

Bird flu: No reason to be panicked

PROF DR NAZKUL ISLAM

Bird flu is one kind of flu that is known by common people as influenza. It was limited among birds. Specially migratory birds and swan do not suffer from the disease. But when it is transmitted among poultry, they get infected. It was not supposed to be transmitted among human. But unfortunately in 1997, humans get infected by bird flu and died of the disease. It was the flu of poultry. Since then it is alarming for us. The interesting news that we all should know - bird flu usually does not spread from human to human. Humans get infected when it is transmitted from poultry.

The germ lives in the intestine of poultry, not in their lungs. When it is transmitted among human, it lives in their lungs. It may be transmitted by the inhalation of chicken excreta. Besides, people who work in the poultry farm are more prone to the disease.

There are many types of bird flu. Among them H5N1 is the most common.

There is no evidence of bird flu in our country. But it can be transmitted in our country by any infected poultry or person. It can spread if we import any infected poultry. Another source of bird flu can be the



migratory birds. It can infect our poultry which is an alarming issue for the nation. The government took initiatives to kill infected poultry where bird flu broke out. It is very costly to cure an infected poultry. It costs approximately 1800 Tk. So it is not wise to treat them, rather the experts suggest to kill them. Many patients infected by bird flu manifests the symptoms of acute respiratory distress syndrome and die of the disease. Acute respiratory distress syndrome is also common among SARS

infected people and the people infected by Nipah virus. The people who manifests the symptoms of acute respiratory distress syndrome die of the disease. It is difficult to diagnose the disease by other symptoms. So laboratory investigation is mandatory to make any diagnosis. We can take some initiatives to prevent bird flu. For example, we can stop importing poultry and other products from the countries where bird flu already broke out. There is no effective vaccine against bird flu and there is research ongoing. But there

are some drugs in the world market like oseltamivir. It can be used for the prevention and treatment. Institutionally, there is no initiative to prevent the disease. BRAC in collaboration with Bangladesh Veterinary Association have taken some initiatives which can prevent the disease. Recently Eskayef Bangladesh Ltd has launched the drug oseltamivir against bird flu in our country which can play a vital role to combat the disease. Many countries in the world is stockpiling oseltamivir to

prevent the disease. So it is a good initiative to manufacture the drug at home to cut short the cost. And we should pay attention about the preservation of the drug.

We have to be alert about the spread of unnecessary fear about the disease. As there is no record of infection in our country, it is a privilege for our people that they can buy the drug easily from the local market.

It is not possible to diagnose the disease by symptoms for which laboratory investigation is mandatory. But there is no facilities of such investigations in our country. We hope that the investigation will be available shortly.

BRAC has taken initiatives to identify the disease among poultry. They are performing the test with the assistance of Bangladesh Livestock Research Institute (BLRI) at Savar.

We are taking some initiatives to identify the disease. But we need necessary reagents and equipment yet.

If there is any symptoms of the disease among people from abroad, we can treat them by oseltamivir and we hope there is nothing to worry.

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Drug against bird flu is now available in our country

STAR HEALTH REPORT

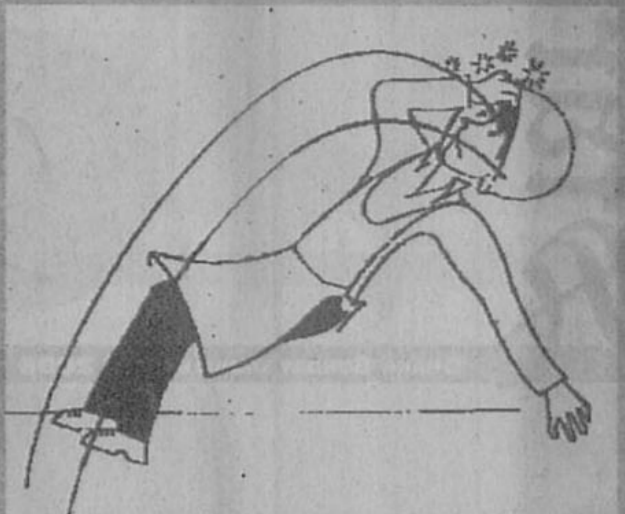
Oseltamivir - the world famous drug to combat bird flu is now available in our country. Eskayef Bangladesh Ltd has recently launched the drug in Bangladesh in the trade name SK-flu.

However, the drug is not available in the market. The company is just stockpiling the drug. Any person suspecting the disease is requested to visit a physician who can prescribe the drug. The person or the doctor can contact Eskayef from where they can take the drug. This is maintained to keep the database of infected people in the country.

Oseltamivir can be used to treat bird flu or people can take the drug as prophylaxis basis. Many countries of the world is stockpiling the drug to manage any emergency situation.

