

### Did you know?

The annual population growth rate has declined from 2.04 per cent in 1991 to 1.81 per cent in 1995. Similar declining trends are seen over the same period for the crude birth rate (31.6 to 26.9), crude death rate (11.2 to 8.5) and total fertility rate (4.24 to 3.45). A survey in 1995 revealed that those in the 20-29 year age group are in need of information on health and family planning, as well as of family planning services.

Source: <http://w3.whosea.org/cntry/health/bangladesh>

## Living with haemorrhoids may change your lifestyle

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Haemorrhoids (often known as Piles) are enlarged and engorged blood vessels in or around the back passage (anus). These may be associated with pain, bleeding, itching and feeling as if a lump or bump is hanging down. They occur when veins in your rectum enlarge from straining or pressure.

Sometimes an embarrassing topic of discussion, hemorrhoids are common disease. By age 50, about half of the adult population suffer from the itching, burning, bleeding and pain that often signal the presence of this condition. Fortunately, effective medications and procedures are readily available to treat hemorrhoids. In many cases the condition may require only self-care and lifestyle changes.

### Signs and symptoms

Signs and symptoms usually depend on the location of the hemorrhoids:

**Internal hemorrhoids.** You cannot see or feel these hemorrhoids. But straining or irritation from passing stool can injure a hemorrhoid's delicate surface and cause it to bleed. You may notice small amounts of bright red blood on your toilet tissue or in the toilet bowl. Because internal membranes lack pain sensitive nerve fibers, these hemorrhoids usually do not cause discomfort. However, you may experience a feeling of fullness in your rectum following a bowel movement. Occasionally, straining can push an internal hemorrhoid through the anal opening. If a hemorrhoid remains displaced (prolapsed), it

can cause a constant, dull ache. When irritated, it can itch or bleed.

**External hemorrhoids.** These hemorrhoids tend to be painful. Sometimes blood may pool in an external hemorrhoid and form a clot (thrombus), causing severe pain and inflammation. When irritated, external hemorrhoids can itch or bleed.

In short they manifest the following features:

- 1. You may notice a pain or ache around the anus and lower bowel (rectum), which can be really quite severe.
- 2. There may be itching of the area.
- 3. There may be bleeding from the back passage. This will be bright red blood, not usually mixed in with the motion, but often seen on the toilet paper.
- 4. There is often a feeling of something coming down, or a bulge or lump at the anus.
- 5. If a haemorrhoid at the outside of the anus gets a blood clot in it (thrombosed external pile) it leads to a particularly tender, hardish lump.

**Causes**  
Haemorrhoids are very common. They are said to be more common where the diet has traditionally been more processed and low in fibre. The main contributory causes are those things that cause us to raise the pressure in the abdomen. This causes the blood vessels to swell and become engorged.

Hemorrhoids can develop from any increase in pressure in the veins in the lower rectum. Common sources of pressure include:

- 1. Constipation and the accompanying extra straining
- 2. Diarrhea and the abrupt expulsion of diarrhea stools

**Sitting or standing for a long time**  
1. Obesity  
2. Heavy lifting  
3. Pregnancy and childbirth

It is also possible to inherit a tendency to develop hemorrhoids.

**Screening and diagnosis**  
As a general rule, see your doctor if your hemorrhoids are painful or bleed frequently or excessively. The most common sign of hemorrhoids is rectal bleeding. But because rectal bleeding can occur for other reasons, see your doctor to rule out more serious conditions or diseases. Other causes of bleeding in the lower gastrointestinal tract include:

- 1. Proctitis, an inflammation of the inner lining of the rectum
- 2. Colon or rectal growths (polyps)
- 3. Anal fissure, a tear in the lining of your anus
- 4. Anal fistula, an abnormal channel that develops between the anal canal and the skin around the opening to the anus
- 5. Rectal prolapse, in which a portion of the rectal lining protrudes through the anus
- 6. Diverticular disease, in which small sacs or pouches (diverticula) commonly form from the lining of the large intestine

If the onset of your hemorrhoids occurs along with a marked change in bowel habits or if you are passing black, tarry or maroon stools, consult your doctor without delay. These types of stools can signal more extensive bleeding elsewhere in your digestive tract.

