# Face and defeat bird flu scare

DR REZA KHAN

Who cares whether a bird has flu, fever or running nose? But suddenly a disease called bird flu or the Influenza of birds, popularly known as avian (meaning bird) flu struck human being in several countries in Asia. The H5N1 strain of the bird flu has been killing poultry in Asia since 2003. Although the virus rarely jumps to humans, it has killed at least 67 people since the outbreak.

Some of us like to keep wild birds or domesticated birds as pets. So we need to be cautious in handling our pets and poultry.

# What is bird flu or avian

Bird flu is an infection caused by avian influenza viruses (AIV). These AIV occur naturally among birds. Many wild birds at home and abroad carry the AIV in their intestines, but usually do not get sick from them

There are different subtypes of AIV that differ from each other based on proteins on the surface of the AIV.

When we talk about "human flu viruses" we are referring to those subtypes of the AIV that occur widely in humans. Till date there are only three known AIV subtypes of human flu viruses (H1N1, H1N2, and H3N2).

Like all bird flu viruses, H5N1 virus circulates among birds worldwide. It is very contagious among birds, and can be deadly

### **Transmission, symptoms** and treatments

The birds infected by the AIV shed the virus in their saliva, nasal secretions, and faces. Susceptible birds become infected when they come in contact with these contaminated excretions or surfaces that are contaminated with excretions. It is believed that most cases of Avian flu infection (H5N1) in humans have resulted from contact with infected poultry or contaminated surfaces. Symptoms of Bird flu in

humans have ranged from typical flu-like symptoms such as fever, cough, sore throat and muscle aches to eye infections, pneumonia, severe respiratory diseases and other severe and lifethreatening complications.

Severely infected birds with AIV will take less food and water, become emaciated, reddish comb may turn yellowish, unable to move, show signs of paralysis of parts of body such as wings and legs, and shivering of body, in addition to other flu-like symptoms ultimately dying in a few

The H5N1 virus does not usually infect humans. However, the H5N1 virus currently infecting birds and human is resistant to antiviral medications.

Currently the Tamiflu antiviral



against H5N1 viruses in humans considering that this is having some effect against this particular virus although it has been developed to treat human influenza. unrelated to the H5N1. Experts are of the opinion that Tamiflue is not the answer for H5N1 viral

### Our migratory birds and the avian flu

All over the whole world, there are millions of migratory birds. We have nearly 700 species of birds of which at least 300 are migra-

In the wetland areas especially near a haor, beel and baor there are duckeries. So, if the migratory birds carry this disease it can be easily transmitted to the domestic ducks, geese or chicken that might come across these migratory birds. People working with these domestic birds can be infected with H5N1 virus.

## What should we do for avoiding the disease?

- Avoid getting any new pet in your house or buy poultry from a country where there is an outbreak of bird flu.
- Do not visit pet shops or animal markets selling birds. Avoid direct contact with your
- bird pets and the poultry. If you are bound to clean your

pet cages, poultry sheds always use medical facemask, rubber hand gloves and rubber gumboot in Thana level asking them to be and wash your hands with powerful disinfectant available in the local pharmacy.

- If you think that your pet is not ok, contact your Vet and if you are not feeling well contact a physician immediately.
- Protect your pet birds/poultry from outside birds such as pigeons, crows, mynas and spar-
- Regularly wash feeding trays, water pots and other utensils used in a cage/aviary with disinfectant.
- In case of poultry farms all the above precautions are applicable and workers there must not touch the birds, their eggs or chicks with bare hands and without protective
- In every gate of a farm there must be a 3 to 5 square metres of carpets or mats regularly wetted with liquid disinfectants or there could a 30 to 40 cm deep trench having equal width and length of 3 metres filled with disinfectants so that all persons and vehicles entering into or getting out of the farms get disinfected.

### What the government should do now?

Any sick or dead bird seen in the field could be reported to the newly formed task force office through a toll-free telephone

Government now must form/designate small committees

within their jurisdiction. The Committees should be formed in areas having beels, baors and haors and long cost line where most migratory waterfowls pass through. Each committee should include at least the local veterinarian, a zoology teacher, amateur birdwatcher or hunter and representatives from the fisher folks, Forest Department, Coast Guard and BDR personnel, if available. Each Thana level committee

in touch with each UP chairman

should be provided with sets of polythene/plastic shoe cover up to knee, face-masks, long-sleeve gloves, plastic overall with headgear and disinfectants so that when there is a report of a sick bird, it can dispatch to a trained person to fetch it for scientific investigation.

Government should make an arrange laboratory kits in the central veterinary lab for testing most prevalent AIVs and similarly it must also have test-kit for humans in government hospitals or in the CMH.

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# Study finds coffee reduces liver risk

Coffee and tea may reduce the risk of serious liver damage in people who drink alcohol too much, are overweight, or have too much iron in the blood, researchers reported.

The study of nearly 10,000 people showed that those who drank more than two cups of coffee or tea per day developed chronic liver disease at half the rate of those who drank less than one cup each day.

The study, found that coffee provided no protection to people at risk of liver disease from other causes, such as viral infections.

