the Health Service Act 1990, the Health Service Act 1997, and the Health Service Act 1999. These initiatives have led to a number of changes in the way the health service is organised and managed, and to a number of changes in the way the health service is funded.

The Health Service Act 1990 introduced a number of changes to the way the health service is organised and managed. It introduced the concept of the 'strategic health authority' (SHA), which is responsible for the overall management of the health service in a particular area. It also introduced the concept of the 'local health authority' (LHA), which is responsible for the day-to-day management of the health service in a particular area.

The Health Service Act 1997 introduced a number of changes to the way the health service is funded. It introduced the concept of the 'health service budget', which is the total amount of money available to the health service in a particular year. It also introduced the concept of the 'health service expenditure', which is the total amount of money spent by the health service in a particular year.

The Health Service Act 1999 introduced a number of changes to the way the health service is managed. It introduced the concept of the 'health service performance', which is the overall performance of the health service in a particular area. It also introduced the concept of the 'health service quality', which is the quality of the health service in a particular area.

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

...the study of the nature, sources, uses, and management of information, and the study of the communication of information. (p. 1)

The 'communication' field is defined as:

...the study of the nature, sources, uses, and management of communication, and the study of the communication of information. (p. 1)

These definitions are not mutually exclusive, and the two fields overlap significantly.

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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, with many causes and consequences. It is a leading cause of death and disability in the United States, and is associated with a number of health problems, including heart disease, diabetes, and cancer. Obesity is also a major cause of social and economic problems, and is a leading cause of poverty in the United States. The prevalence of obesity is increasing rapidly, and it is expected that it will continue to do so in the future.

There are many causes of obesity, including genetics, diet, and lifestyle. Obesity is a complex condition, and it is not always clear what causes it. However, it is clear that obesity is a major public health problem, and it is important to find ways to prevent and treat it. The following are some of the causes of obesity:

- Genetics: Obesity can be inherited, and it is more likely to occur in people who have a family history of obesity.
- Diet: Eating a diet that is high in calories and fat can lead to obesity.
- Lifestyle: A sedentary lifestyle, with little or no exercise, can lead to obesity.

Obesity is a complex condition, and it is not always clear what causes it. However, it is clear that obesity is a major public health problem, and it is important to find ways to prevent and treat it. The following are some of the consequences of obesity:

- Heart disease: Obesity is a leading cause of heart disease, and it is associated with a number of risk factors for heart disease, including high blood pressure, high cholesterol, and diabetes.
- Diabetes: Obesity is a leading cause of diabetes, and it is associated with a number of risk factors for diabetes, including high blood sugar and insulin resistance.
- Cancer: Obesity is associated with a number of types of cancer, including breast cancer, colon cancer, and prostate cancer.

Obesity is a complex condition, and it is not always clear what causes it. However, it is clear that obesity is a major public health problem, and it is important to find ways to prevent and treat it. The following are some of the social and economic consequences of obesity:

- Poverty: Obesity is a leading cause of poverty in the United States, and it is associated with a number of risk factors for poverty, including low income and low education.
- Discrimination: Obesity is associated with a number of types of discrimination, including discrimination in the workplace and in the housing market.
- Stigma: Obesity is associated with a number of types of stigma, including stigma in the workplace and in the housing market.

Obesity is a complex condition, and it is not always clear what causes it. However, it is clear that obesity is a major public health problem, and it is important to find ways to prevent and treat it. The following are some of the ways to prevent and treat obesity:

- Diet: Eating a diet that is low in calories and fat can help to prevent and treat obesity.
- Exercise: Engaging in regular exercise can help to prevent and treat obesity.
- Medication: There are a number of medications that can help to prevent and treat obesity.

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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 epidemiology of *S. flexneri* in the United Kingdom. In the 1970s, *S. flexneri* was the most common serotype of *Shigella* isolated from children with shigellosis in the United Kingdom [12]. In the 1980s, *S. flexneri* was the most common serotype of *Shigella* isolated from children with shigellosis in the United Kingdom [13].

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