

A charity mission with a cherishable vision

NAIMUL HAQ

Twenty-three years old Rahima Begum along with her grandmother travelled some 70 km from Dhaka to consult an eminent gynaecologist Professor Rowshan Ara Begum in a village hospital in Manikganj.

The reason is simple -- Rahima, expecting her first child, is guaranteed to be able to consult Prof Rowshan Ara and traveling that distance is worthy she says. Unlike waiting in the serial for days often for weeks to consult a gynaecologist of her quality in the profession at private chamber travelling to Manikganj seems more convenient for most of the waiting patients.

"I tried to get a serial to consult Prof Rowshan Ara in her private chamber in Dhaka but I have to wait too long in the queue. So I decided to see her here as she sees every patient with affection," said Rahima now six months pregnant.

Parvin Akhter along with her husband Zahid Hossain arrived at 6:40 am at the hospital gate to be among the first ten in the waiting list to consult Dr Rowshan.

Parvin who traveled from neighbouring Harirumpur to consult about her pregnancy said, "The quality of services at the hospital here is as good as any hospital in the capital and yet it is almost free. The advantage is quite obvious - you get to consult top ranking doctors without having to travel to Dhaka and wait in serial for days."

Every alternate Fridays some two to three hundred female patients throng at the privately developed village hospital-cum-consultation centre known as the Sahera Hasan Memorial Hospital in Garpara, about five kilometers from Manikganj town.

The hospital also offers general surgeries and it is open everyday but the alternate Fridays are special as because Dr Rowshan Ara Begum, a well-known gynaecologist practicing at the Red Crescent Holy Family Hospital, and her fellow medical practitioners pay visit to the hospital to give virtually free consultation and perform surgeries.

The hospital, under a trustee board, was built in 2001 in memory of Dr Rowshan Ara's parents - Sahera her mother and Hasan



Professor Rowshan Ara at her charity service.

her father who left about two acres of the costly ancestral land for nine brothers and sisters.

"It was my dream to build a hospital for humanity services. When I proposed to my brothers and sisters they readily agreed to donate the land for the charity services and since 2001 we have given consultation to some 34,000 patients at the outdoors and considering obligation to accommodate increasing numbers of patients we are planning to expand operation theatre, consultation areas and add a

home for the elderly people," said Professor Rowshan Ara Begum.

"What is most exciting is that many of my fellow physicians have offered to perform surgeries free of charges and see patients who also demand advice for eye, ear, nose, throat and skin problems. It's amazing that so many renowned doctors who keep busy most of the time have expressed their willingness to join hands with me in this charity mission," said Prof Rowshan Ara in jubilation.

The memorial hospital offers

all services free of charges but charges a nominal fee of Tk 20 for each visit at the outdoors. The money is used for maintenance and pay for diagnostic services like X-rays, ultrasonography and a few limited pathological examinations.

Ever since its inception the hospital performed 885 major surgeries like hysterectomy, removal of gallbladder stones and caesarian sections while a total of 498 gynaecological and obstetric operations were done.

"I have to admit that mission of this hospital is unique in the sense that no one returns empty handed. If indeed one cannot afford to pay for surgeries we don't decline them. People come here with great expectations and so refusing surgery just because the patient cannot afford would mean unkind," said Dr Golam Ambia, an anesthesiologist who has been engaged with the mission from the very beginning.

What is more amazing is that the hospital continues to expand its services without any donations although for maintenance it requires about Tk 56,000 every month which largely comes from

fees collected from daily outdoor patients which on average totals 50. Dr Khairul Hasan and Dr Morsheda Khatun are available all the time as residential physicians.

On every 2nd and last Fridays patients enrolled for operations undergo general surgeries while on every first and third Fridays patients undergo surgeries under obstetric care.

As its name and admiration spread across more and more patients as far as from Madaripur, Narshingdi and Rajshahi enroll for surgeries. "We are booked for general surgeries till next six months," said a smiling Dr Rowshan Ara.

"The best part of the hospital service is everybody here is so loving and caring," said Bihi from Savar who has been regularly visiting the hospital due to a birth defect in her uterus.