"While it is too soon to encourage patients to increase their coffee and tea intake, the findings of our study potentially offer people at high-risk for developing chronic liver disease a practical way to decrease that risk," said Dr. Constance Ruhl, who helped lead the study. "In addition, we hope the findings will offer guidance to researchers who are studying liver disease progression." Ruhl and colleagues said caffeine seemed to hold the key.

They analysed the records of 9,849 participants in a government survey whose coffee and tea intake was evaluated and who were followed for about 19

SOURCE: Gastroenterolog

# A celebration of life

Modern treatment facilities to combat cancer are available at home now



STAR HEALTH REPORT

A get together of cancer survivors with their family, friends and doctors, celebrities and media personals was organised by Sanofi-Aventis at Bangladesh-China Friendship Conference Center on Friday

Mr Iftekharul Karim, Managing Director of Sanoficomed all the participants in the programme. Professor A B M F Karim highlighted the different ways to cope with various physical, mental and social challenges that a cancer survivor may face in the fight against cancer. Professor Perveen Shahida Akhter emphasised on preventive aspects of the disease at the community as more than one third of the total cancer is preventable and curable if detected early.

The cancer survivors shared their experiences and emphasised on early detection and appropriate treatment. They told about their mental strength and spirit while struggling with the disease. They revealed that there are modern treatment facilities available in the country to strive against cancer.

National Professor M R Khan informed that there are many cancer patients who are living normal life in the country. He urged on organising the cancer patients under an association to assert their rights as to live like other

Renowned figures of the country from various fields were also present in that occasion to inspire the spirit of the cancer survivors.

Dr Rezaul Farid Khan Director Medical Affairs, Sanofi-Aventis Bangladesh gave the vote of thanks while Dr Dabir Uddin Ahmed, Head of Oncology, Sanofi-Aventis Bangladesh conducted the programme.

# Self-care for running and stuffy nose

TAREQ SALAHUDDIN

You might have a runny nose or a stuffy nose because of a cold, the flu or seasonal allergies. In most cases, it is just a temporary nuisance. No matter what the cause of your runny nose or stuffy nose, you can generally take care of the situation on your own. Here are some tips to make it more bearable when your nose acts up.

## Runny nose: When blowing is not enough

A runny nose commonly occurs in the initial stages of a cold or the flu. It is also possible that seasonal allergies may be the cause of your runny nose. You may have experienced a runny nose at other times when you are outside on a cold day.

Most of the time all you need to do for a runny nose is blow your nose. However, you can also try an antihistamine. This type of medication counteracts histamine

- the substance your body releases when you are exposed to something you are allergic to. Whether your runny nose is the result of a cold or an allergy, an antihistamine will dry up some of the mucus your nose



In some cases, a runny nose can be a sign of a more serious problem. See a doctor if: Your symptoms persist longer

than three weeks, or you have a fever along with your runny nose. Your nasal discharge is thick and a color other than white or gray - perhaps green or yellow and is accompanied by sinus pain. This may be a sign of a bacterial infection, such as sinus-

 Your nose is persistently runny on one side only. In a child, this might be a sign that a small object is lodged in that nostril.

 You have blood in your nasal discharge or a persistent clear discharge after a head injury.

 You have a serious medical condition, such as severe asthma or emphysema, or you are on immune-suppressing medica-

## Postnasal drip: Common companion to a runny nose

Even when you do not have a cold or allergies, your nose and sinuses continually produce mucus, which travels in a thin film down the back of your throat. This is a normal process known as postnasal drip. You swallow the small amount of mucus that is produced, often without even realising it. Postnasal drip traps dust and other particles you inhale and disposes of them

through your digestive system. To help relieve the sore throat, cough or constant clearing of your throat that occurs with postnasal

Avoid irritants: Certain things may irritate your airway and cause increased mucus production. Some common irritants include cigarette smoke and sudden temperature changes. **Drink plenty of water:** Staying

hydrated keeps your postnasal mucus thin and easier to swallow. Use a humidifier: Dry air thickens and dries mucus in your nose and throat.

Try saline sprays or rinses: Saltwater rinses and saline sprays thin your mucus and get rid of irritants. Use an over-thecounter nasal saline spray or flush your nostrils with warm salt water (nasal lavage). The ratio of salt to water is approximately 1/4 teaspoon salt to 2 cups of warm water. Use a suction bulb or put some of the warm salt water in the cup of your hand to sniff it up one

nostril at a time Consult a physician: If the problem persists and other measures do not help, doctor may recommend a steroid nasal spray to help decrease mucus production. Steroid nasal sprays are available by prescription and are generally safe and free of side effects.

# Stuffy nose: When nasal passages close up

A stuffy nose is less messy than a runny nose, but it is equally frustrating. Some common causes of a stuffy nose include:

Virus: Your nose can become stuffy if you have a cold or the flu. Often, other signs and symptoms - such as a cough, sore throat or fever – accompany a stuffy nose caused by a virus.

Allergies: Stuffy nose might result from exposure to things you are allergic to, such as dust, pollen or pet dander. In response to these exposures, your nasal passages become irritated and swollen (allergic rhinitis).