Seek emergency care if you notice large amounts of rectal bleeding, weakness or a rapid heart rate of more than 100 beats a minute.

A doctor can determine if you have external hemorrhoids simply by looking. For internal hemorrhoids, your doctor may want to conduct an examination with a rubber-gloved finger. But even this technique may be inconclusive because hemorrhoids are often too soft to detect.

In this case your doctor may want to examine the lower portion of your colon and rectum with an anoscope, proctoscope or

colon, which typically indicates other conditions.

**Treatment**  
In most cases treatment of hemorrhoids involves steps that you can take on your own. But sometimes medications or surgical procedures are necessary.

**Medications:** If your hemorrhoids are producing only mild discomfort, your doctor may suggest over-the-counter

creams, ointments or pads containing witch hazel or a topical anti-inflammatory agent containing hydrocortisone. This local treatment, in combination with daily warm baths, may relieve your symptoms.

**Surgical or other procedures:** If a blood clot has formed within an external hemorrhoid, your

doctor can easily remove the clot with a simple incision, which should provide prompt relief.

For painful or persistent hemorrhoids, your doctor may recommend:

**Tying off a hemorrhoid:** A doctor ties one or two tiny rubber bands around the base of an internal hemorrhoid to cut off its circulation. Within 7 to 10 days, the hemorrhoid painlessly falls off. This simple, practically painless procedure called rubber band ligation is done in a doctor's office and is effective for most people.

**Sclerotherapy:** A chemical solution is injected around the blood vessel to shrink the hemorrhoid.

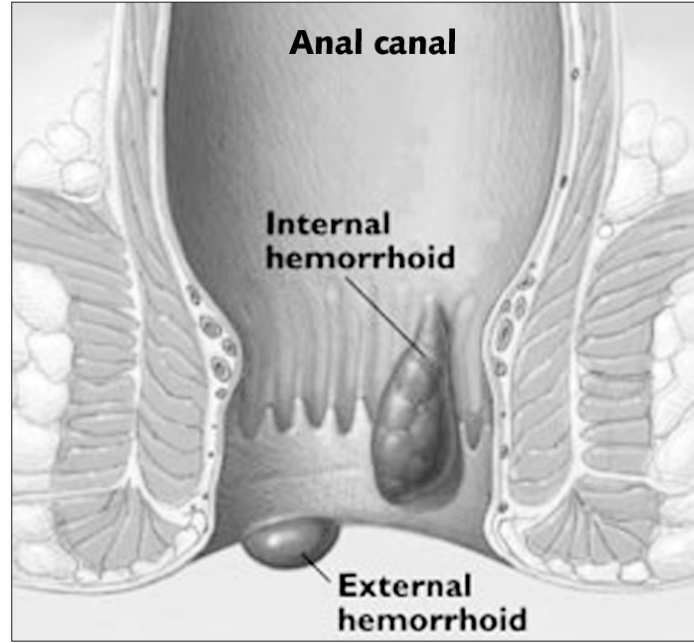
**Infrared light:** A 1- or 2-second burst of infrared light also can cut off circulation to an internal hemorrhoid. You may experience some warmth during the procedure called infrared photocoagulation and a little bleeding within a few days.

**Laser therapy:** In this procedure called laser coagulation a laser beam vaporizes hemorrhoidal tissue.

**Freezing:** This technique, cryosurgery, freezes the affected tissue, cutting off circulation and destroying the hemorrhoidal tissue.

**Electric current:** Bursts of electric current shrink a hemorrhoid in a procedure similar to infrared photocoagulation.

