

Food facts, not fictions

- It is better not to cut vegetables before cooking. If you want to cut them before cooking, cut them into big pieces. It is also favourable not to chop or slice thinly. In that way, nutrient loss is more as it increases the surface area. Try to peel potatoes after cooking since it helps to preserve the nutrients. At least 10 percent Nutrients is lost if you peel vegetables before cooking.
- After washing your hands, do not forget to dry them before eating. If hands are still wet, organisms present on wet hands may be more easily transferred to food lying on your plate. But take into account — bacteria that causes food poisoning does not always look, smell or taste divergent.
- Cows' milk should be stored in the coldest part of the refrigerator. And dry milk powder should be used within the stipulated period of six months from the date of manufacture.
- It is not true that food poisoning is always from what you ate last evening or night. It may take two days or more to develop the symptoms of food poisoning. But it is true that it varies from man to man depending on immunity. For this reason small children with immature immune systems are at a greater risk of food poisoning than that of adults. Well, it could also be adults whose immune system is weak.
- In deep frying, the food is cooked above 150° C — where values of food substances are reduced to minimum. Over and above, cooking oil or fat used for deep frying should not be repeatedly used since prolonged use of the fat causes polymerisation of the fat, which ultimately not only irritate gastrointestinal tract, but also suspected to be potential carcinogens.
- Cooked food should be refrigerated immediately. There is no need to cool at room temperature before refrigeration. Food poisoning bacteria often grow at temperatures between 5° — 60°. This period is also known as the 'temperature danger zone'. Keeping food out of the temperature danger zone will reduce the risk of food poisoning.
- Lots of people think that reheating food can make that secure to eat. In fact, it is not always true. There are some bacteria which can form poisons that are not eradicated by heating. Another point regarding food poisoning is that the formation of poisons may occur if the food has been allowed to cool slowly. Anyway, it is not a good idea to keep your food-stuff out of the fridge too long.
- Most ripe fruits other than bananas and apples can be stored in the refrigerator. It is better to avoid over ripe fruits as they are a source of infection. Unripe tomatoes should be stored at room temperature. And, once frozen vegetables are thawed; it is better not to be refrozen.
- Ice cream is not a useless food. It contains all the nutrients found in milk which includes calcium, vitamin A and protein. Unfortunately, it is also high in fat. That is why, it is not good for obese or overweight people or those who have high cholesterol level.

Dental management after severe accident

DR K ABUL HASNAT FARZAN

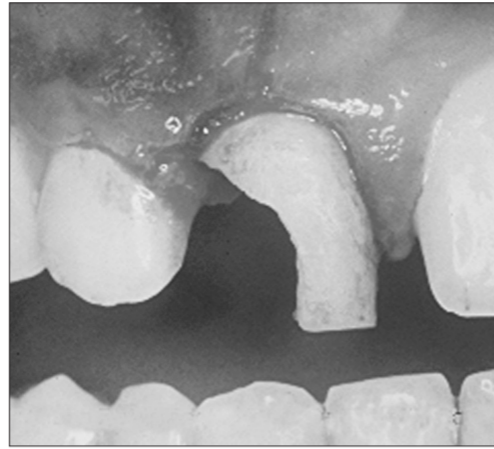
Accidental trauma or sudden pressure on the teeth may cause lots of complicated situations. If not treated immediately, the level of complication may become higher and after certain period this complication may refer to another teeth or spread throughout the whole mouth and gastrointestinal track, surrounding head and brain as well.

The complications may be as follows:

- Highest degree of mobility of affected teeth due to extreme pressure.
- Complete or partial fracture of teeth.
- Complete fall down of teeth intake.
- Discoloration of teeth (like bluish black appearance).
- Ball like swelling in the gum full of pus near the apex of the affected teeth.
- Severe tender swelling surrounding the affected teeth and part of the face, throat and

neck also.

- Intolerable continuous pain occurs at the affected site; surrounding area may also be affected.
- Severely lacerated gum, lip, cheek and tongue also.
- Fracture line in any part of the mandible or maxilla.
- Complete fracture of the part of the mandible or maxilla.
- Patient may loose interest in taking food or drink or even cannot open mouth properly.
- Patient's normal activities and health become poor day by day.
- End result of complication can develop in future like in the form of cyst, tumor, eformity of face etc.
- Patients cannot bite properly due to missing teeth or irregular dentition, granuloma (mass of granulation tissue i.e. soft tissue, consisting mainly of tiny blood vessels and fibres, which forms at the site of bacterial infections or over a wound) formation or symptoms may turn into other severe conditions.



