

# First-ever global commitment to eliminate cervical cancer

STAR HEALTH DESK

The World Health Organisation's (WHO) Global Strategy to Accelerate the Elimination of Cervical Cancer, launched recently, outlines three key steps: vaccination, screening and treatment. Successful implementation of all three could reduce more than 40% of new cases of the disease and 5 million related deaths by 2050.

The development represents a historic milestone because it marks the first time that 194 countries commit to eliminating cancer - following the adoption of a resolution at this year's World Health Assembly.

Meeting the following targets by 2030 will place all countries on the path toward elimination:

- 90% of girls fully vaccinated with the HPV vaccine by 15 years of age
- 70% of women screened using a high-performance test by age 35 and again by 45
- 90% of women identified with cervical disease receive treatment (90% of women with pre-cancer treated and 90% of women with invasive cancer managed).



The strategy also stresses that investing in the interventions to meet these targets can generate substantial economic and societal returns. An estimated US\$ 3.20 will be returned to the economy for every dollar invested through 2050 and beyond, owing to increases in women's workforce participation. The figure rises to US\$ 26.00 when the benefits of women's improved health on families, communities and societies are considered. Cervical cancer is a preventable disease. It is also

curable if detected early and adequately treated. Yet it is the fourth most common cancer among women globally. Without taking additional action, the annual number of new cases of cervical cancer is expected to increase from 570,000 to 700,000 between 2018 and 2030, while the annual number of deaths is projected to rise from 311,000 to 400,000. In low- and middle-income countries, its incidence is nearly twice as high and its death rates three times as high as those in high-income countries.

"The huge burden of mortality related to cervical cancer is a consequence of decades of neglect by the global health community. However, the script can be rewritten," says WHO Assistant Director-General Dr Princess Nothemba (Nono) Simelela. "Critical developments include the availability of prophylactic vaccines; low-cost approaches to screening and treating cervical cancer precursors; and novel approaches to surgical training. Through a shared global commitment to the

Sustainable Development Goals and leaving no-one behind, the countries of the world are forging a new path to ending cervical cancer."

The COVID-19 pandemic has posed challenges to preventing deaths due to cancer, including the interruption of vaccination, screening and treatment services; border closures that reduced the availability of supplies and that prevent the transit of skilled biomedical engineers to maintain equipment; new barriers preventing women in rural areas from travelling to referral centres for treatment; and school closures that interrupt school vaccine programmes. To the extent possible, however, WHO urges all countries to ensure that vaccination, screening and treatment can continue safely, with all necessary precautions.

The launch is being celebrated with a day of action across the globe, as ministries of health, partners, and cancer advocates engage in activities to improve access to cancer prevention and treatment for girls and women.

Source: World Health Organisation

## HEALTH bulletin

### Sleep hormone Melatonin - more than a sleep aid



#### Cesarean-section-born children may face high risk of infection-related hospitalisation

Children born via cesarean section may be more likely to be hospitalised for infection during early childhood. A study published in PLOS Medicine by Jessica Miller at the Murdoch Children's Research Institute, Australia and colleagues suggests that compared to vaginally-born children, cesarean-born children may have a higher risk of infection-related hospitalisation for up to five years of age.

While the researchers were able to observe an association between birth by cesarean section and an increased risk of infection, the study was limited in that postnatal factors that influence infection risk, such as breast feeding, vaccination status, and postnatal smoke exposure were unavailable, which could potentially confound the results.

The authors stress that the findings should not discourage women from having cesareans when medically indicated and despite the small increased risk of childhood infections, cesarean births may be the safest option for some women and babies.

DR TALIHIDA RAHMAN EREEN

Melatonin is a hormone, produced by a part of the brain called the pineal gland. Melatonin, also known as the darkness hormone as our body makes it predominantly when we are exposed to darkness. When the sun rises, melatonin level declines.

**Melatonin killer:** Aging, exposure to indoor light at night, smoking, stress, frequent traveling are considered as natural melatonin destroyers.

**How to naturally produce Melatonin:** Eating certain foods that are rich in magnesium can also help naturally raise your melatonin levels. Spinach, pumpkin seeds, yogurt are loaded with magnesium. Avoid consuming caffeine, sugary drink.