A person should take the drug within 48 hours of exposure. The treatment regimen is administration of the drug three time daily for five days. For pre-exposure, people should take the drug once daily basis for a period of six weeks.

First Aid



How to manage fainting?

Fainting occurs when the blood supply to our brain is momentarily inadequate, causing us to lose consciousness. This loss of consciousness is usually brief.

Fainting can have no medical significance, or the cause can be a serious disorder. Therefore, treat loss of consciousness as a medical emergency until the signs and symptoms are relieved and the cause is known.

- If you feel faint:
- Lie down or sit down.
- If you sit down, place your knees.
- Discuss recurrent fainting spells with a doctor.

If someone else faints:

1. Position the person on his or her back. Make sure the legs are elevated, if possible above the heart level.

2. Check the person's airway to be sure it is clear. Watch for vomiting.
3. Check for signs of circulation (breathing, coughing or movement). If absent, begin CPR (Cardio Pulmonary Resuscitation). Call a local emergency number that comes to your mind. Continue CPR until help arrives or the person responds and begins to breathe.



A little exercise may prevent arthritis disability

Even a quite modest amount of exercise might be better than none at all when it comes to preventing disability from arthritis, new research suggests.

In a study that followed more than 3,500 U.S. adults with arthritis, researchers found that those who were getting some regular physical activity at the study's start were less likely than their sedentary peers to develop worsening problems with walking, climbing stairs and other daily activities.

Exercise was more likely than inactivity to show improvements in any mobility problems they had at the outset.

The study included 3,554 adults ages 53 to 63 who had osteoarthritis, the wear-and-tear form of arthritis in which the cartilage cushioning the joints breaks down over time, leading to pain, stiffness and, often, limited mobility.

Osteoarthritis is one of the major causes of functional decline - problems with daily activities like walking short distances, bathing and preparing meals.

The new findings suggest, however, that even modest levels of exercise can help prevent disability from arthritis, or perhaps reverse it in some cases, according to Dr. Joe Feinglass, the study's lead author.

Study participants who got some exercise - but less than 30 minutes per day of moderate activity or less than 20 minutes of vigorous exercise - were still less likely than inactive arthritis sufferers to show functional decline over time.

However, that does not mean there is no benefit to getting more exercise, noted Feinglass, a research associate professor at Northwest-

Encouraging your baby to try new foods

DR SHAHANAZ CHOWDHURY

There is always a burning question raising from the mother - "what can be done to encourage the baby to try new foods?" To answer this question, the first order of business is to relax. Introducing new foods can be a time of exciting anticipation for you as you see your baby is leaping towards new milestones of development. This is why you may also tend to get frustrated and even more determined that your baby will love at least some of the foods you have taken the trouble to introduce. Remember that every food you introduce is one that has never crossed your baby's lips, which means he has to get used to the new texture and the flavor of each one - not to mention that pesky spoon. With all of this in mind, here are more tips for helping your baby try (and eventually eat) new foods.

- If you don't succeed at first, try and try again (ten times)! Your baby may hate his first, third, and ninth exposure to carrots, but the tenth time just may be the charm! So don't give up!
- In the same spirit of trying things many times, experiment with different ways of presenting foods. Your baby may not like bananas by themselves, but he may love them mixed with his favorite oat-

meal cereal. (Just be sure not to introduce more than one new food at a time, so you can check for allergies.) Likewise, your older baby may prefer shredded steamed carrots to sliced.

- Try new foods when your baby and you are at your best - when you are both well rested, in good spirits, and healthy.
- Your baby will be more open to new foods if s/he is hungry (but not overly hungry) so give him his new food before his bottle.
- Although your baby might make a funny face, it does not mean that he does not like it. He may just be reacting to the distinctly different taste.
- Babies are easily distracted, so especially when introducing new foods, keep distractions - like TV, music, and toys to a minimum.
- If your baby seems interested in holding the spoon, give him his own. That way s/he is more of an active participant.
- Provide a positive eating experience for your baby, by either holding him or facing him in the highchair and giving him your undivided attention. Try to keep your facial expressions positive, even when serving a food you detest!
- Let your baby see you eating the same food he's eating. He loves imitating you.

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Tonsillitis should not be ignored

STAR HEALTH DESK

Tonsillitis refers to the inflammation of tonsils - the large, fleshy, oval masses of tissue that lie in the wall of the oral cavity on either side of the throat.

There are many possible causes of tonsillitis. It is highly contagious. There are bacterial and viral causes of tonsillitis.

Tonsillitis is extremely common in children and young people but it can occur at any age. Affected person typically has a sore throat, fever, swollen glands in the neck, and trouble swallowing. Additional symptoms of tonsillitis in children include: blisters or painful ulcerated areas on the throat, nausea, vomiting, abdominal pain, headache, and loss of appetite, malaise, chills, loss of voice or changes in the voice.