About 50 per cent of the poor patients also receive a varieties of drugs free of cost. The drugs come from doctors who get free physicians samples.

Dr M A Mannan, Dr M A Matin and Dr Ezaj Ahmed are some of the other physicians who have been serving at the hospital as volunteers.

WHO recommends about blood transfusion safety

Millions of lives are saved each year through blood transfusions. In some cases, we still are in severe crisis of blood and people die due to an inadequate supply of blood and blood products. This has a particular impact on women (as a consequence of pregnancy-related complications), children (malnutrition, malaria and severe life-threatening anaemia), trauma victims and, especially, the poor and disadvantaged.

The emergence of HIV highlights the importance of ensuring the safety, as well as the adequacy, of blood supplies. Even where blood is available, many recipients remain at risk of transfusion-transmissible infections (TTIs) as a result of poor blood

donor recruitment and selection practices and the use of untested units of blood.

We need to ensure the following points for safe blood transfusion:

- λ Availability of adequate supplies of blood and blood products and their accessibility to all patients requiring transfusion;
- λ Safety of blood and blood products;
- λ Safe and appropriate clinical use of blood and blood products.

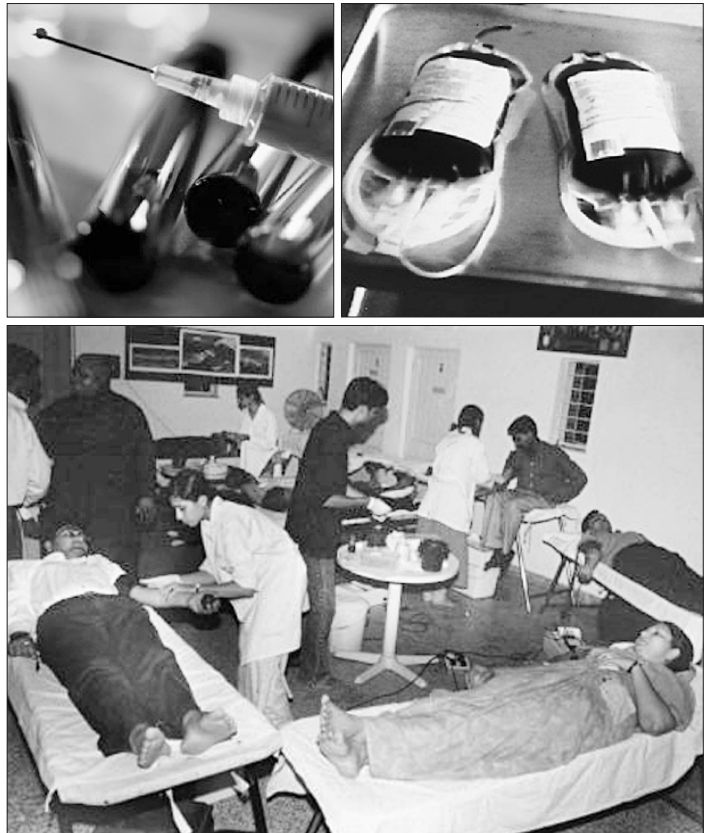
The WHO Blood Transfusion Safety (BTS) team supports the establishment of sustainable of national blood programmes that can ensure the provision of safe, high quality blood and blood products that are accessible to all

patients requiring transfusion and their safe and appropriate use. In support of this mission, the WHO BTS team recommends the following integrated strategy to national health authorities:

- λ Establishment of a well-organised, nationally coordinated blood transfusion service that can provide adequate and timely supplies of safe blood for all patients in need;
- λ Collection of blood only from voluntary unpaid blood donors at low risk of acquiring transfusion-transmissible infections, and stringent blood donor selection criteria;
- λ Testing of all donated blood for transfusion-transmissible infections, blood groups and compatibility;

- λ Production of blood components to maximise the use of donated blood and enable the provision of therapeutic support for patients with special transfusion requirements;
- λ Appropriate clinical use of blood and the use of alternatives, where possible, to minimise unnecessary transfusions;
- λ Safe transfusion practice at the bedside;
- λ Comprehensive quality system covering the entire transfusion process, from donor recruitment to the follow-up of recipients of transfusion.

