

PROSTATE GLAND PROBLEMS

A common problem of the elderly male

DR TAHMINUR RAHMAN

Prostate gland is a walnut sized gland in the male reproductive system just below the urinary bladder. The main function of the prostate is supply fluid for the sperm during ejaculation. The most common disease of ageing males especially above 50 years is prostatic problems. This includes enlargement of prostate or inflammation of prostate and the most common cancer of male is the prostate gland cancer.

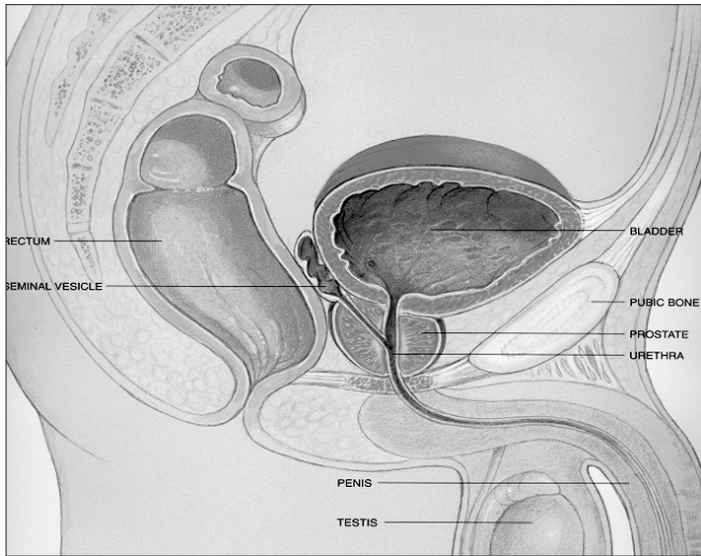
Diseases of prostate gland
Mainly three diseases are common in prostate gland.

1. Enlargement of porstate or nodular hyperplasia: When prostate gland is enlarged than normal in relation to increasing age, it is known as nodular hyperplasia or bening hyperplasia (condition in which there is an increase in the number of cells in an organ) of prostate. It usually starts at the age of 50 years and peak at the age of 70 years.

2. Prostatitis or infection of prostate: Infection of prostate usually occurs due to gram-

negative bacteria mostly by E. coli, Enterococci, Streptococci. These bacteria usually infects by the spread of infection from urethra, urinary bladder, kidney and form bacteraemia (blood poisoning, having bacteria in the blood) and septicaemia(blood poisoning, condition where bacteria or their toxins are present in the blood, multiply rapidly and destroy tissue). Apart from bacteria, virus, parasite and fungus can also cause prostatitis. Other causes of prostatitis include gonococcal infection, tuberculosis.

3. Prostatic cancer: This is the most common and primary cancer of male worldwide. Usually affected male are above 50 years of age (incidence 20 percent) and increases up to 70 percent between the ages of 80 years. Exact etiology or cause is not known. However there are some risk factors that include excess amount of fat and less amount of vitamin A, E and selenium and soya product consumption, excess androgen hormone and less estrogen hormone, increasing age etc. There are some



variation in different race also. For example prostate cancer is more in white than Chinese or Japanese.

Symptoms of prostatic diseases

i) Hyperplasia: Patient present with frequency of micturition or repeated of urination, less volume of urine, urine dribbling from

urethra, fullness of bladder and lower abdominal pain. After urination, there is a feeling discomfort and improper voiding of bladder. Also the patient may complain of more urination at night. In some patient no urination (anuria) occurs, some patient may be asymptomatic.

ii) Prostatitis or infection of

prostate: In case of acute prostatitis the patient may present with fever, cold, shivering and burning sensation of during micturition. In case of chronic prostatitis, the patients may develop pain in the back, burning during micturition, lower abdominal pain and discomfort.

iii) Prostatic cancer: Patients may remain asymptomatic or may present with burning sensation during urination, passes of blood with urine. Sometimes there are symptoms of obstruction by the cancer. Some patients present with fracture of vertebral column due to spread of cancer to the vertebrae. Apart from this, patients may present with fever, anorexia, weight loss etc.

