

## No reason to go abroad for cardiac care, says Dr Seth

TAREQ SALAHUDDIN

The Daily Star spoke to Dr Ashok Seth, Chairman and the Chief Cardiologist of Max Heart and Vascular Institute of New Delhi, India during his recent visit to Bangladesh.

Dr Seth who was awarded India's "Padma Shri" by the Indian President in 2003 is an honorary professor of cardiology of Bangladesh Medical College and he has been visiting the country every year during the past one decade to train our local doctors.

Dr Seth joined Max Heart & Vascular Institute of (Saket) New Delhi, India in November 2004. Dr Seth got MCRP, FRCP, FACC, FSCAI and gave up a prestigious appointment at the University Department of Cardiology at the Queen Elizabeth Hospital in Birmingham, UK to return to India and joined the Escorts Heart Institute and Research Centre (EHIRC), New Delhi, since its inception as Chief of Invasive and Interventional Cardiology.

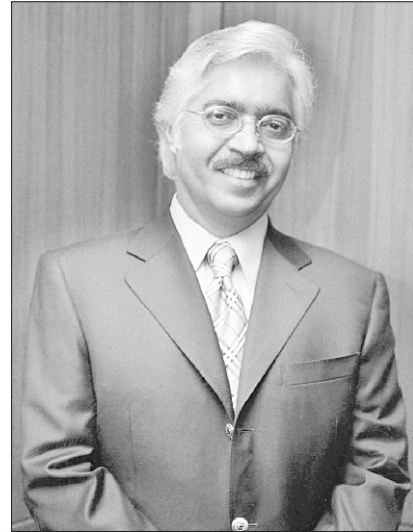
Dr Seth is widely recognised as a leader in the field of interventional cardiology. He is a pioneer in the use of directional atherectomy and stents. Dr Seth,

who was awarded numerous national and international awards, has performed the highest number of angiographies and angioplasties in the Asia-Pacific region. He is faculty member of several prestigious international scientific bodies and has been guest speaker at several institutions in India and across the world. He is currently serving on the editorial board of several internationally indexed medical publications of Cardiology and Internal Medicine.

During his recent visit he talked elaborately about plans to bring advanced medical technologies for the benefit of patients and common people particularly in the subcontinent. Dr Seth also discussed elaborately on the future of cardiac care in Bangladesh and his contribution to the sector.

Dr Seth trains Bangladeshi doctors at National Heart Foundation, Bangladesh Medical College, National Institute of Cardio-Vascular Diseases (NICVD). There is also provision of regular training on angiography and angioplasty of Bangladeshi doctors in India. Dr Seth prefers to train doctors from government level to serve the common people.

Like the previous years he also has plan to train more Bangladeshi doctors,



Dr Ashok Seth

particularly young cardiologists who are able to return and contribute immensely. Because of its modern facilities at the Max Healthcare all the trainees would be readily exposed to use of the world's latest equipment.

As Dr Seth is familiar with the cardiac care of our country over the last one decade, he opined that the development

in cardiology during the past few years is tremendous. The sector is growing fast and there are lots of reliable physicians in the respective field. Especially our doctors have developed immensely in angiography and angioplasty. This is why Dr Seth opined that there is no reason for Bangladeshi people to go abroad for cardiac care. The advanced technology is reaching the common people.

But the confidence on the local doctors still remains a major problem, he said. He is, however, very hopeful that because the young cardiologists have done so well during training, he is sure that in years to come they would be able to build that confidence to serve the local patients.

Talking about the cost of the medicine in our country, Dr Seth said that it is quite reasonable. He said that here are three important aspects of cost in cardiac care. One is until we are able to reach high tech-professional expertise in cardiac

care to the middle class we are not reaching our goals. As far as cost is concerned I must say that all levy on life saving medical accessories must be withdrawn. Unless we are able to control pricing at this end middle class people who need cardiac care would continue to find it costly. The second is establishment of

good hospitals with facilities to offer total care. A patient with heart disease should be able to confidently walk in to such hospital where they would be looked after. Here rich and the middle class both would be coming for treatment but while keeping the standard of services the same middle class and the rich get treated like in a cinema hall where they have separate sitting arrangements but watching the same movie. Here subsidising prices for those who cannot afford cost of all the services could be a good idea. Thirdly, third party payment or health insurance could be a good idea, which can make people afford such super-specialised healthcare facilities. The concept of private insurance for healthcare is gradually increasing in South Asia even in Bangladesh.

Dr Seth is also pioneer in the research sector. He expressed about the research of heart valves that could be implanted non-invasively like the intervention of stents. The fascinating technique is still on trial and on animal models, 25 experiments have been performed where the success rate is 75 percent. He is also trying to develop a low cost drug eluting stent (at a surprising cost of Rs 25000 only).