Source: WHO



PREVENT IODINE DEFICIENCY

Iodizing table salt is one of the best and least expensive methods of preventing Iodine Deficiency Disorders (IDD). The target is the elimination of IDD through universal salt iodization.

Iodine deficiency is a major public health problem for populations, particularly for pregnant women and young children. They are a threat to the social and economic development of the country. The most devastating outcomes of iodine deficiency are increased perinatal mortality and mental retardation.

Iodine Deficiency is the world's most prevalent -- yet easily preventable cause of brain damage in childhood which is the primary motivation behind the current worldwide drive to eliminate it -- an achievement that will be hailed as a major public health triumph, ranking together with smallpox and poliomyelitis.

Iodine is a chemical element. It is found in trace amounts in the human body, in which its only known function is in the synthesis of thyroid hormones. Severe iodine deficiency results in impaired thyroid hormone synthesis and/or thyroid enlargement (goiter).

Population effects of severe iodine deficiency, termed iodine deficiency disorders (IDDs), include endemic goiter, hypothyroidism, cretinism, decreased fertility rate, increased infant mortality, and mental retardation.

Iodine deficiency disorders (IDD) jeopardise children's mental health -- often their very lives. They start before birth. Serious iodine deficiency during pregnancy may result in stillbirths, abortions and congenital abnormalities such as cretinism, a grave, irreversible form of mental retardation that affects people living in iodine-deficient areas.

However, of far greater global and economic significance is IDD's less visible, yet more pervasive, level of mental impairment that lowers intellectual prowess at home, at school and at work.

A spectacularly simple, universally effective, widely attractive and incredibly cheap technical weapon 'iodized salt'.

Poor childhood nutrition tied to behavior problems

Nutritional deficiencies early in life may predispose children to behavioral problems into their teenage years, new research suggests.

The study of nearly 1,600 children from Mauritius, an island in the Indian Ocean, found that those with signs of malnutrition at age 3 were more likely to show various behavioral problems at the ages of 8, 11 and 17.

At age 3, the malnourished children had signs of

deficiencies in protein, iron, zinc and certain B vitamins -- nutrients vital to healthy brain development. The study findings suggest that poor early-life nutrition may cause deficits in brain function that predispose children to problems such as hyperactivity and aggression later on, the study's lead author, Dr. Jianghong Liu, told.

She and her colleagues at the University of Southern California in Los Angeles reported the findings in the American Journal of Psychiatry.

For the study, the researchers assessed signs of malnutrition -- such as iron-deficiency anemia, thin and discolored hair, and cracked lips -- among 3-year-olds born in 1969 and 1970. The children were given IQ tests at the age of 11, and parents and teachers reported on any behavioral problems at the ages of 8, 11 and 17.

Children who were malnourished early in life were more likely than their peers to act out at school, break rules, get into fights or have other behavioral problems as they grew older, Liu and her colleagues found.

Other factors usually associated with child malnutrition -- such as poverty, poor housing and parents' lack of education -- did not explain the link.

However, malnourished children's generally lower IQs did appear to be a key factor.

According to Liu, these lower IQ scores may "reflect neurocognitive deficits," caused by malnutrition, that may predispose children to antisocial behavior. The first three years of life are "critical" in brain development, Liu said, so proper nutrition during this period is of particular importance.

Although many factors go into children's behavior, Liu said the new findings point to a possible way to reduce the risk of behavioral problems into adolescence.

Source: American Journal of Psychiatry, November 2004.



Health tips

People with diabetes need to take care of teeth

New findings indicate that dental health is particularly important for people with diabetes.

Among Pima Indians with type 2 diabetes, periodontal disease strongly predicts mortality from heart disease and kidney disease, according to a study published in the January issue of Diabetes Care.

Dr. Robert G. Nelson, of the National Institute of Diabetes and Digestive and Kidney Disease in Phoenix, Arizona, and colleagues studied 628 Pima Indians 35 years of age or older with type 2 diabetes.