Nuts, seeds, chicken, fish, banana, cottage cheese are loaded with tryptophan. Tryptophan is an amino acid and it is needed in the production of melatonin. Mango, banana, orange, pineapple are sleep inducer fruits.

**How melatonin can help you feel better:** This natural antioxidant helps to regulate our sleep-wake cycle. Inadequate sleep is not only energy destroyer but also lower your productivity and increase the risk of co-morbid diseases like diabetes, hypertension.

Research results indicate it could be helpful in reducing stress, slowing ageing process and increasing metabolism. We all know a quality sleep strengthens the immune

response. It has a beneficial effect on body's detoxification process by preventing oxidative stress. There is enough evidence to show melatonin as beneficial to improve your wellbeing and longevity.

**Melatonin and COVID-19:** Melatonin is considered as a potential adjuvant treatment for COVID-19 for its anti-inflammatory, immune enhancement and powerful antioxidant properties. The covid 19 associated cytokine storm mainly affects the lungs; Using melatonin settle the cytokine storm associated with viral diseases such as COVID-19.

**Melatonin and sunshine vitamin:** Mitochondria is the power house of our body. Melatonin and vitamin D work hand in hand for the protection and wellbeing of mitochondria.



### Heart diseases of children and coronavirus

DR TAHERA NAZRIN

The novel coronavirus was first described in a cluster of patients presenting with pneumonia symptoms in Wuhan, China in December of 2019. These viruses have been shown to cause direct damage/injury to the muscle of the heart (myocardium), as there are known cases of myocarditis caused by both influenza and coronaviruses. Furthermore, patients with underlying heart diseases seem to have increased mortality and morbidity related to viral infection.

One study showed that a good number of patients who are infected with COVID-19 may not exhibit any symptoms at all. Most symptomatic patients with COVID-19 will present with fever, dry cough and shortness of breath requiring supportive care like supplemental oxygen. Baby can develop abdominal pain, nausea, and diarrhoea also. Chest X-ray will reveal findings of bilateral pneumonia.

Compared to the adult patients, children diagnosed with COVID-19 seem to have less severe disease (an overwhelming inflammatory response leading to cytokine storm). Most of the cases of children in China were mild to moderate in nature. In research, it revealed that young

children, especially infants, however, seemed to be more susceptible to severe disease than older children.

Dear parents, please take care of the children who are already diagnosed with heart diseases. Maintain the cleanliness of your children. Touch and feed your child after proper cleaning/taking bath. Please properly wash your

hand before handling them. Better not to give the caretaker to handle the small child during this crucial time, if they are not able to maintain the cleanliness. Give the cardiac medicine which was already prescribed for your child by the cardiologist. If the follow-up dates are coming, you can talk to the cardiologist over the phone. There are some hospitals

which have telemedicine services, at times like these, it is better to avail the telemedicine services from these hospitals to avoid exposure to COVID-19.

Please prevent pneumonia by treating cough and cold at early stages talking to the doctors. Every pneumonia is not by the coronavirus. Do not hesitate to consult with the

child cardiologist regarding this. Children having heart diseases are more prone to develop recurrent cough and cold and even pneumonia as the natural haemodynamics of the disease.

Please use a mask while visiting physicians. Do not ask your child to cough in front of the doctor. The paediatrician or cardiologist will differentiate if pneumonia is for coronavirus or bacterial infection after examining the child. They will differentiate it by chest x-ray and blood test reports also.

Children having myocardial infarction or congenital heart diseases with COVID-19 infection are at risk because of their reduced or impaired cardiovascular functional reserve and that viral infection increases myocardial oxygen demand leading to worsening ischaemia and necrosis, or increase metabolic demand that leads to heart failure and death.

After diagnosis, the treatment protocol will be decided by the paediatric cardiologist, paediatrician and by intensivists according to the status of the child. Please stay safe.