Here most significant thing is that — most of the complications develop very slowly with or without any symptoms and some of the complication spread very rapidly and can involve entire oral cavity as well as whole mouth also.

However, all type of diagnostic and management facilities are available but decision should be taken in right time and at right

place. Don't hesitate to start the treatment, otherwise you may suffer in future.

The appropriate management should be followed for such above complications. These include:

In case of complete teeth fall, it can be replaced by dentists.

In case of any type of fracture, discolored or with epically infected teeth, the treatment may be extraction or root canal therapy

be managed by an operative procedure known as apicectomy.

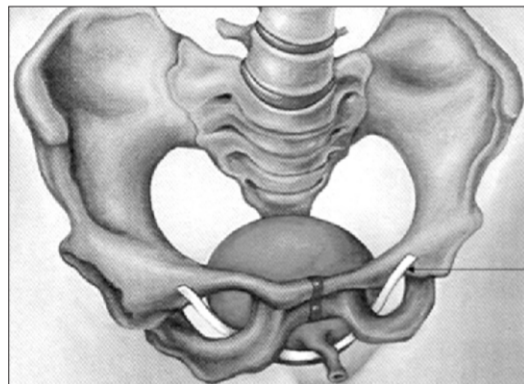
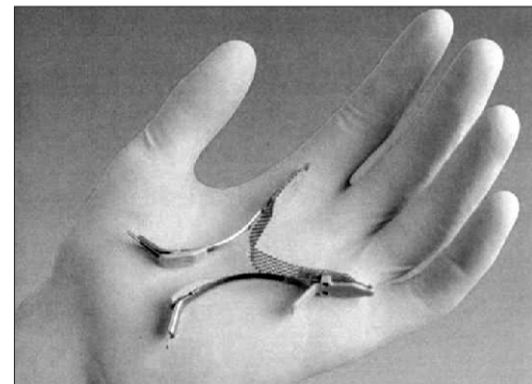
In case of mandible or maxilla fracture, the treatment procedure is a bit elaborate and depends on the type of fracture.

If we confirm about tumor in the mandible or maxilla after proper investigation, the treatment may be complete excision followed by radiotherapy in some cases.

In above all conditions, a course of antibiotic have to be taken in addition with some pain killers, relaxant, H₂ blocker etc. After completion of treatment doctor's advice and follow up visit are very important to avoid further complication.

So in above mentioned situation, you should immediately consult with a dentist without wasting time for the proper solution.

The writer is a medical officer (Dental) of HCDP, Rampura healthcare center.



Third generation TVT (left) and position of Transobturator Tape (right) that uplifts urinary bladder to treat stress urinary incontinence.

Advances in the treatment of stress urinary incontinence

TAREQ SALAHUDDIN

Stress urinary incontinence (SUI) is the involuntary loss of urine associated with a sudden increase in intra-abdominal pressure such as coughing, sneezing, jogging, lifting, dancing, running for bus, etc.

In a survey in the Asia Pacific region, it was found that 12.2 percent women suffer from SUI.

Especially the female bear the brunt of the disease because they don't express their illness and suffer in silence for year together. Sometimes, this happens due to the negligence about the disease, lack of attention of the care givers, socio-economic condition and illiteracy about the treatment of the disease.

There are several conservative treatment options available to treat SUI like pad/catheter, pelvic floor

exercise, electrical stimulation, vaginal cones, vaginal and urethral devices, extracorporeal magnetic innervation etc.

There are more than 150 types of surgery for female SUI. The main types are bladder buttress operations, retropubic urethropexy, burch colposuspension, needle suspensions, sling procedures including TVT, periurethral / transurethral injections, artificial sphincter etc. Among them most successful surgeries for SUI 10 years ago were burch colposuspension (85% cure) and sling procedures (90% cure), but they have complications like vaginal erosion, urethral erosion, De novo DI, removal, voiding difficulties, self catheterisation etc. There are also complications of burch colposuspension like voiding disorders, genitourinary prolapse, pelvic pain, de novo detrusor

instability. Tape surgery has come forward with its potential advantages. They are shorter learning curve, possibility of concurrent vaginal surgery, shorter OT time, regional or local anaesthesia, shorter hospital stay and faster recovery, less painful, fewer complications for bladder perforation, urinary retention and irritative bladder symptoms.

Trans-vaginal tape (TVT) or sometimes called trans-obturator tape has been developed in short course of time. It helps to treat not the SUI but also some other conditions like pelvic organ prolapse.

The reporter has experienced about the advance technique on SUI at KK Women's and Children's Hospital and Gleneagles Hospital in Singapore.