**Surgery:** If other procedures have not been successful or if you have a large hemorrhoid, your doctor can remove tissue in a procedure called hemorrhoidectomy. The more extensive the removal of tissue, the lesser the chance of recur-



sigmoidoscope. A more extensive examination could include a barium enema, which results in a better display of your colon and rectum on an X-ray, or colonoscopy an examination of the entire colon using a flexible fiber-optic colonoscope. These tests can determine that the bleeding is not from higher in the

creams, ointments or pads containing witch hazel or a topical anti-inflammatory agent containing hydrocortisone. This local treatment, in combination with daily warm baths, may relieve your symptoms.

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## Facts about sinusitis

STAR HEALTH DESK

Sinusitis is an infection or inflammation of the membranes that line the nasal passages and sinuses (the air-filled spaces in the front of the skull).

### Sinusitis

Most colds (infection with one of the common cold viruses) cause a stuffy or "banged up" nose, which clears up within a few days. But if the sinuses become inflamed, other symptoms such as headache and painful swelling of the face may develop. Sinusitis may only last a few days (acute sinusitis), or it may be an ongoing problem that, without treatment, never completely goes away (chronic sinusitis). Acute sinusitis is more common whereas chronic sinusitis is less. Babies under one do not get sinusitis because their sinuses are not fully developed, but it can otherwise affect people of any age.

### The sinuses

The sinuses are hollow air-filled spaces in the skull bones. They are connected to the nose and lined with the same membrane, called mucous membrane, which produces a slimy secretion (mucus) to keep the nasal passageways moist and trap dirt particles.

There are four main sets of sinuses. The frontal sinuses are on either side of the forehead above the eyes. The maxillary sinuses are in each cheekbone. The smaller ethmoid sinuses are behind the bridge of the nose and between the eyes, and the sphenoids are between the upper part of the nose and behind the eyes.

### What are the symptoms?

The main symptom of sinusitis is a throbbing pain and pressure in the face, which is made worse by bending forwards. Frontal sinusitis causes pain above the eyebrows, and the forehead may be tender to touch. Maxillary sinusitis causes aching in the upper jaw, teeth and cheeks and may be mistaken for toothache. Inflammation of the ethmoid sinuses causes pain around and between the eyes and the sides of the nose. Inflammation of the sphenoid sinus can cause earache, neck pain or an ache behind the eyes, at the top of the head or in the temples.

Other typical symptoms include:

- 1. Return of a stuffy nose after a cold has cleared up,
- 2. Thick yellow or green discharge from the nostrils,
- 3. Cold symptoms that do not respond to treatment; and
- 4. A constant foul smell in the nose.

Sinusitis can also cause a high

temperature, weakness, tiredness, loss of taste and sense of smell and a cough that produces mucus, which is worse at night.

Very rarely, the infection can spread to the facial bones or the membranes lining the brain (meningitis). Occasionally, sinusitis can spread to form a pocket of pus (abscess) in an eye socket, the brain or a facial bone.

### What causes sinusitis?

Most cold viruses only result in a blocked nose. However, if the mucous membrane lining the nasal passages and sinuses swells up, this can block mucus drainage. Mucus builds up causing the pressure and pain of sinusitis. Bacteria or fungi are more likely to grow in sinuses that cannot drain properly and bacterial infection often causes more inflammation and pain.

Chronic sinusitis is caused by anything that irritates the lining of the nose over long periods and causes the mucous membrane to swell. Examples include grass and tree pollen, cold air, alcohol, perfumes, damp weather, allergy to house dust mite, mould and fungi; and chronic drug use.

People who have allergy-based asthma often have sinusitis as well. Indeed, any problem with the nose that blocks the drainage holes can produce sinusitis. This can include polyps (small nodules of mucous membrane) and injury that causes the bridge to lean to one side (deviated nasal septum).

Tooth and gum infections can spread to the sinuses. Rarer causes of sinusitis include conditions that weaken the immune system such as HIV and cystic fibrosis. Swimming, air pollution and smoking can aggravate sinusitis.

### How is sinusitis diagnosed?

The doctor will ask about symptoms, touch parts of the face to find any pain or swelling and may use a technique called transillumination, where a bright light is held against the cheek or forehead in a dark room. The light should pass through normal sinuses; if it doesn't, this suggests a blockage.

