



How to stay hale and hearty during summer

MD RAJIB HOSSAIN

With the advent of summer, the incidences of gastroenteritis and diarrhoeal disease increase in different parts of the country. Hospitals are struggling to cope with a sudden rush of diarrhoeal patients, with hundreds of new sufferers arriving every day.

Since March, more than six thousand diarrhoea patients across the country have been reportedly brought to different hospitals and many had to be admitted for proper treatment (although the numbers may vary according to the source but they are always in thousands). The International Center for Diarrhoeal Disease Research, Bangladesh (ICDDR,B) admitted more than 400 patients, mostly children, on average each day as temperatures hit 37 degrees celsius in many parts of the country.

So this number may actually be only the tip of the iceberg with many cases not even being reported. Although there has been no major loss of lives however, it is the cost that has taken the toll on the govern-

ment. The main reason behind this epidemic is said to be the lack of cleanwater.

Gastroenteritis is a condition that causes irritation and inflammation of the stomach and intestines (the gastrointestinal tract). An infection may be caused by bacteria, virus or parasites in spoiled food or unclean water. Some foods may irritate the stomach and cause gastroenteritis.

Virus and bacteria are very contagious and can spread through contaminated food or water. In up to 50 percent of diarrhoeal outbreaks, no specific agent is found. Improper handwashing following a bowel movement or handling dirty things can spread the disease from person to person. Gastroenteritis caused by viruses may last 1-2 days. On the other hand, bacterial cases can last a week or more.

Many people who experience the vomiting, abdominal cramp low grade fever and diarrhoea those develop from these types of infections or irritations. Travelers to foreign countries may experience traveler's diarrhoea from contaminated food and unclean water.



Most people recover easily from a short bout with vomiting and diarrhoea by drinking fluids and easing back into a normal diet. But for others, such as babies and the elderly, loss of body fluid with gastroenteritis can cause dehydration, which is life-threatening illness unless the condition is treated and fluids restored.

Self-care at home

The mainstay of home treatment of gastroenteritis is to drink fluids.

the point of seizures.

After each loose stool, children younger than 2 years should be given 1-3 ounces of any of the oral rehydration saline (ORS). Older children should be asked to drink 3-8 ounces. Zinc tablet should be given with ORS.

This guideline serves only to replace fluid loss due to diarrhea. Drink additional fluid equal to the amount you normally drink.

The World Health Organisation has established a field recipe for fluid rehydration: Mix 2 tablespoons of sugar (or honey) with $\frac{1}{4}$ teaspoon of table salt and $\frac{1}{4}$ teaspoon of baking soda. (Baking soda may be substituted with $\frac{1}{4}$ teaspoon of table salt.) Mix in 1 liter (1 qt) of clean or previously boiled water.

You will need solid foods eventually to help end the diarrhoea. After 24 hours, begin to offer bland foods with — bananas, rice, chira without sugar, toast, pasta, or potatoes.

In case of adult, they should eat ice chips and clear, non-caffinated, non-dairy liquids such as gatorade, ginger ale, fruit and juices.

After 24 hours of fluid diet with-

out vomiting, begin a soft-bland solid diet.

When to seek medical care

If you or someone appears weak and dizzy while standing, dehydration is possible. If you cannot drink fluids, but continue to lose fluids through fever, vomiting, and diarrhoea, you should consult with a doctor.

If you appear sleepy or unaware, you should definitely be taken to a doctor or hospital's emergency department.

If you have any of the following symptoms, go to a hospital's emergency department:

- Blood in the vomit or stool
- Vomiting that lasts more than 48 hours
- Fever higher than 101°F
- Swollen abdomen or abdominal pain in the right lower part of the abdomen
- Dehydration (check for little to no urination, extreme thirst, lack of tears, and dry mouth)

Fistula is the major obstacle to safe motherhood in the country

MAHBUBA ZANNAT

A significant number of women in the country who dreamt to be mothers have been passing their days with unbearable physical and mental suffering accompanied by social deprivation for which they could be blamed little.

Lack of awareness and sincerity of the caregivers as well as family members, around 71,000 women are suffering from fistula, an obstetrical trauma and forced to live an inhuman life void of minimum love, care and support in her distressed physical and mental condition.