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## AMR

### WORLD ANTIMICROBIAL AWARENESS WEEK

#### Antimicrobials: Handle with care

Every year, World Antimicrobial Awareness Week aims to increase awareness of global antimicrobial resistance (AMR) and to encourage best practices among the general public, health workers and policy makers to stop the further emergence and spread of drug-resistant infections. As resistance grows to a wider range of drugs, we have broadened the focus of this campaign from antibiotics to all antimicrobials. The theme for World Antimicrobial Awareness Week (18-24 November) 2020 for the human health sector is "United to preserve antimicrobials."

AMR occurs when bacteria, viruses, fungi, and parasites change over time and no longer respond to medicines, making common infections harder to treat and increasing the risk of disease spread, severe illness and death. Many factors have accelerated the threat of AMR worldwide— including overuse and misuse of medicines in humans, livestock and agriculture, as well as poor access to clean water, sanitation and hygiene.

Together with the Food and Agriculture Organisation of the United Nations (FAO) and the World Organisation for Animal Health (OIE), World Health Organisation (WHO) are calling on all sectors of society to rally around a bold, unified agenda to defeat this global health and development threat. They are launching a One Health Global Leaders Group on AMR to address the urgent challenge posed by antimicrobial resistance.

Misuse and overuse of antimicrobials in humans, animals and plants; Lack of access to clean water, sanitation and hygiene (WASH) for both humans and animals; and COVID-19 are among the main reasons of why AMR is increasing.



#### A single and inexpensive Polypill could cut heart attacks and strokes up to 40%, study finds

STAR HEALTH REPORT

In what some researchers are calling a "transformational approach to preventing heart disease," an inexpensive Polypill, along with an aspirin, cut heart attacks and strokes by up to 40%, according to "The International Polycap Study (TIPS-3)" published in the New England Journal of Medicine. The research was also presented at the American Heart Association Scientific Sessions on Friday, 13 November.

For more than a decade, doctors have been testing whether the cheap, all-in-one combo pills could make it easier to prevent heart disease, the top killer worldwide. The results show their value — and not just for poor nations. The study was funded by the Wellcome Trust, a British charity that supports research; Cadila Pharmaceuticals; and other public and private research organisations.

A Polypill is a medicine that combines three different blood pressure medications (atenolol, ramipril, and the "water pill" hydrochlorothiazide) and a cholesterol-lowering statin medication simvastatin. These are all generic drugs. Polypills can be taken alone or with an aspirin.

Researchers enrolled more than 5,700 volunteers, primarily in India and the Philippines plus Colombia, Canada, Malaysia, Indonesia, Bangladesh, Tanzania and Tunisia. Eminence Associates for Social Development, a non-government health research based organisation was the implementer of this research in Bangladesh. Public Health researcher Dr Shamim Hyder Talukder and also Dr Shahin Akhter lead the Bangladesh research team on behalf of Eminence.

This study was to have run for five years and to have included 7,000 people, but drug delivery problems and the coronavirus pandemic forced researchers to cut it short. After just over four years on average, aspirin alone did not make a significant difference, and the polypill alone showed a trend toward modest benefit.

Men had to be at least 50 years old and women at least 55 for this study. All of the volunteers were considered to have a moderate risk for heart problems due to underlying conditions like diabetes or high blood pressure. Researchers followed the volunteers for nearly five years. The volunteers were divided into groups and given either low-dose aspirin (75 milligrams), the Polypill alone, the Polypill plus aspirin or placebo pills. One group was assigned to get vitamin D, but those results are not available yet. Neither the participants nor their doctors knew who was taking what until the study ended.

The Polypill with the aspirin reduced heart problems and deaths by 31% and came with minimal side effects. About 1.5% more of the polypill users had dizziness or low blood pressure, but they could be switched to a lower dose if that happened. Those who continued to take the pill without interruption show 40% reduced risk of heart problems. Only about 4% in the group that took the Polypill and aspirin had a heart problem like a stroke or heart attack or another heart problem tracked by this study or died, compared to the nearly 6% who did in the placebo group.

"We could save millions of people from experiencing serious heart disease or stroke each year with effective use of the Polypill and aspirin," said Salim Yusuf, Principal Investigator for the study and a professor of medicine at McMaster University in Canada, in a news release.