Rotavirus vaccine recommended to prevent diarrhoea

TAREQ SALAHUDDIN

Rotavirus infections are a major cause of sickness in infants and young kids. Rotavirus infects 4 out of 5 children with the "stomach flu" (also known as gastroenteritis) by the age of 5.

ICDDR,B estimate that between 5,756 and 13,430 children died each year in Bangladesh between 2001 and 2004 from severe rotavirus gastroenteritis.

Now, a new vaccine for babies will provide an effective way to help fend off this leading culprit of early-childhood illness.

Rotavirus infections are extremely contagious. They are usually passed along when kids put their fingers in their mouths after touching something that has been contaminated by infected feces (or poop). Parents and health-care and child-care workers can also spread the virus, especially if they do not wash their hands after changing diapers.

Signs of a rotavirus infection include fever, nausea, and vomiting often followed by abdominal cramps, and frequent, watery diarrhea. If your child has these symptoms, keep an eye out for some of these signs of dehydration like increased thirst, irritabil-

ity, restlessness, lethargy, sunken eyes, a dry mouth and tongue, dry skin, fewer trips to the bathroom to urinate, a dry diaper for several hours (in infants).

Call a doctor right away if your child shows signs of dehydration or you have any other concerns.

Immunizations can protect children from serious illnesses. That is why it is important that your infant be vaccinated on time. Immunisation schedules can change over time, so talk to your doctor about what to expect.

Kids with diarrhea should be kept home from child-care, playgroups, or school until the diarrhea has stopped. If you are caring for your child who has diarrhea, make sure to wash your hands often, particularly after going to the bathroom, when caring for another child, and before preparing and serving food.

An effective, affordable rotavirus vaccine could save thousands of lives each year in Bangladesh. The US FDA (Food and Drug Administration of the United States) approved vaccine is yet to be introduced in our country. People of the country awaits for the approval of concerned authority for the launch of the vaccine in Bangladesh.

UNDP-HDC JOINT INITIATIVE

Healthcare project to root out malaria from CHT

SHANTIMOY CHAKMA, Rangamati

The Chittagong Hill Tract (CHT), United Nations Development Programme (UNDP) and Rangamati Hill District Council (RHDC) in a joint initiative will initiate a one-year pilot healthcare programme to root out malaria.

The project of Chittagong Hill Tract Development Facility (CHTDF)-UNDP will be implemented at a cost of USD 28,000,000.

As preliminary step, only three upazilas from three hill districts of the CHT most vulnerable to malaria have been brought under the project.

The selected upazilas are Rowangchhari of Bandarban, Barkal of Rangamati and Matiranaga of Khagrachhari district.

The CHT is a malaria prone zone where an uncountable number of affected patients die every year, sources from different hospital of CHT said. Each village has 55 Basic Community Health Workers (BCHW), who are well trained in primary healthcare facility, particularly on malaria and typhoid and they are complemented with necessary instruments. The duty of the health workers is to send a message to the community about the health services they provide, and the people could come to them whenever they are sick.

The BCHW identifies diseases and provide treatment to patients along with necessary medicine and pathology facilities, UNDP-CHTDF sources said. "We basically use to refer complicated malaria patients to the district headquarters' health clinic for proper treatment if we fail to pro-

vide adequate treatment at the village level health clinic," Bishakhha Ghosh, a doctor told this correspondent during a visit to project site recently.

Putuli Chakma, 26, of Dajaripara-Billachhara village, expressed her satisfaction and said that they were very happy as they were getting free treatment and medicine from the health clinic. "I came to the clinic to receive treatment as my five years old son have been suffering from viral fever for the last couple of days, added Putuli Chakma.

A five member special mobile medical team consisting of a nurse, a laboratory technician and a pharmacist, a health promoter and a BCHW supervisor led by an upazila medical officer provides treatment five days a week at five clinics.

New drug for epilepsy launched

Epilim Choromo, a medicine for epileptic patient has been launched recently, says a press release.

Epilim Choromo is a controlled release combination preparation of Sodium Valproate and Valproic Acid to be taken once daily. It is mainly indicated for the management of all forms of epilepsy in patients of all age groups.

Epilim has well established efficacy and safety profile with 35 years of clinical success worldwide, the press release also said. It is prepared with chrono technology, which maintains constant serum levels in epileptic patients. The drug is marketed locally by Sanofi-Aventis.

There are 1.5 - 2 million people suffering from epilepsy in our country. Epilepsy is often maltreated in our country, specially in the rural areas due to illiteracy and lack of awareness about the disease. But epileptic patients can live normal life like other healthy person, if s/he get proper treatment and care.

WHAT TO DO?

My baby does not take any food!