Prolonged and obstructed labour is the main reason of person's having fistula as due to prolonged pressure on the soft tissues in urinary bladder and rectum the blood supply is totally cut off resulting in decay of the muscles and tissues.

"Decaying start to take place after three hours of the obstructed labour. But we find women coming on 3rd to 6th days in critical condition. Most of the time, we have to bring out a decomposed baby and as soon as the baby is out it is seen continuous dribbling of urine or stool or both from the mother," said Ferdousi Begum, general secretary of Obstetrical and Gynaecological Society of Bangladesh (OGSB).

Per one thousand married women Fistula paralyses 1.67 in the country which is almost nil in developed country for improved maternal care, knowledge and awareness and adequate health service including skilled birth attendants.

Whereas 87 percent child birth in the country is taking place by the unskilled birth attendants increasing the risk of the mothers' having fistula afterwards that crippled the

women not only physically but also economically, socially and mentally.

"My husband who loved me very much started to scold and beat me as soon as I had been suffering from fistula and he even got marry to another one leaving me and my three year old child," said Dilara, a 19 year old lady with her tired voice who had been pushed to suffer from the disease with pain and stink bitterly for the negligence and unawareness of her family members.

"I tried to commit suicide even when the repeated reproach of my near and dear ones became unbearable only for this 'cursed disease,'" she told.

"It is violence against motherhood and gross injustice as well. Propagation of generation is taking place through the women, yet they are uncared," said Prof Sayeba Akhter of Bangabandhu Sheikh Mujib Medical University (BSSMU) adding that the reasons behind one's getting fistula and its after effects towards a woman is injustice in all respects.

The disease is prevailing in the country silently and very few are aware of this maternal morbidity as the women who bear fistula while giving birth are socially outcast as the relatives still think it is the fault of the mother.

Fistula is more than a women's health problem. It typically affects the most marginalised members of society—poor, illiterate girls and young women living in remote areas. Root causes include early childbearing, malnutrition and limited access to emergency obstetric care. Even very few people know about the treatment of fistula though government has set up

fistula centres in 8 medical colleges and a few of non government organisations have been also working on it.

Social awareness is a must as well as having skill birth attendants, said Prof Ferdousi adding that usually 80 percent delivery is normal while 15 percent see complication during this period and 5 percent need to go for caesarean.

"But in the country every year around four lakh delivery is taking place and it is not possible to manage 20,000 caesarean section for the pregnant mothers for lack of resources and manpower," she said adding that a mother is dying in every hour while giving birth and at the same time 50 mothers are becoming paralysed in different ways including fistula, incontinence, bladder infections, and genital ulceration.

Though a training programme to create skill birth attendants have started in 2003 in association with the government and OGSB, only 2,500 female family welfare and health assistants were trained. Whereas, it needs 28,000 skilled birth attendants in the country, sources said.

The Bangladesh national estimate reflects that nearly 8.76 million women have been suffering from chronic morbidities like vesicovaginal fistula, recto vaginal fistula, uterine prolapse, dyspareunia, hemorrhoids and associated physical and social disabilities.

Absence of a national survey on fistula patients also hinders to get the whole picture of prevalence of fistula and its severity.

Zinc in childhood diarrhoea management

NAZRATUN NAYEEM MONALISA

A significant proportion of population of our country do not have access to enough food to meet their recommended daily allowance (RDA) of energy (calories) and micronutrients (minerals and vitamins) to maintain their health.

This specially occurs in case of young children. In addition, these children are exposed to high levels of environmental pollution and poor sanitation. As a result, diarrhoea commonly occurs in children. Diarrhoea is therefore a leading cause of child mortality and morbidity in our country.

During a diarrhoeal illness children may lose great amount of fluid in a short period of time. For this reason, rehydration with ORS (Oral Rehydration Saline) is the primary treatment. Recently, research regarding necessity of zinc in diarrhoea has been carried out at ICDDR,B reveals that zinc should be added to the treatment of childhood diarrhoea, whether watery, mucosal or bloody. ORS replaces the fluid lost from the body and zinc speeds up recovery. So when children from 6 months to 5 years suffer from diarrhoea, they should be treated with ORS and zinc in combination.

Zinc is a micronutrient found in foods rich in protein such as red meat, poultry, nuts, milk and other dairy products. Zinc is essential for human growth and it strengthens the immune system, thus providing protection against illness and diseases.

