



All health information to keep you up to date



For your eyes only

The eyes are amazing windows through which we observe the world. It is responsible for majority of all the information our brain receives and usually we rely on our eye-vision more than any other sense. For a strong vision we need antioxidants, nerve supporters, pigment protectors, cell membrane components, vasodilators and cofactors.

Scientists at the Cleveland Clinic judge that antioxidants like beta-carotene and vitamin C can reduce vision loss in patients with age-related vision impairment called Age-Related Macular Degeneration (AMD). These vitamins can protect our eyes from vision-altering free radical damage.

Harvard scientists have found that antioxidant 'zeaxanthin' can protect our eyes against AMD by absorbing blue light which is a part of sunlight. This terrible light is capable of damaging our retinas. Fruits and vegetables contain vitamin A, C, E and Beta-carotene. The yellow vegetables are important for daytime vision.

According to some researchers, green tea has 10 times more antioxidants than fruits and vegetables. Green tea contains flavonoid antioxidants that fight free radicals and also prevent age-related skin problems.

Garlic and onions are rich in sulfur, which is necessary for the production of glutathione, an important antioxidant for the lens of the eye, and the whole body. Small Fishes and fishes rich with Omega 3 (especially DHA or docosahexaenoic acid) are good for eyes. DHA provides structural support to cell membranes, and is recommended for dry eyes, treatment for macular degeneration, and sight preservation.

Spinach and green leafy vegetables are rich in carotenoids, especially lutein and zeaxanthin. Lutein, a yellow pigment, protects the macula from sun damage and from blue light.

Eggs are rich in cysteine, sulfur, lecithin, amino acids and lutein. Sulfur-containing compounds protect the lens of the eye from cataract formation. Vitamin B Complex is (especially Vitamin B-12) necessary for nerve function. The retinal receptor cells send all their messages through nerve fibers into the optic nerve, and into the brain. These vitamins keep up nerve and general body activities. One of the most common deficiencies in elderly individuals is B12. According to eye specialists' vitamin B-12 (under the tongue or sublingually) is recommended everyday for people with optic nerve disease or glaucoma.

These days we must be selective in terms of the foods we eat when the soil is contaminated with pesticides and chemicals. And sometimes modern-day diet cannot provide all the answers. We need to be able to add extra constituents to our dietary in order to restore what may have been lost.

Today, there are lots of people who are organised to take care of our eyes. They are ophthalmologist, optometrist and opticians. It depends what kind of eye care we need.

Ophthalmologist is an expert treating medical diseases of the eye. If you are concerned about your glasses — an optometrist is the right person. They are specialists in glasses, contacts, and primary eye care. An optician is somebody who specialises in fitting glasses to our eyes-making lenses, fitting the frames, adjusting the nose pieces.

In developed countries opticians can also be involved in dispensing contact lenses, but they do not prescribe glasses or contacts, and they do not measure or examine eyes.

Dealing with winter woes

DR MD RAJIB HOSSAIN

Dry hands, arid skin, desiccated hair, more asthma and heart attacks, cold and flu are the woes of winter. Living well in this wintertime needs extra caution as the cold weather ushers annoying health issues. To help combat the pesky wintertime problems, here are some tips and advice on how to keep your body in fit throughout the winter months.

Proper clothing

When outside for an extended period of time, it is important to find the right, and correct, amount of clothing to wear. Again, wear too much and you can sweat too much increasing susceptibility to hypothermia. The clothes that will release heat are ideal. Because if you start to sweat, that can decrease your heat as water is a gateway to lose heat. Also, if your clothes get wet, you can get yourself into trouble. We need to wear clothes that will not stay sopping wet like cotton does.

Protecting our head and neck are also important because a significant amount of heat can be lost if the head, ears and face are not covered. We have to be especially careful to cover our fingers, nose, ears and toes because they are the most vulnerable to frostbite.

Skin care

Cracking, chaffing, dry patches, and itchiness — all

are unpleasant symptoms of dry and irritated skin that often comes with winter. As temperatures drop, the wind howls, and humidity levels hit an all-year low, and our skin requires extra attention and care to stay healthy. To be sure you are effectively treating and protecting your skin during the harsh winter season, the following skin care tips may be helpful:

Create a barrier with moisturisers: When applying lotions and cremes, you are creating a barrier to protect your skin against dryness. This barrier allows time for hydration and healing to occur from the inside. For best results, regularly apply these immediately following a bath or shower, when the skin is still moist.

Take shorter, cooler showers: Despite how soothing a long, hot shower feels when it is chilly outside, the steam and heat can do skin more harm than good by drawing out moisture that is on the skin and causing dryness. Instead, keep the water temperature comfortably warm and take shorter showers.