### Exercise Tools

## Lower-intensity exercise may melt more pounds

A brisk walk through the park might be better than a fast run when it comes to shedding pounds, a small study suggests.

Researchers found that among 14 women who embarked on a three-month exercise regimen, those who worked out at a moderate pace lost more weight than those who exercised more intensively.

But it is not time for runners to start slowing down, according to the study authors. For one, women in the higher-intensity exercise group did retain more muscle mass than those who worked out more moderately.

More importantly, though, there is no such thing as one "magic exercise," said lead study author Dr. Vassilis Mougios of Aristotle University of Thessaloniki in Greece.

To get the greatest health and fitness benefits, he said, people should strive for a mix of moderate and vigorous cardiovascular exercise, as well as strength training.

Losing weight basically boils down to burning more calories than you take in. But it has not been clear whether the intensity of a regular workout makes a difference in body composition - that is, the proportions of fat and lean tissue.

To study the question, Mougios and his colleagues randomly assigned 14 normal-weight and overweight women to one of two groups: one that exercised on a treadmill at a moderate pace, four times a week; and one that worked out at a more vigorous clip, also four times per

week. The researchers set the duration of the workouts so that women in both groups would burn 370 calories each time.

After three months, exercisers in both groups were slimmer, but the lower-intensity group lost more weight - about 7 pounds, on average, compared with 4 pounds in the high-intensity group.

Fat-free mass decreased slightly (less than half a pound) in the low-intensity exercisers and increased slightly (about 1 pound) in the high-intensity group.

It is possible, according to Mougios, that women in the high-intensity group shed fewer pounds because they ended up eating more, or were so drained by their regimen that they relaxed more in their leisure time.

In turn, the women may have held on to more muscle simply because they lost less weight. On the other hand, the researchers note, high-intensity exercise may actually spur some growth in muscle fibers.

The bottom line, according to Mougios, is that people should stay active with various forms of exercise. But for those who want to know whether they are working hard or moderately, he said a heart rate monitor or some simple pulse checks during the workout will provide that information.

SOURCE: International Journal of Sports Medicine, March 2006.



All health information to keep you up to date

## Vitiligo views

Vitiligo is a skin condition characterised by white patches resulting from the loss of skin's pigment, known as 'melanocyte'. Any part of the body may be affected. Vitiligo is a relatively common disease; about 2 percent of the world's population have vitiligo problem, and over half of these people develop it before their 40th birthday, most between the ages of 10 and 30. References to vitiligo patches are mentioned in ancient Chinese and Greek writings. The disorder affects all races and both sexes equally.

This disease may be due to several factors. Abnormally functioning nerve cells may produce toxic substances, which injure melanocytes. Pigment producing cells may self-destruct. There may be a genetic effect that makes melanocytes susceptible to injury. Some researchers have found that the body's imbalanced immune system may destroy melanocytes; although it could be in people without having any autoimmune

disorders. These autoimmune disorders include hyperthyroidism (an overactive or underactive thyroid gland), adrenocortical insufficiency (the adrenal gland does not produce enough of the hormone called corticosteroid), alopecia areata (patches of baldness), and pernicious anemia (a low level of red blood cells caused by failure of the body to absorb vitamin B12).

Even though it's true that vitiligo is not fatal, and that it has no other physical symptoms, but the emotional and sometimes (if it is exposed) social effects of vitiligo are well-known. If a doctor suspects that a person has vitiligo, he or she usually begins by asking the person about his or her medical history and should assure him/her about the latest rewarding results. The doctor needs to know whether the patient or anyone in the patient's family has had any autoimmune disorders and whether the patient is very sensitive to the sun. The doctor will then examine the patient to rule out other

medical problems.

This is true that vitiligo is not easy to treat - but in the past few years, more treatments options are available than ever before and that are working better. And even though results can take time, this can be treated. Treatment can take time from six months up to years. Where you don't see good results with one treatment, another may work better. In addition to the traditional therapies such as the PUVA and steroid creams, new technologies have been developed, including narrow-band UVB, Pseudocatalase cream, excimer lasers, skin grafting and pigment transplantation, topical psoralens, and potentially, the use of immunomodulators. According to many researchers, usually there is no one treatment that works for everyone.

### DID YOU KNOW?

## The care after delivery

STAR HEALTH DESK

The postpartum period, or puerperium, starts an hour after the delivery of the placenta and includes the following six weeks. The postpartum period covers a critical transitional time for a woman, her newborn and her family, on a physiological, emotional and social level.

