

Weight matters: obesity and COVID-19

FAHMIDA HASHEM

The COVID-19 pandemic is presenting unprecedented challenges around the world. Apart from the health risks of the coronavirus, the food we eat, the way we work and how physically active we are having all been changed and impacted in ways hardly imaginable only a few months ago. As time goes by, we are learning more about COVID-19 and it is now becoming clear that people with non-communicable diseases are more likely to have severe symptoms.

The World Health Organisation (WHO) has characterised both the COVID-19 outbreak and obesity 'epidemic' as international public health emergencies and it may be one of the most important predictors of severe coronavirus illness, new studies say. According to WHO, in 2016, more than 1.9 billion adults were overweight, of whom 650 million were classed as obese.

Researchers know people with obesity have a higher level of inflammation in their bodies, which can impede the body's immune response and make it more difficult to fight coronavirus.



When the virus comes and infects, then this inflammation seems to become more pronounced. This can contribute to this very strong immune response that is seen in COVID-19. Serious outcomes for COVID-19 can now be added to the long list of other diseases and complications including cardiovascular disease and asthma that are a consequence of obesity.

Patients with obesity often have respiratory dysfunction, obesity is also associated with an increased risk of diabetes mellitus, cardiovascular and kidney diseases and

comorbidities that are considered to result in increased vulnerability to pneumonia-associated organ failures. Measurement of anthropometric characteristics and metabolic parameters is crucial to better estimate the risk of complications in patients with COVID-19.

Scientists have discovered that an enzyme called angiotensin-converting enzyme 2 (ACE2), present in cells, is the main way for the virus to enter the body. Higher levels of this molecule are thought to be found in adipose tissue or fatty tissue, which people who are

obese have more of - under the skin and around their organs. Top of everything else, the ability of the body to fight off the virus - known as the immune response - is not as good in people who are obese. That is due to inflammation driven by immune cells called macrophages which invade our fat tissue. They interfere with how our cells respond to infection. According to scientists, this can lead to a 'cytokine storm' - a potentially life-threatening over-reaction of the body's immune system which causes inflammation and serious harm.

Given our health systems are already stretched with obesity-related illnesses, there is no better time than now, to tell the public that the time to change their diet is now. COVID-19 has really put a highlight on this because it is so sudden and unexpected. But it does shine a light on the importance of obesity prevention at a public health level.

No one is arguing that slim and fit people are safe because obesity is not something that can be changed overnight. It is not a time to panic about your weight, but it could be a good time to concentrate on healthier choices.

These restrictions can be challenging and might lead to reduced physical activity and eating for comfort or to ease boredom, potentially resulting in weight gain. The best way is to eat a healthy, balanced diet and exercise regularly. Otherwise, try to eat slowly and avoid situations where you could be tempted to overeat.

A healthy lifestyle will not only lower your risk of disease but also ensure your immune system is working at its best, which is essential now.

The writer is a nutritionist.
E-mail: fahmidahashem60@gmail.com

HAVE A NICE DAY

COVID-19: the biggest psychological experiment on urban population

DR RUBAIUL MURSHED

The COVID-19 pandemic has not only affected us physically but also mentally, especially the urban population. Although there is a broad consensus among academicians about psychological care following disasters and major incidents, still people are going through countless psychological issues in adjusting to the current lifestyle and fear of the disease.

Since the end of March 2020, an outstanding situation declared by the government created mental health concerns like anxiety, worries and insomnia slowly and silently. Although the World Health Organisation has urged to take necessary precautions to tackle the negative impact of the spread of COVID-19 on psychological health and well-being - it was not easy for the healthcare professionals to concentrate on this pulsating issue as the key focus has mostly been on testing, finding a cure and preventing transmission of COVID-19.

As the disease progressed, concerns regarding health, economy and livelihood increased. Working under such a stressful atmosphere not only creates panic and causes headaches, but can also lead to vertigo, hypertension, weakened immune system, depression and ultimately agitation.

The uncertainty of COVID-19 has caused a lot of insecurity in the lives of the public. This is probably the world's biggest psychological experiment after the 1918 pandemic. Hopefully, more research will be able to help and inform the health professionals and public to provide mental health interventions to those who are in need.

E-mail: rubaiulmurshed@gmail.com

HEALTH bulletin



Honey outperforms usual care for upper respiratory tract infections

Honey is better than many common remedies for upper respiratory tract infections, according to a systematic review and meta-analysis in BMJ Evidence Based Medicine.

Researchers examined data from 14 randomised trials comparing honey with placebo or various usual-care remedies in patients with upper respiratory tract infections. Among the findings:

- Two of three studies comparing honey with placebo showed a beneficial effect on combined symptoms.
- Honey was superior to usual care for improving cough severity, cough frequency, and combined symptoms.

When usual-care remedies were examined separately, honey outperformed diphenhydramine and was similar to dextromethorphan.

The researchers conclude: "When clinicians wish to prescribe for [upper respiratory infections], we would recommend honey as an alternative to antibiotics. Honey is more effective and less harmful than usual care alternatives and avoids causing harm through antimicrobial resistance."