If the symptoms and physical findings are typical of sinusitis, no further testing is usually needed. If there is any doubt, it may be necessary to have further tests, including X-rays, MRI (magnetic resonance imaging) or CT (computerised tomography) scans.

Nasal endoscopy may be used to investigate chronic sinusitis.

### Treatment

**Acute sinusitis:** Often sinusitis can be treated with home treatments. Rest, breathing in steam from a bowl of hot water, and over-the-counter medicines

should help. Ask a physician for better and detailed advice.

Ibuprofen or paracetamol help to relieve pain and lower temperature. Decongestants, such as pseudoephedrine, and menthol, which can be inhaled, reduce the swelling in the nose and allow the sinuses to drain. Decongestants should not be used for more than a week, as prolonged use can actually make nasal blockage worse in the long run. So before starting self-medication you must consult your physician.

Consult a general practitioner if symptoms do not improve after a week of trying home remedies. The physician may prescribe a course of antibiotics.

**Chronic sinusitis:** Steroid nasal sprays available from pharmacists and on prescription, are helpful in two ways. If long-term infection is present they help to reduce swelling of the nasal lining and open up the drainage holes and if allergy is involved they also reduce inflammation. Antihistamines might also help.

In severe cases, the physician may recommend a short course of steroid tablets. These are only available on prescription.

Endoscopic nasal surgery may be needed as a last resort. Tubes and instruments passed down a nasal endoscope are used to wash out the sinus and widen the drainage hole. This can be done under general or local anaesthetic. It is a routine and generally safe procedure, but all surgery does carry some element of risk. Complications include minor damage to the lining of the nose or sinuses, or damage to the skull bone. The physician will decide whether surgery is a must or not. You need not take decision by your own.

Other types of surgery sometimes required to treat chronic sinusitis include correcting a bent nasal cartilage (septoplasty) or removing nasal polyps.

### Prevention

It is possible to reduce the chances of developing sinusitis. Here are some things that might be helpful, especially for people who are prone to sinusitis:

- 1. Keeping the air humid at home,
- 2. Using an air-filtering vacuum cleaner,
- 3. Removing pets,
- 4. Having a course of anti-allergy injections,
- 5. Stopping smoking,
- 6. Drinking less alcohol; and
- 7. Using a decongestant spray or tablets before diving or swimming.

## Pneumonia prevention: It's worth a shot

Pneumococcal disease is an infection caused by bacteria. These bacteria can attack different parts of the body. When they invade the lungs, they cause the most common kind of bacterial pneumonia. When the same bacteria enter the blood, they cause an infection called bacteremia. In the brain, they cause meningitis. Pneumococcal pneumonia is a serious illness that kills many people.

### Can Pneumonia be prevented?

For some causes of pneumonia, it is preventable. The pneumococcal vaccine is safe. It works, and one shot lasts most people up to 10 years. People who get the vaccine are protected against almost all of the bacteria that cause pneumococcal pneumonia and other pneumococcal diseases as well.

Some experts say it may be best to get the shot before age 65, anytime after age 50; since the younger you are, the better the results. They also say people should have this shot even if they have had pneumonia before. There are many different kinds of pneumonia, and having one kind does not protect against the others. The vaccine, however, does protect against 88 percent of the pneumococcal bacteria that cause pneumonia. It does not guarantee that you will never get pneumonia. It does not protect against viral pneumonia. Most people need to get the shot only once. However some older people may need a booster; check with your doctor to find out if this is necessary.

### Who should get the vaccine?

According to the Centers for Disease Control and Prevention, everyone age 65 and older should get it the pneumonia vaccine. Some younger people should get it also.

Ask a doctor for the vaccine if you:

- 1. Are age 65 or older.
- 2. Have a chronic illness, such as heart or lung disease or diabetes.
- 3. Have a weak immune system. (This can be caused by certain

kidney diseases, some cancers, HIV infections organ transplant medicines, and other disease.)