Outline of treatment for prostate cancer

Preventive measures:

a. Drink plenty of water and fluids

b. Yearly check up of some special investigations like Digital rectal Examination (DRE), Prostate Specific Antigen (PSA) and ultrasonogram (USG) especially after 50 years of age and having

above symptoms.

c. If there is congenital abnormality, surgical correction is needed.

Curative measure:

a. For nodular hyperplasia-Trans Urethral Resection for Prostate (TURP).

b. Prostatitis: Use of appropriate antibiotic as per the advice of doctor after appropriate testing

c. Cancer: Surgery followed by hormone therapy, orchidectomy.

d. Radiotherapy in terminal cases, palliative treatment for alleviation of pain and other cancer-related symptoms.

It can be concluded that although prostatic problems are very frequent and important for ageing males still there is both preventive and curative measures that can reduce the incidence of these problems. Awareness, yearly DRE, PSA and USG of prostate and correct diagnosis is the key to curb the menace.

The writer is the Head of Department of Pathology of Ibrahim Medical College, Dhaka.

Have a Nice Day

DR RUBAIUL MURSHED

All health information to keep you up to date

Television is more harmful than you thought

Today television is the most powerful tool in each and every home. It has become a central piece of home furniture! Over and over again when we switch on our TV sets, we turn off our brain. Many of us become vegetables in front of television shows in day or night time. And lot of people blame television for different health problems from eye, obesity to psychological trouble. Research results from different places also suggest that television has long-lasting harmful effects on health. Although we realise the probable dangers of letting our offspring watch violent and adult scenes, but many do not recognise that this is not the only problem. Especially in cases of children and teenagers who cannot figure out what is real and what is not on television! They also cannot realise the rationality of tricky advertisements. One American study summarised some major effects of heavy television watching in children. They are –

1. Increased aggressive behaviour and acceptance of violence.
2. Difficulty in distinguishing between fantasy and reality.
3. Trivialisation of sex and sexuality.
4. Increased passivity and disengagement.

According to some scientists television watching is linked with overweight, smoking and high cholesterol levels.

Nevertheless we cannot get rid of these justified criticisms as our hands are tied in this technical millennium. But we need to make TV as a positive tool at our homes as much as possible. It is also not illogical that there are some television benefits. Following tips may minimise harmful effects of television

especially to our children and teenagers because this is the time (between 3-15 years) when their body and brain fix-up most of their moral, social and physical developments.

In today's hectic life, TV can bring an opportunity to spend time with family members. Watching television with family will give us a chance to talk and we can overcome some of the passivity and the question of what is real and what is not. Watch with children, discuss what we see on TV, and ask questions that make your child think about what he or she is watching.

It is important how many hours a week one should watch television. To limit negative effects on learning we need to control both duration and categories. Television could be least harmful to children in small doses. Try not to allow your children after 10 pm. Serials, movies and documentaries have tremendous impact, both in terms of social and cultural. Select in advance those programmes your family will watch. Explain to your children about real purposes of most commercials. Sacrifice your own personal preferences. And sometimes join your children watching their movies. Share with their views and enjoyment. Be aware of Hindi serials and movies; these are naughty sedatives. Sometimes most of the channels are not watchable. A parent should consider a number of things in terms of information and knowledge. If possible, buy a VCD or DVD set and choose quality cartoons, healthy documentaries and classical movies including great people's biographies.

A ray of hope for poor cancer patients

MD RAJIB HOSSAIN

Mrs Banu Begum, a poor housewife of late Mizanur Rahaman has four daughters and one son of 12 years named Sajib. In the middle of last year, her beloved son sajib became pale and lost his appetite. His body temperature continued to remain higher than normal and he used to complain pain in vari-

she has already sold her small property for his treatment.

This is a common fate of many of our cancer patients. Presently there are over one million registered cancer patients in our country and most of them are unable to maintain their treatment expenses. With a view to helping these ill-fated poor patients, some organisations have come forward. Mosabbir Cancer Care

Mosabbir Cancer Care Centre is for especially those who are being treated for cancer in Dhaka city but have no place to stay. Poor cancer patients have the facility to stay in the centre located at road no 3, house no 37/1, Dhanmondi at free of cost. It helps in accommodation not only for the patients but also their attendances at minimum charges. Besides free accommodation, the centre also provides consultation, counselling, information and referral, day-care chemotherapy, investigation through established diagnostic laboratories at subsidised rate. They have ambulance service for the patients at a very low cost. It also provides medicine at reduced rate and also helps in blood transfusion.