The woman and newborn need special attention during this period because of the fact that the majority of maternal and infant deaths and morbidities occur during this time. During the postpartum period family members and health service providers need to respond to the following special needs of mother and newborn:

**During the postpartum period a woman needs:**

- Information/counseling on:
  - Care of the baby and breastfeeding
  - What happens with and in their bodies - including signs of possible problems
  - Self care - hygiene and healing
  - Sexual life
  - Return to fertility and contraception
  - Nutrition
- Support from
  - Health care providers
  - Partner and family - emotional and psychological
- Health care for suspected or manifested complications
  - Time to care for the baby including maternity leave



- Help with domestic tasks
  - Social reintegration into her family and community
  - Protection from abuse and violence
- During the postpartum period a newborn needs:**
- Easy access to the mother
  - Appropriate feeding
  - Adequate environmental temperature
  - A safe environment
  - Parental care
  - Cleanliness
  - Observation of body signs by somebody who cares and can take action if necessary
  - Access to health care for

- suspected or manifested complications
- Nurturing, cuddling, stimulation
  - Protection from:
    - Disease
    - Harmful practices, Abuse and violence
    - Acceptance of gender, appearance, size
    - Recognition by the state (vital registration system)
- Adapted from the World Health Organisation, Postpartum care for mother and newborn: Report of a technical working group.

## Hip exercises aid common knee problem

People with chronic knee pain known as patellofemoral pain syndrome may find relief from exercises that strengthen and stretch the hip muscles, research suggests.

In a study of 35 adults with the condition, researchers found that when patients were able to increase their hip strength and flexibility through physical therapy, their knee pain significantly diminished.

Patellofemoral pain occurs under and around the kneecap, and often worsens after activity or long periods of sitting with the knees bent. As it moves, the kneecap tracks along the groove of the thigh bone, and incorrect alignment between these bones is thought to play a major role in patellofemoral pain.

Typically, therapy for patellofemoral pain focuses on the kneecap - akin to bringing the "train back on the track," explained Timothy Tyler, a physical therapist at Lenox Hill Hospital in New York City and the lead author of the new study.

In contrast, he said, exercises for the hip muscles - which stabilize the thighbone and pelvis - essentially "bring the track back to the train."

For their study, published in the American Journal of Sports Medicine, Tyler and his colleagues followed 35 patients who went through six weeks of physical therapy for patellofemoral pain. The regimen focused on strengthening and improving flexibility

in various muscles that act on the hip.

Overall, the study found, the therapy was successful for two-thirds of the patients, and strengthening the hip flexors - muscles that bring the thigh and torso toward each other - was a key to success.

Of the 26 knees that were treated successfully, strength in the hip flexor muscles improved by an average of 35 percent. On other hand, in all cases where patellofemoral pain did not improve, there was no gain in hip flexor strength.

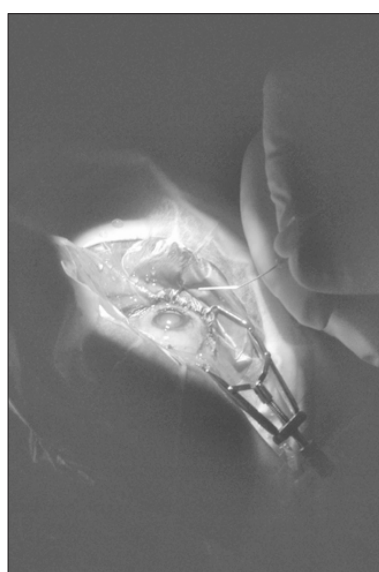
Patients also benefited from boosting their flexibility - namely, in muscles that flex the hip and in the iliotibial band, a long stretch of connective tissue that runs along the outer thigh, from the hip to just below the knee.

Tyler described the success rates in the study as "remarkable," and said the findings point to the importance of hip muscle function in patellofemoral pain. But right now, he noted, the typical physical-therapy prescription for the condition does not focus on the hip muscles.

"Hopefully, this will spread," Tyler said.

SOURCE: American Journal of Sports Medicine, April 2006.

## SEMINAR ON PHACO SURGERY



Bangladesh Eye Hospital, a state-of-the-art private eye hospital and Alcon Bangladesh jointly organised a day-long seminar on latest advancement of phaco surgery on Friday last in Bangladesh Eye Hospital. Phaco surgery is the latest state-of-the-art technique for the management of cataract.

Renowned phaco surgeon and eye specialist of the sub-continent Dr Abhay R Vasavada and eminent eye specialists of the country presented scientific papers on advanced techniques of phaco surgery on the seminar. Distinguished eye specialists and doctors of our country attended the day-long scientific session and observed live surgeries.

## Your Doctor

On coming issue "Your Doctor" will respond to problems of nephrology (kidney diseases). Send your questions to Your Doctor, Star Health, The Daily Star, 19, Karwan Bazar, Dhaka 1215 or e-mail your problem to starhealth@thedailystar.net