### Are there side effects?

Some people have mild side effects from the shot, but these usually are minor and last only a very short time. In studies, about half of the people getting the vaccine had mild side effects like swelling and soreness at the spot where the shot was given, usually on the arm.

A few people (less than 1 percent) had fever and muscle pain as well as more serious swelling and pain on the arm. The pneumonia shot cannot cause pneumonia because it is not made from the bacteria itself, but from a bacterial component that is not infectious. The same is true of the flu shot; it cannot cause flu. In fact, people can get the pneumonia vaccine and a flu shot at the same time.

### About the disease and the vaccine

There are two main kinds of pneumonia - viral and bacterial. Bacterial pneumonia is more serious. One kind of bacteria causes pneumococcal pneumonia. In older people, this type of pneumonia is a common cause of hospitalisation and death.

About 20 to 30 percent of people over age 65 who have

pneumococcal pneumonia develop bacteremia. At least 20 percent of those with bacteremia die from it, even though they get antibiotics.

People age 65 and older are at high risk. They are two to three times more likely than people in general to get pneumococcal infections.

A recent, large study by the National Institutes of Health suggests that the vaccine prevents most cases of pneumococcal pneumonia.

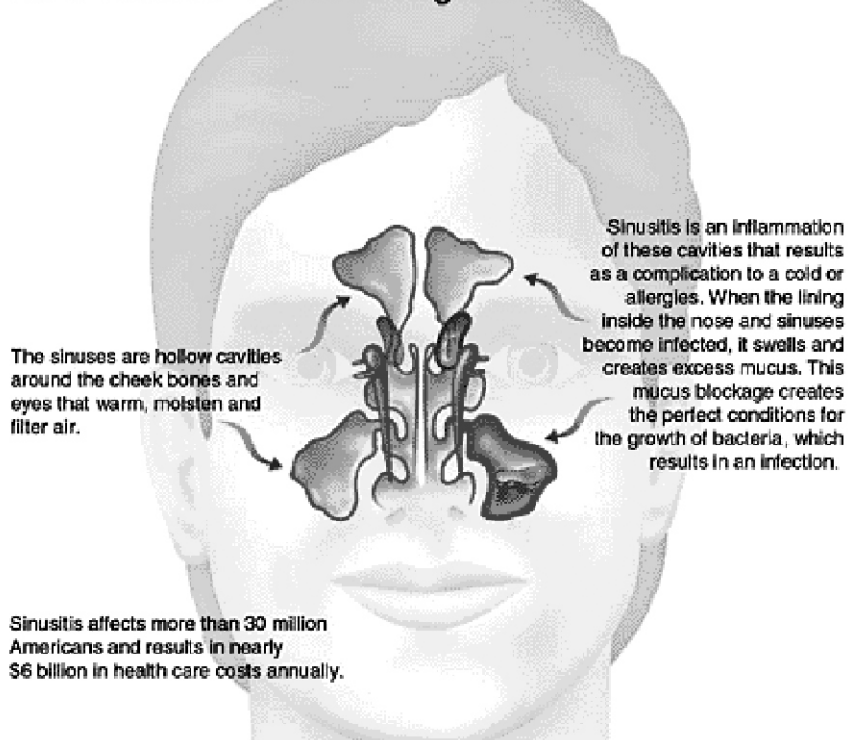
The U.S. Public Health Service, the National Coalition for Adult Immunization, and the American Lung Association now recommend that all people age 65 and older get this vaccine.

### Key facts

- 1. Everyone age 65 and older should get the pneumonia vaccine.
- 2. Anyone with chronic disease or a weak immune system should also get the vaccine.
- 3. Most people need to get it only once.
- 4. Most people have mild or no side effects.

Source: <http://www.nia.nih.gov/health/agepages/pneum.htm>

### How sinusitis causes congestion



Sinusitis affects more than 30 million Americans and results in nearly \$6 billion in health care costs annually.