Although zinc is available in food but a large fraction of population living in urban slums and rural areas in Bangladesh, do not have access to sufficient amounts of

meat, poultry, nuts, milk and other dairy products. Zinc is essential for human growth and it strengthens the immune system, thus providing protection against illness and diseases.

It is noted that the Bangladesh government has adopted zinc treatment in childhood diarrhoea in accordance with the WHO/UNICEF joint recommendations. The recommended daily dose of zinc for children aged 6 months to 5 years is 20 mg per day for 10 consecutive days.

Presently, zinc dispersible tablets are available in local markets, each containing 20 mg zinc sulfate. Similar to ORS, Zinc dispersible tablet does not require a doctor's prescription and can be purchased over the counter in most drug shops. The dispersible tablets dissolve within half a minute in a teaspoon full of water. This has been endorsed by the Bangladesh Pediatric Association and was approved by the Bangladesh Drug Administration.

ORS should be given only while the diarrhoea continues. However, zinc should be given once daily for 10 consecutive days. When the child is cured from the diarrhoea, then ORS can be stopped but

zinc-rich foods. This results in zinc deficiency that can lead to growth failure and increased susceptibility of illness and death, especially among young children.

ORS should be given only while the diarrhoea continues. However, zinc should be given once daily for 10 consecutive days. When the child is cured from the diarrhoea, then ORS can be stopped but

administering zinc should continue for 10 days. It was found that a full course, that is 10 days, provides the child protection against further episodes of diarrhoea over the next 3 months. It is estimated that zinc treatment can save almost 50,000 lives of under-five children every year in Bangladesh.

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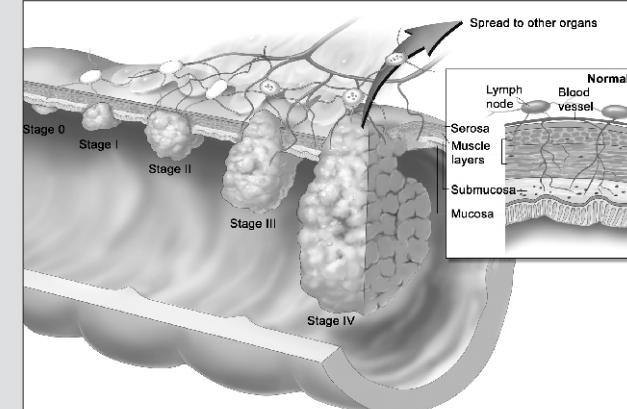
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If the diarrhea is severe the child should be taken to a hospital or to a qualified physician.

The writer is Information Manager of SUZY Project, ICDDR,B.

Research Update



Afraid of cancer? Giving up hope makes it worse

Many Americans fear they can do nothing to protect themselves from cancer, and they may be creating a self-fulfilling prophecy, U.S. researchers said.

Their survey of more than 6,000 people found that nearly half -- 47 percent -- agreed that "nearly everything causes cancer" and that more than a quarter felt there was little they could do about it.

Yet an estimated two-thirds of cancer cases can be prevented with common-sense measures, such as not smoking, eating plenty of fruits and vegetables and avoiding too much sun, according to the American Association of Cancer Research and the National Cancer Institute.

"They say, 'Well, there is nothing much you can do about it,' and, as our survey shows, they indeed do nothing about it," said Jeff Niederdeppe of the University of Wisconsin, who helped lead the study.

"Yet we know that approximately 30 percent of cancer deaths are attributed to smoking, while 15 to 20 percent are linked to overweight and obesity. Clearly, there are very specific things we can do to reduce our personal risk for getting cancer."

Niederdeppe and colleagues analysed a National Cancer Institute survey that asked people whether they agreed with three statements about cancer. About 47 percent of

those surveyed agreed that "it seems like almost everything causes cancer," while 27 percent agreed that "there's not much people can do to lower their chances of getting cancer."

Most of all, are confused, with 71.5 percent agreeing that "there are so many recommendations about preventing cancer, it's hard to know which ones to follow," researchers wrote in their report, published in the journal *Cancer Epidemiology, Biomarkers & Prevention*.