Avoid harsh soaps and cleansers: Pay special attention when picking your soap, as certain seemingly-mild cleansers actually contain chemicals that strip water from the skin. Generally, products containing preservatives, fragrances, and lye are harsher and more irritating to the skin. Instead, look for products that contain



glycerin which maintains moisture.

And here is a tip for your lips — always wears some form of lip gloss or chapstick to wet your lips.

For your hair

Scalp itchiness, static, dry hair — they are common issues for people in this season.

According to experts, hot oil treatment can help a lot in this regard. Depending on how dry your hair and scalp are, you can use them once a week to once a month. It is also recommended not to

wash hair as often, as that contributes to dryness.

And to fight static, consider using a more protein-based conditioner, which will be heavier. To help you choose one, consult with the hair specialists or dermatologists.

Winter injuries

Existing conditions can also be affected by the cold weather. It is important for people with asthma or chronic bronchitis to be very careful specially when during physical exertion in

from the glare of the snow.

Water intake

Just because you are not as thirsty or sweating as much does not mean fluid is not being lost. It is a big problem with the cold because when it is hot, you sweat and understand that you need to replace your fluids. You are not sweating as much, but you still are losing fluids the same as if you were exercising in the summer time. Hydrating beforehand with 8 to 10 glasses of fluid helps a lot and you should also be hydrating during activities no matter what your thirst mechanism is telling you.

Beating the winter blues

Cold is around and people are cooped up in home isolating them more and they are more inclined to stay in. The shorter days and colder temperatures may make you feel blue in the winter, a disease called Seasonal Affective Disorder (SAD). The disorder affects people of all ages and races, and the severity of symptoms can vary from person to person. SAD may require medication for some, but for others, a simple change in food may better their mood. Treatments can range from things as simple as taking a walk and opening the blinds during the day something more complex like light therapy and group psychotherapy. Doctors say the easiest thing you can do is be in touch with others, and yourself and your feelings.



DID YOU KNOW?

Depression linked to poorer diabetes control

Depression may make it harder for people with diabetes to keep their blood sugar levels in check, researchers have found.

In a study of more than 11,000 U.S. veterans with type 2 diabetes, the investigators found that over a decade, those diagnosed with depression consistently had a higher average hemoglobin A1C level — a standard measure of long-term blood sugar control.

The findings are concerning, in part, because studies have found that diabetics have a higher risk of depression than non-diabetics. It is estimated that about 30 percent of people with diabetes also suffer from depression at some point.

"Our study shows that depression is a major and important comorbidity in people with type 2 diabetes," Dr. Leonard Egede, one of the researchers, said.

He and his colleagues at the Medical University of South Carolina, in Charleston,

report their study findings in the journal *General Hospital Psychiatry*.

Briefly, the researchers analysed records from 11,525 mostly male veterans treated for type 2 diabetes between 1997 and 2006. At the outset, 6 percent also had a diagnosis of depression. On average, the researchers found, this group consistently showed a higher hemoglobin A1C level over the years.

The difference between groups was small — a gap of 0.13 percent overall — but for any one person, even a slightly higher hemoglobin A1C, sustained over time, can raise the risk of diabetes complications, Egede noted.

The reasons for the findings are not clear, but one possibility is that dealing with depression makes it harder for diabetics to manage their blood sugar with lifestyle measures and medication.

Source: General Hospital Psychiatry

First trachea transplant without drugs

STAR HEALTH DESK

A Colombian woman has received the world's first tailor-made trachea transplant, grown by seeding a donor organ with her own stem cells to prevent her body rejecting it, an international research team reported recently on *The Lancet*.

The success of the operation, performed in June using tissue generated from the woman's own bone marrow, raises the prospect that transplanting other organs may be possible without drugs to dampen the immune system, they said.

Doctors work hard to match tissue type when transplanting organs so that the body does not completely reject the new organ, but patients usually have to take immunosuppressants for the rest of their lives.

"The probability this lady will have a rejection is almost zero percent," Dr. Paolo Macchiarini, head of thoracic surgery at the Hospital Clinic, Barcelona who performed the transplant, told a news conference — news agency Reuters says.

"The patient is enjoying a normal life with no signs of rejection after four months," Claudia Castillo sought help



Claudia Castillo, a 30-year-old Colombian woman received the world's first tailor-made trachea transplant grown using her own stem cells

after a case of tuberculosis destroyed part of her trachea — the windpipe connected to the lungs — and left her with breathing difficulties, prone to infections and unable to care for her two children.

The 30-year-old's only option other than the experimental surgery was for doctors to remove part of her lung — a choice that would have seriously degraded her quality

of life, the researchers said. "It is not just an issue of life, it is an issue of quality of life," said Martin Birchall, a surgeon at the University of Bristol, who helped treat Castillo.

Hybrid organ

After finding a donor, the researchers first depleted the transplanted trachea of the donor's cells and then obtained bone marrow stem cells from Castillo they grew

into cartilage cells.