The centre has specialised doctors and skilled nurses for the patients. Further they provide assistance for social rehabilitation of cancer patients and their families.

Cancer treatment is costly and time consuming. The centre is operational since January 2004 and has been providing facilities to a large number of poor helpless patients. Now the centre is in need of support from outsource for the continuation of their humanitarian efforts to the poor cancer patients.



A poor child, diagnosed with cancer is being treated at Mosabbir Cancer Care Centre.

ous parts of his body. According to the advice of local physician, he was admitted into Bangabandhu Sheikh Mujib Medical University, Dhaka. After completing various investigations he was diagnosed with leukaemia (a sort of blood cancer). Now Sajib's poor mother is in dire need of money for further treatment of her beloved son but

Centre is one organisation like that. It is a non-profit philanthropic organisation dedicated for the care, comfort and treatment of underprivileged cancer patients like Sajib for last two years.

Cancer patients from rural area coming to capital are not capable of meeting the high expenses for their treatment.

Hypertension and heart disease may have no symptom

DR MD HABIBE MILLAT

Hypertension or high blood pressure is considered a silent killer, because many people with this disease have no symptoms. Over time, this increase in blood pressure (BP) can damage the blood vessels or vital organs. This can lead to strokes, heart attack, or kidney disease. Hypertension is one of the most common risk factors for heart disease.

There are approximately 10 percent of male population and 15 percent of female population suffering from high blood pressure in Bangladesh. Over all prevalence of hypertension is 65 per cent among elderly (over 60 years old). Incidences are higher in

urban than in the rural areas.

BP can change from minute to minute, especially when we are excited or afraid, and cause an increase in pulse and a rise in the pressure inside our blood vessels. It also is affected by changes in posture, exercise, sleeping, and medications. Monitoring and treating blood pressure is important because damage to arteries begins at fairly low blood pressure levels. Damaged arteries greatly increase the risk for heart attack, stroke, kidney failure, and atherosclerosis.

Hypertension can lead to two major forms of heart disease. These are coronary artery disease and heart failure.

Coronary artery disease occurs when the blood vessels that sup-

ply blood to the heart muscle (coronary arteries) are narrowed or blocked. This narrowing or blockage most often is caused by the buildup of fatty deposits, which is called atherosclerosis. Hypertension increases the risk of atherosclerosis by damaging the lining of the arteries and increasing the likelihood that fatty deposits may form in them. Over time, this can lead to a heart attack.

Hypertensive heart disease occurs when high BP causes the walls of the lower left heart chamber (left ventricle) to become thick and stiff, which affects the heart's pumping ability. This may in turn lead to heart failure, a condition in which the heart cannot pump enough blood to meet the needs of the body.

Treating hypertension early can decrease the chances of having heart problems in later life. A healthy low-fat, low-salt diet and healthy lifestyle habits, such as getting more exercise, losing weight, quitting smoking, and managing stress, help control high blood pressure. Healthcare providers often recommend these methods to control blood pressure before turning to medications. The most important points for people with high blood pressure to remember are: follow your doctor's advice, stay on your medication.



Dr Md Habibe Millat MBBS, FRCS (Edin) is a Senior Specialist Registrar, Department of Cardiothoracic Surgery, Cork University Hospital, Republic of Ireland. Email: mhmillat@hotmail.com

Carotenoids may lower diabetes risk in nonsmokers

For people who don't smoke, the risk of developing diabetes is lower in those with higher levels of carotenoids in their blood, according to a new report. The effect is not seen in smokers, however.