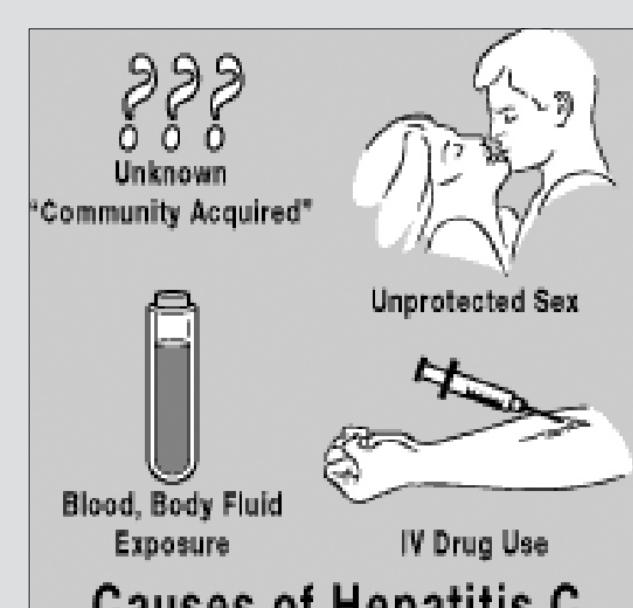
People who agreed with at least one of the three statements were less likely than others to exercise weekly and eat five daily servings of fruits and vegetables, said Niederdeppe and colleagues.

Those who said there were too many recommendations were the most likely to smoke, and overall, less-educated people were more likely to hold one or more of the three beliefs.

Part of the problem could be the way medical research is reported, with one discovery at a time dribbling out and some findings contradicting others.

Cancer is the second-leading killer of people in the most developed countries, after heart disease. Half of all men and one third of all women will develop some type of cancer in their lifetime.

Source: *Cancer Epidemiology, Biomarkers & Prevention*



Hepatitis C drugs provide 'cure'

People infected with hepatitis C can be cured with existing treatments, researchers have discovered.

Around 99 percent of patients successfully treated with pegylated interferon and ribavirin had no detectable virus for up to seven years.

The researchers pointed out it had not yet been determined if those patients had suffered a relapse or been reinfected. Professor Shiffman said: "We are encouraged by this data because it is rare in the treatment of life-threatening viral diseases that we can tell patients they may be cured."

"In hepatitis C today, we are able to help some patients achieve an outcome that effectively enables them to put their disease behind them."

It can take years or even decades for symptoms to appear. Anyone who ever shared equipment for injecting drugs — even if it was a long time ago, and even if they only did it once or twice — they could be at risk from hepatitis C.

pegylated interferon alone or in combination with ribavirin. In those for whom treatment was successful (no detectable virus after six months) only eight patients tested positive for the virus in the following seven years.

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Participants were given a course of injections of



To mark International Candle-light Memorial Day and Global AIDS Week of Action, 20-26 May, 2007
Meet the Press
May 20, 2007
VIP Lounge, National Press Club, Dhaka
Asian Peoples Alliance for Combating HIV & AIDS (APACHA), Bangladesh
Chapter organised a meet the press at VIP Lounge of National Press Club.
Dr Halida H. Khandaker, Executive Director of CAAP and Convenor, APACHA, Bangladesh Chapter presented paper on Access to Care and Treatment in the press briefing.

STAR HEALTH PHOTO

Send health related queries (either in English or Bangla) to Your Doctor, Star Health, The Daily Star, 19, Karwan Bazar, Dhaka 1215 or e-mail your problem to starhealth@thecurrentstar.net

Your Doctor

Dr Faruk Ahmed
Head, Department of Gastroenterology
Chittagong Medical College
Chittagong

Dear doctor,
I am 25 years old. I was diagnosed with Irritable Bowel Syndrome (IBS) four years ago. I had done colonoscopy and barium X-ray.
My symptoms include constipation, diarrhoea, mucus in stools, blood in stools, abdominal pain, pelvic and lower back pain.
The physician will evaluate your condition and able to find out the cause of having blood in your stool. The best way to handle IBS is to eat a healthy diet, avoid foods that seem to make you feel worse and find ways to handle your stress. Here are some tips to cope with IBS:
• Eat a varied healthy diet and avoid foods high in fat.
• Drink plenty of water.
• Try eating 6 small meals a day rather than 3 larger ones.
• Know new and better ways to deal with your stress.
• Avoid using laxatives. They may weaken your intestines and cause you to be dependent on them.
So, make an appointment with your doctor and do not worry too much about it in the mean time. Good luck.