The symptoms of tonsillitis may resemble other conditions or medical problems. Always consult a physician for diagnosis.

Prevention
All forms of tonsillitis are contagious. Whether due to viruses or bacteria, the infection spreads from person to person by airborne droplets and personal contact. Do



not share eating utensils, towels, drinking glasses, toothbrushes etc. with the affected person. Make sure to practice good hand-washing habits and teach your child to do the same. Cover your mouth when you cough or sneeze, and teach your children to do the same.

Treatment
Tonsillitis is usually a self-limiting condition. It only lasts about a week. It gets better without treatment, and generally there are no complications. But the sometimes complications

like secondary infection may occur in the middle ear or sinuses.

If the sore throat is due to a streptococcus bacterial infection, there may be a rash (scarlet fever). In some cases, diseases like rheumatic fever or a particular kidney disease (glomerulonephritis) can occur.

The conventional treatment offered to the patients are analgesics like paracetamol and some antibiotics. Gargle with salt water eases the discomfort.

If conventional approach fails, tonsils can be removed by sur-

gery.

Indication of tonsillectomy

There is a common myth or some people think that tonsillectomy is the only treatment of tonsillitis. Surgery to remove the tonsils (tonsillectomy) may be necessary for those patients suffering from repeated infections (more than 5 to 7 times during a year) and severe infections that refuse to respond to conventional treatment which significantly interfere with their school or work schedule. The doctor may consider a tonsillectomy to remove the tonsils. Moreover after 20 years there is no significant value of tonsil.

Do's and don'ts

If signs of a sore throat persist for more than a few days or are severe with marked difficulty in swallowing, high fever or vomiting, then you should consult a physician. Warm drinks, soft food may ease swallowing problems.

The most important thing to notice is tonsillitis should not be ignored. People should consult physician as soon as possible. Otherwise it may lead to some serious complications like rheumatic fever.

Diabetic people should be more aware of heart diseases

DR MD HABIBE MILLAT

Heart disease often goes hand-in-hand with diabetes. Heart disease is common in people with diabetes. Statistics from the American Heart Association estimate that heart disease and stroke are responsible for two-thirds to three-fourths of deaths amongst those with diabetes.

About 3 percent male and 1 percent female population of Bangladesh suffers from diabetes. Bangladeshi population are 5 times more prone to diabetes than UK population.

Persons with diabetes are at a much greater risk for heart attacks, strokes, high blood pressure and other vascular problems include poor circulation to the legs and feet. Unfortunately, many of the cardiovascular problems can go undetected and can start early in life.

Serious cardiovascular diseases can begin before the age of 30 in persons with diabetes.

According to the American Diabetes Association, damage to the coronary arteries is two to four times more likely in asymptomatic persons with type 1 diabetes (also called insulin-dependent diabetes, is an autoimmune disease in which the body's immune system attacks the cells that produce insulin, resulting in no or a low amount of insulin) than in the general population. Because symptoms may be absent at first.

In a study published in the New England Journal of Medicine, persons with type 2 diabetes (is a result of the body's inability to make enough, or to properly use, insulin) also have an increased risk for heart disease. According to the study, persons with type 2 diabetes, who appear to have no heart problems, run the same risk as someone without diabetes who has had a heart attack.

For good blood flow, blood vessels need to be flexible and

free of plaques. Cholesterol build up in arteries makes them rigid ("hardening of the arteries") and narrower. Diabetes can upset the balance between good (HDL) and bad (LDL) cholesterol. The result: high blood pressure, blood clots, even heart attacks and strokes. This build up usually begins before the increase in blood sugars that occurs in type 2 diabetes. In other words, heart disease almost always has established itself prior to the diagnosis of type 2 diabetes.

For example, one study found that people with diabetes who had no other risk factors for heart disease were 5 times more likely to die of heart disease than those without. Another study shows that people with diabetes, no matter the number of other heart disease risk factors, were as likely to have a heart attack as a non-diabetic who has already had a heart attack.

People with diabetes are also at higher risk for heart failure, a

condition in which the heart is not able to pump blood adequately. This can lead to fluid build-up in the lungs that causes difficulty breathing, or fluid retention in other parts of the body (especially the legs) that causes swelling.

The best way to prevent heart and blood vessel disease is to eliminate or reduce risk factors. Keep your blood glucose as normal as possible, control your blood pressure (target for people with diabetes is under 130/80), get your cholesterol numbers under control, maintain healthy weight, exercise regularly, eat a heart-healthy diet low in fat and salt and quit smoking. Always consult your physician for a treatment plan.

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