Nonallergic inflammation of your nasal blood vessels (vasomotor rhinitis): Your nose can blood vessels in your nose expanding. This can happen with vigorous exercise or in response to environmental triggers, such as cigarette smoke or air conditioning. Stress may trigger vasomotor rhinitis for some people.

Less commonly, a stuffy nose may result from a deformity in the cartilage and bony partition separating two nasal chambers (nasal septum) - for instance, from a broken nose years ago or a growth in your nasal passage, such as a nasal polyp.

Relief for your stuffy nose Besides blowing your nose, try these tips to relieve your stuffy nose: Breathe in the steam from a warm shower to help loosen the

mucus. You can also inhale steam

from a kettle or pot of boiling water. You may have to keep at this for at least 10 minutes for the steam to be effective Drink plenty of liquids, such as water, juice or tea. Avoid caffeinated beverages, which can

cause dehydration and aggravate your symptoms. Use an over-the-counter nasal saline spray to thin your mucus and get rid of irritants, or prepare your own saltwater solution (nasal

lavage)

Try an oral decongestant, preferably in liquid or pill form. A decongestant spray may be helpful, but should not be used for more than three days, as it can cause rebound stuffiness and can be irritating for some people. All decongestants (oral or topical) can cause a stimulant effect and raise blood pressure for some

**EXPERT ADVICE** 

# There is no alternative of knowledge and skill; poor resource matters less

Exchange of views and idea certainly help increasing knowledge, skill and experience. Every year lots of foreign doctors, who have esteemed credentials in their respective fields, visit our country to attend seminars in response to the invitations of our medical community. Although new medical institutions are being formed in our country, the demand for specialised advice from foreign doctors who deal with the latest technology and updated medical knowledge will never dissipate.

TAREQ SALAHUDDIN talks to some specialists from Singapore about different aspects of medical science in their respective fields.

A few noted physicians from Singapore came to participate different conferences in Bangladesh. During the conferences, they talked about the state-of-the-art technology available in Singapore and some recent advancements made by them in their respective fields of practice.

Dr Ian K S Tan is a Consultant Intensivist and Director of Critical Care Services of Mount Elizabeth Hospital in Singapore.

He told about different aspects of the treatment of ICU (Intensive Care Unit) patients. As the equipment and drugs used for the ICU are high all over the world, appropriate knowledge can help to choose proper drug and treatment regimen can help to reduce the treatment cost. He expressed that it is not always badly necessary to use the cutting-edge technology for the treatment of ICU patients. Proper knowledge, skill, experience, clinical assessment are more important for the treatment of a patient.

He described that the most common hazard that ICU patients may suffer is the miscommunication. It is important to take care of the patients very attentively. More trained nurse staffs can reduce the load of the doctors. He described that there are newer drugs that can help to survive



Dr Ian K S Tan Intensive care specialist

ICU patients.

Dr lan Tan emphasised on the cleanliness of ICU to prevent hospital acquired infections that cause unnecessary hassle to the ailing patients. For example, a patient can develop pneumonia while taking artificial ventilation.

Later he presented a scientific



Dr Wai-Choong Lye Nephrologist

paper on "ventilator-associated pneumonia" in the Qader Lecture Room of Department of Anaesthesiology, DMCH.

Dr Wai-Choong Lye is a Consultant Nephrologist and Physician in Mount Elizabeth Hospital in Singapore. He described many exciting features and recent advancement in the field of



Dr Chi-Chiu Tan Gastroenterologist

nephrology.

He informed that several drugs have been produced that can reduce the rejection of donated kidney. So dialysis is now of less important in the treatment of end stage renal diseases in recent days. Today kidney transplant is more preferable for them. Patients need not be cautious about

the match of kidney. Simply the blood group match can help for the selection of a donor now-a-days.

The renal disease burden is increasing day by day globally. Specially kidney diseases due to diabetes, renal hypertension, glomerulonephritis are increasing. Awareness and healthy lifestyle can

help prevent these diseases. Dr Chi-Chiu Tan is a Consultant Gastroenterologist and Physician in Gleneagles Medical Centre in Singapore. They have improved a lot in treating the patients of end-stage liver diseases. They achieved milestones in living donor liver transplant.

He adviced to take preventive measures to prevent hepatitis B and C which can cut off the burden of the diseases. Vaccination of hepatitis B can help to prevent the disease while use of the recent drugs can combat hepatitis C. There is a tremendous advancement of the drugs like interferon and anti-viral drugs.

Adopting healthy lifestyle, change in the food habit can reduce other diseases of gastroenterology like colon cancer.

He described the recent treatment guideline for the patients of liver diseases. For some cases of liver patients surgery is very effective especially who have localised problem in small area and if detected early. Other options like radio frequency ablation therapy (RFAT) and trans arterial chemo embolisation (TACE) can also help for the patients of liver cancer. Trained. skilled, and experienced medical professionals are needed for the curing

the patients. All the doctors expressed their sincere will for sharing idea and view with the local doctors. They said that continuous communication with experts can help improving the skill of the doctors

They opined that adequate knowledge and skill can help us to overcome our limited resource.