Physical & psychosocial problems after recovery from COVID-19

K M AMRAN HOSSAIN AND DR MOHAMED SAKEL

Coronavirus infection can damage the entire body and mind, not just the respiratory system. Global research confirms that SARS-CoV-2 can affect the brain, nerves, cardiovascular system, kidneys, and liver, individually or in combination. Any blood vessel may get clogged damaging that organ and can cause stroke, heart attack, lung infarction, kidney failure etc. There is a worry that a long term legacy of COVID-19 will be an upsurge of degenerative conditions like Parkinson's and Alzheimer's disease. Similar to the Spanish flu pandemic in the 19th century, we may have millions of 'encephalitis lethargica' in the 21st century with profound fatigue stricken population.

The virus is also thought to be responsible for 'cytokine storm' in the brain resulting in encephalitis or paralysis. A study from Italy published last week elicits 35% of the recovered COVID-19 patients suffer from musculoskeletal pain, numbness, physical frailty and functional immobility that may lead towards disability. Moreover, due to infecting both upper and lower respiratory tract, the respiratory fitness is deteriorating and speech, swallowing and vocal cord issues are being prominent. The virus is also affecting the nicotinic lipids in the blood causing stroke or heart attack that also fates towards disability. However, there are secondary reasons too. 5-15% of COVID-19 patients need oxygenation, bed rest, and critical care and prolonged

staying in bed results in physical frailty, movement problems, chronic pain, and difficulties in activities of daily living. Mental health issues are a global concern. Our patients, families, health workers, and mass people are suffering from fear, anxiety, insomnia, and a spectrum of mental health issues.

Post COVID-19 rehabilitation is termed as a package of care that enhances a quicker recovery and early integration of recovered patients to his normal life. Research explores, 30-35% of total COVID-19

the early recovery and complete care of the newly recovered cases of COVID-19.

On an optimistic note, Bangladesh has now an opportunity to integrate a multidisciplinary rehabilitation team in the COVID-19 care facility. Recently, Centre for the Rehabilitation of the Paralyzed (CRP) started 'Post COVID-19 rehabilitation services' in Savar and Mirpur, Dhaka centre with the technical guidance from the specialist neuro-rehabilitation



positive cases require rehabilitation services after being negative in real-time PCR tests. The Stanford Hall Consensus published in the British Journal of Medicine explains the service is provided by the teamwork of physicians, physiotherapists, occupational therapists, speech therapists, psychologists, and nurses. Pan American Health Organisation (PAHO) describes, the team interacts and plays a comprehensive role for

team from the East Kent University National Health Service (NHS) Foundation Trust (FT) Hospitals of the United Kingdom.

K M Amran Hossain is a Faculty and Researcher at the Bangladesh Health Professions Institute, Bangladesh.

Dr Mohamed Sakel is a Consultant Neuro-Rehabilitation Physician and Director at the East Kent University NHS FT Hospitals, United Kingdom.



2 in 5 schools lack basic handwashing facilities prior to COVID-19 pandemic

As schools worldwide struggle with reopening, the latest data from the WHO/UNICEF Joint Monitoring Programme (JMP) reveal that 43% of schools around the world lacked access to basic handwashing with soap and water in 2019 - a key condition for schools to be able to operate safely during the COVID-19 pandemic.

According to the report, around 818 million children lack basic handwashing facilities at their schools, which puts them at increased risk of COVID-19 and other transmissible diseases. In the least developed countries, 7 out of 10 schools lack basic handwashing facilities and half of the schools lack basic sanitation and water services.

The report stresses that governments seeking to control the spread of COVID-19 must balance the need for implementation of public health measures versus the associated social and economic impacts of lockdown measures. Evidence of the negative impacts of prolonged school closures on children's safety, wellbeing and learning are well-documented, the report says.

Other key findings include:

- In the 60 countries at highest risk of health and humanitarian crises due to COVID-19, 3 in 4 children lacked basic handwashing service at their school at the start of the outbreak; half of all children lacked basic water service; and more than half lacked basic sanitation service.
- 1 in 3 schools worldwide had either limited drinking water service or no drinking water service at all.
- 698 million children lacked basic sanitation services at their schools.

  /StarHealthBD



Rumors and Misconceptions Unveiled

Can COVID - 19 be transmitted in areas with hot and humid climates?

- The COVID- 19 virus can be transmitted in any climate, including areas with hot and humid weather.

The best and most effective way to protect yourself against COVID-19 is by maintaining physical distance of at least 1 metre from others and frequently cleaning your hands with alcohol-based hand rub or washing them with soap and water.

By doing this you eliminate viruses that may be on your hands and avoid infection that could occur by then touching your eyes, mouth and nose.

Can cold weather kill the new corona virus?

- There is no reason to believe that cold weather can kill the new corona virus or other diseases.

The normal human body temperature remains around 36.5 to 37 °C, regardless of the external temperature or weather.

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