The team used dental x-rays and examinations to see if the participants had periodontal disease, and classified it as none, mild, moderate, or severe. Overall, nearly 60 percent of the subjects had severe periodontal disease. Of

these, 263 (70 percent) had lost all their teeth.

A total of 204 participants died during an average follow-up of 11 years. The death rates for all natural causes "expressed as the number of deaths per 1000 person-years of follow-up were 3.7 for no or mild periodontal disease, 19.6 for moderate disease, and 28.4 for severe periodontal disease," the investigators reported.

The causes of death associated with periodontal disease were specifically heart disease and diabetes-related kidney disease.

"Periodontal disease is a major public health burden in Pima Indians, and it is a strong predictor of death from cardiovascular disease in those with type 2 diabetes," the researchers conclude.

Source: Diabetes Care, January 2005.

Magnetic bracelets cut osteoarthritis pain



Magnetic bracelets can help to ease the pain of osteoarthritis of the hip and knee, British researchers said. In a study of nearly 200 sufferers of the joint disease, patients who wore a standard-strength magnetic bracelet reported having less pain than those who wore weaker or non-magnetic bracelets for 12 weeks.

"We found evidence of a beneficial effect of magnetic wrist bracelets on the pain of osteoarthritis of the hip and knee," Professor Edvard Ernst, of the Peninsula Medical School in Plymouth, southern England, said in a report in the British Medical Journal.

Although the results are consistent with previous studies that analysed magnetic therapy, the scientists said they did not know whether the reported improvement was due to the bracelet, the placebo effect, a believed benefit from a treat-

ment that has no effect, or both.

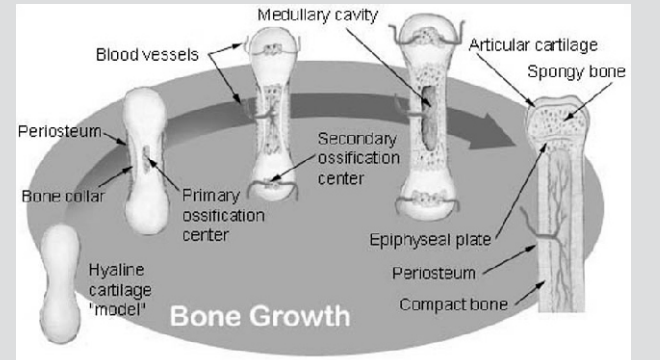
"Whatever the mechanism, the benefit from magnetic bracelets seems clinically useful," Ernst and his colleagues added.

The patients wearing the higher strength magnetic bracelets reported the biggest improvement, which the scientists said suggested the magnetic strength is important. The benefits were in addition to improvements from standard treatments for the illness.

Osteoarthritis is the most common form of arthritis, which is a leading cause of disability. It can affect any joint in the body but is common in the knees and hips. Pain in a joint after inactivity, swelling and stiffness are symptoms. There is no cure but treatments can reduce pain and maintain movement.

Source: British Medical Journal

Medical mystery



Study finds most bone growth occurs at night

The perception that children seem to grow taller overnight is likely true, researchers said. Scientists at the University of Wisconsin's School of Veterinary Medicine in Madison placed sensors on the leg bones of lambs to monitor bone growth in the animals. 90 percent of bone growth occurred when the animals were sleeping or otherwise at rest, according to the study published in the Journal of Pediatric Orthopedics.

"We observed this noncontinuous pattern of growth, but what was really interesting was that the bones were growing only when the animals were lying down, and almost no growth occurs when the lambs are standing or moving around," study author Norman Wilmsan said.

He reasoned that growth plates consisting of soft

cartilage at the ends of bones become compressed when walking or standing, preventing growth. When lying down, the pressure on the growth plates is off and the bones elongate.

Co-author Kenneth Noonan said, "This is a study that points out that growth is not a continuum. There are growth spurts, which may occur within the daily life of lambs and possibly humans too."

Previous research has shown children grow in spurts that may last just a few days. Children sometimes complain of intense growing pains at night that emanate from the ends of their lower extremities where the growth plates are, Wilmsan said. There is no treatment for growing pains.

Source: Journal of Pediatric Orthopedics