DR M KARIM KHAN

What should be the ideal food for my baby, how much and how often should I feed it?

These are some of the questions very frequently mothers ask physicians.

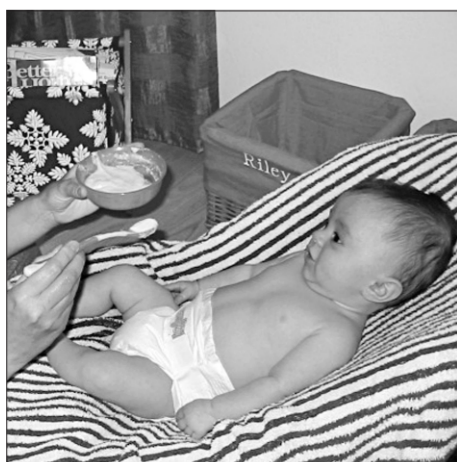
A newborn baby should be breast-fed within half an hour after birth, even if they were born through a Caesarean Section. The initial yellow thick milk of the mother, called colostrum, is ideal food for a newborn. Colostrum contains adequate nutrition, different antibodies and anti-infective agents, which protect the baby from infections. Refraining from feeding a baby with colostrum is a crime.

During early infancy, the mother may complain that her baby is not getting enough breast milk. So what should be done now? Should formula milk be introduced?

The answer is NO. If an infant passes urine more than six times and gains a weight of 15-25 grams per day, no extra milk is required. So please do not introduce any formula milk at this stage. Exclusive breast-feeding is ideal for the first six months of life, meaning that feeding is restricted to only breast milk and nothing else.

Breast milk to be given on demand, no timing or schedule to be followed.

After six months, weaning should be started. It means some extra food to offer in addition to



the baby's feeding habit and may vomit frequently due to force and occasionally aspirate food particles, which may endanger life. Do not compare feeding habit of your baby with others. It is always individual.

From the 12 month, family food to be offered to the child. After the 1st birthday the baby may be fed once in four hours.

Try to prepare food for your baby by yourself. Prepare the amount for one meal only. If you need to use frozen food, warm it adequately prior to serving. Horlicks, Maltova, Boost etc. are in true sense not very necessary. It is better not to try many food items at a time. Experimentation with many food items is hazardous and harmful.

Please do not forget to add extra liquid in each meal, which may be simply boiled water or freshly prepared juices from different seasonal fruits. Avoid canned foods and soft drinks. Fresh home made hygienic food is always best for your child. Feeding a child is an art and you have to acquire it through patience.

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Your ENT Doctor



Prof Dr M Abdullah
Head, ENT Department
Sir Salimullah Medical College
and Mitford Hospital, Dhaka

Dear Doctor,
I am 53 years old. I have been suffering from hearing loss. Doctor advised me to go for stapedectomy to improve my

hearing.
What harmful effects I may experience after the surgery? Can I lead a normal life after that? Will my hearing become normal? Please advise me.
Regards
J A Choudhury
East Rampura, Dhaka.

Answer:
Stapedectomy is a microsurgical procedure done to remove all or part of the stapes (a small, stirrup-shaped bone in the middle ear). The stapes helps us hear by transmitting sound vibrations to the inner ear. If the stapes is fixed in position, rather than being normally mobile, then a conductive hearing loss results.

There are two major causes of stapes fixation. The first is a disease process of abnormal mineralisation of the temporal

bone called otosclerosis. The second is a congenital malformation of the stapes.

In both situations, it is possible to improve hearing by removing the stapes bone and replacing it with a micro prosthesis. The results of this surgery are generally most reliable in patients whose stapes has lost mobility because of otosclerosis.

Most of the patients who undergo the procedure will come out with significantly improved hearing while a few persons may experience some problems.

When a stapedectomy is done in a middle ear with a congenitally fixed footplate, the results may be excellent. But the risk of damage to the hearing is greater than when the stapes bone is removed and replaced for otosclerosis.

The most serious risk is an increased hearing loss, which occurs in about 1 percent case.

Because of this risk, a stapedectomy is usually performed on only one ear at a time. Less common complications include temporary change in taste (due to nerve damage) or lack of taste, perforated eardrum, vertigo that may persist and require surgery, damage to the chain of three small bones attached to the eardrum, partial facial nerve paralysis, ringing in the ears. But you did not mention whether it is congenital or due to otosclerosis. Moreover you did not mention your type of hearing loss — whether complete or partial.

A modified stapes operation is thought by many otologic surgeons to be safer and more effective in cases of congenitally fixed footplate. Therefore it should be done by a competent surgeon and you should not get worried at all.