Next, the team seeded these cells on the outside of the donor trachea using a device developed at Milan Polytechnic in Italy that incubated the cells. The researchers used the same device to make epithelial cells to construct the lining of the trachea.

This created a hybrid organ in a lab that Castillo's body would identify as its own and make immunosuppressant drugs unnecessary, the researchers said.

Finally, the team grafted a 5 cm (1.97 inch) piece of the trachea onto Castillo's damaged left main bronchus, which connects the main windpipe to the left lung.

Castillo, who lives in Spain, had no complications from the surgery and left the hospital after 10 days. She is returning to normal activities and even called her doctors from a night club to say she had been out dancing all night, the researchers said.

"We believe this success has proved we are on the verge of a new age in surgical care," said Birchall, who predicted the technique could be applied to other hollow organs similar in structure, such as the bowel, bladder and reproductive tract.

Novo Nordisk launches once daily insulin

STAR HEALTH REPORT

Novo Nordisk has recently launched its premium long acting insulin Levemir (insulin detemir) in Bangladesh, which is designed to control blood sugar as well as reducing weight gain more effectively.

The launching ceremony was held at a local hotel in the city. Professor A K Azad Khan, President, Diabetic Association of Bangladesh and Professor Hajera Mahtab, Member National Council, BADS and Chairman of Board of Management, BIRDEM, Mr Melvin Oscar D'souza, Managing Director ROI, Mr. A. Rajon Kumar, Managing Director of Novo Nordisk Pharma Pvt. Ltd., Bangladesh were present on the occasion.

Mr. A. Rajon Kumar said, "The introduction of Levemir in Bangladesh now completes the portfolio of our modern insulin portfolio in the country."

Levemir is a long-acting modern insulin analogue



that covers the body's basal insulin need very effectively. It is released gradually for a longer period up to 24 hours duration of action with a single daily dose, which is a great boon for the patients constantly threatened by nocturnal hypoglycemia. It is released gradually for a longer

period and therefore entails less fluctuation in blood sugar level.

It has several other benefits like less nocturnal hypoglycaemia and less weight gain and hence it gives better outcome for obese diabetic patients and those at risk of obesity.

Prof. Azad told that the patients in this country will be beneficial to a great extent to have the insulin available at local market. He also urged the company to reduce the price of the insulin.

Levemir injections can be easily managed with prefilled insulin Flex-pen.



Novo Nordisk — a leading pharmaceuticals company — participated in a colorful rally on World Diabetes Day - 14 November 2008 where about 600 people participated organized by Diabetic Association of Bangladesh. The participants carried placards and signs saying "Unite for Diabetes". More than 200 diabetic children were part of the rally. This year's theme for WDD was "Diabetes in Children and Adolescents".

On the occasion, Mr. A. Rajon Kumar, Managing Director, Novo Nordisk Pharma Pvt. Ltd. on behalf of Novo Nordisk employees and World Diabetes Foundation, handed over a cheque of Tk. 5,47,200 to Prof Kishwar Azad and Prof A K Azad Khan, President - Diabetic Association of Bangladesh to support the supply of free insulins for poor diabetic children in BIRDEM hospital.



MD SOJIB KHAN

Any antibiotic, chemical or drug based substance consumed during pregnancy may reach the fetus (the baby inside the uterus) through maternal circulation. Antibiotics that are able to cross the placenta are potentially harmful and cause adverse fetal effects during pregnancy. The effects depend highly on the type and dose of antibiotic. Not only in pregnancy but certain antibiotics are able to pass from mother to her baby through breast milk.

Category C: Animal studies have shown an adverse effect but there are no adequate and well-controlled studies in pregnant women.

Category X: Highly dangerous Adequate well-controlled or observational studies in animals or pregnant women have demonstrated positive evidence of fetal abnormalities or risks.

Category D: Adequate well-controlled or observational studies in pregnant women have demonstrated a risk to the fetus. However, the drug may be acceptable if needed in a life-threatening situation or serious disease for which safer drugs cannot be used or are ineffective.

Category A: Least dangerous Theoretically there are no antibiotics in this class for pregnancy.

Tetracycline: Tetracycline, Doxycycline, Oxytetracycline

Others: Naproxen (3rd trimester)

Category C: Animal studies have shown an adverse effect but there are no adequate and well-controlled studies in pregnant women.

Quinolones: Ciprofloxacin, Levofloxacin, Moxifloxacin, Gatifloxacin, Ofloxacin, Sparfloxacin (2nd and 3rd trimester)

Macrolides: Clarithromycin, Azithromycin, Erythromycin

Sulphonamides: Clotrimazole

Others: Metronidazole, Naproxen (1st and 2nd trimester)

Category A: Least dangerous Theoretically there are no antibiotics in this class for pregnancy.

MD Sojib Khan is a Pharmacist