Carotenoids – plant-derived antioxidants found in vegetables such as carrots, tomatoes and spinach – may reduce the risk of diabetes by cutting oxidative stress, the authors of the study explain in the American Journal of Epidemiology. Likewise, high levels of carotenoids may help reduce the oxidative stress caused by cigarette smoking. Previous reports have linked smoking with low levels of carotenoids. Moreover, in other stud-

ies, high carotenoid levels have been tied to a reduced risk of diabetes. However, it was unclear if the rare smoker with a high carotenoid level still enjoyed a decreased risk of diabetes.

To investigate, Dr. David R. Jacobs, from the University of Minnesota School of Public Health in Minneapolis, and colleagues analysed data from 4493 subjects, between 18 and 30 years of age, enrolled in the Coronary Artery Risk Development in Young Adults (CARDIA) study. The study focused on the 148 cases of diabetes that arose during follow-up from 1985 to 2001.

In nonsmokers, increasing

carotenoid levels at the start of the study were associated with decreasing risk of developing diabetes. In smokers, however, this was not seen and high carotenoid levels were actually associated with a slight increase in risk.

The findings "suggest that smoking may nullify the protective effect (of high carotenoid levels), supporting the concept that antioxidant metabolism and the oxidative defense system behave differently in smokers than in nonsmokers," the authors conclude.

Source: American Journal of Epidemiology

Free medical care for the freedom fighters

STAR HEALTH DESK

..Inaugural programme on "Improvement of healthcare service for the freedom fighters" held in the capital on May 25 last, says a press release.

The programme was organised by AB Foundation, a non-profit humanitarian organisation that provides immense support and free medical treatment to the disadvantaged freedom fighters in addition to their other social activities.

The foundation was laid by the eminent orthopaedic surgeon of the country and head of orthopaedics department of Dhaka Medical College Hospital Professor Dr M Amjad Hossain.

Now the organisation plans to expand their healthcare support to the freedom fighters by providing free medical consultation, medicine free of cost, proper referral and admission to different government hospitals and private clinics.

The service will be monitored and provided at the "Orthopaedic Care, Research and Rehabilitation Center" located at 3/18, Humayun

Road, Mohammadpur, College Gate, Dhaka which is a sister concern of AB Foundation.

Professor Dr M Amjad Hossain, who is also a freedom fighter and holds the post of Health Advisor of Bangladesh Freedom Fighters Welfare Trust for long 26 years will provide free consultation at every Thursday of the week at the centre. Some young doctors of the centre are dedicated to the service as well.

Sector Commander of Sector No 7 during the liberation war, Colonel (Rtd) Kazi Nuruzzaman (Bir Uttam) was present as chief guest while Major General (Rtd) Amin Ahmed Chowdhury (Bir Bikram) and Major (Rtd) Ahsan Ullah were the special guest in the occasion.

Freedom fighters, renowned doctors, journalists, social workers and other members of civil society were present in the inaugural session and hoped for the future growth of the noble initiative by AB Foundation.



Dr Md Amjad Hossain, Chairman of A B Foundation and Head of Orthopaedics department of Dhaka Medical College Hospital is speaking in the inaugural programme of free medical care service dedicated to the freedom fighters.

Your Doctor

Dr Samanta Lal Sen
Plastic and Reconstructive Surgeon
Project Director, Burn Unit
Dhaka Medical College Hospital

Dear doctor, I am 30 years old and I have been suffering from an embarrassing problem since I was a teenager. My breasts are enlarged like a female. So it is embarrassing for me to change my clothes in public places and in my hostel.

I would like to know whether there is any remedy for the problem. Please explain whether there is any side effect of the procedure or is there any chance of coming back the same problem.

Thanks and best regards –
Mr M S *

Dhaka
[* Name disguised to protect identity]

Answer:
Your problem is quite common. The condition of enlarged breast in male is called gynaecomastia. Many people have this condition and you need not get too embarrassed with your condition.

There are ways to reduce your enlarged breast by simple surgery. The procedure is very easy and you can perform it by any plastic and reconstructive surgeons of the city.

The condition does not recur usually. There is a very little chance of recurrence.

On coming issue "Your Doctor" will respond to problems of skin and venereal diseases. Send your questions to Your Doctor, Star Health, The Daily Star, 19, Karwan Bazar, Dhaka 1215 or e-mail your problem to starhealth@thedailystar.net