

WORLD HEPATITIS DAY 2009

Are you number 12?

DR MD RAJIB HOSSAIN

One in every 12 people worldwide are living with chronic hepatitis B or C. The prevalence is much higher than that of HIV, malaria or any cancer. But awareness is inexplicably low and the majority of those infected are unaware.

Hepatitis is the inflammation of the liver commonly caused by hepatitis virus B or C that may have no obvious symptoms until serious liver damage has occurred. These chronic, lifelong viral infections that can affect anyone from any walk of life.

Experts pointed out that everyone must take vaccine against hepatitis B virus and should know ways to be protected from hepatitis C as there is no vaccine for it yet. They emphasised on learning about the risk factors involved in both forms of hepatitis and should talk to the physicians about being tested if they are at risk.

Hepatitis B and C are two such notorious viruses and together kill approximately one million people a year. 500 million people around the world are currently infected with chronic hepatitis B or C and one in three people have been exposed to one or both viruses. The statistics are scary but very few people

are concerned of it. On May 19, World Hepatitis Day will be observed with special attention to create mass awareness and gear up the existing programmes.

The hepatitis B virus spreads through blood transfusions and receiving blood products without any screening; medical or dental interventions without adequate sterilisation of equipment; mother to infant during childbirth; needle sharing in case of injecting drug users; piercing by any infected instrument and also can be transmitted sexually.

The hepatitis C virus is spread through direct contact with infected blood. Very rarely it may be passed on through other body fluids. Few people realise that, virtually everyone is at risk. Transmission could come from something as simple as being nicked by a barber in a salon or a beauty parlour by same instrument that has previously cut someone who is infected.

Medical technologist Farhad Hossain, 40 from Dhaka has been suffering from cirrhosis of the liver, a condition which gradually damages liver irreversibly for which liver transplant is the only hope. He was pricked with a needle while working as



World Hepatitis Day support groups are seen to attend a concert by leading Bangladeshi rock band Artcell in Dhaka to raise the issue. One in every 12 people worldwide are living with chronic hepatitis B or C, but awareness is inexplicably low and the majority of those infected are unaware. The day aims to create mass awareness about the issue.

a laboratory technologist. He knew he could be infected with hepatitis B while working but did not undergo screening for the virus. He remained undetected for so long that the damage was at the fatal limit by the time it was diagnosed. Now he is in great despair thinking he could be protected by vaccine. Because of his liver is not functioning properly, Farhad suffers from abdominal disten-

sion due to accumulation of fluid, ammonia build-up in his abdomen which affects the brain and also from blood vomiting. He lives every day with pain and has to have his midsection drained regularly or the pain becomes unbearable. He is on a variety of medications while he knew nothing can cure his illness. The only hope is to transplant damaged liver with a suitable donor's liver that is

too expensive for him to afford. Moreover, it is not done in Bangladesh. Now he waits for an untimely death.

Like Farhad, many people have not got vaccinated yet and are living with in great risk. A significant number of people carry the virus silently as in many instances; there are no symptoms for hepatitis, specially in case of hepatitis C which is called silent killer also.

The disease silently destroys the liver.

Like any disease, the earlier it is found, the earlier it can be treated with greater the possibility of cure. Often the only outcome without treatment is eventual progression to cirrhosis, which can then lead to the need for a liver transplant or even death.

There is a simple test — generally a blood test — for both hepatitis B and hepatitis C. If you are diagnosed with hepatitis B or C you will face many challenges, but it is better to confront the disease head on, know how to avoid transmitting the infection to others and consider your treatment options and self management strategies as early as possible.

Hepatitis due to B or C virus is a major public health problem in Bangladesh, yet is poorly focused. Very few steps have been taken to prevent the disease and to raise mass awareness that is crucial to combat the disease. All citizens of Bangladesh should come forward and work proactively. It is vital that we all play our part to raise awareness of chronic hepatitis B and C along with the government and healthcare providers.

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Prevent food poisoning in summer

STAR HEALTH DESK

Foodborne illness (also known as food poisoning) peaks in summer. There are the natural causes why foodborne diseases are more prevalent in warm weather. The microorganisms like bacteria and virus grow faster in the warm summer months.

Most bacteria causing this illness grow fastest in the food at temperatures from 90 to 110 °F. Bacteria also need moisture to flourish and summer weather is often hot and humid. Given the right circumstances, harmful bacteria can quickly multiply on food to large numbers. When this happens, someone eating the food can get sick. In order to avoid the illness, one should stick on hygiene. Here are some tips to prevent foodborne illness:

Clean: wash hands and surfaces often

Unwashed hands are a prime cause of foodborne illness. Wash your hands with warm, soapy water before handling food and after using the bathroom, changing diapers and handling pets. When eating away from home, find out if there is a source of potable (safe drinking) water.

Separate: do not cross-contaminate

Cross-contamination during preparation, grilling and serving food is a prime cause of foodborne illness. Wash plates, utensils, and cutting boards that held the raw meat or poultry before using again for cooked food.

Chill: refrigerate promptly

Holding food at an unsafe temperature is a prime cause of foodborne illness. Keep cold food cold.

Cold refrigerated perishable food should be kept in an insulated cooler packed with several inches of ice, ice packs, or containers of frozen water.

Consider packing canned beverages in one cooler and perishable food in another cooler because the beverage cooler will probably be opened frequently. Keep the cooler in the coolest part of the car, and place in the shade or shelter, out of the sun, whenever possible.

Preserve the cold temperature of the cooler by replenishing the ice as soon as it starts melting. Take-out food: If you do not plan to eat take-out food within 2 hours of purchase, plan ahead and chill the food in your refrigerator before packing for your outing.

Food left out of refrigeration for more than 2 hours may not be safe to eat. Above 90°F, food should not be left out over 1 hour. Play it safe; put leftover perishables back on ice once you finish eating so they do not spoil or become unsafe to eat.

Cook: cook to proper temperatures

Food safety experts agree that food is safely cooked when it is heated for a long enough time and at a high enough temperature to kill harmful bacteria that cause foodborne illness. Cook beef, veal, and lamb steaks, roasts, and chops to a safe minimum internal temperature of 145 °F. Cook steaks and roasts that have been tenderised, boned, rolled, etc. to an internal temperature of 160°F. All poultry should reach a safe minimum internal temperature of 165°F throughout the product.

What about cholesterol-lowering margarine?

Considering using the cholesterol-lowering margarines and other spreads you see in your grocery store's dairy section? While they may not hurt you, they probably will not help if you do not have high cholesterol already. Cholesterol-lowering margarines or butter spreads are designed for people who need to reduce their cholesterol levels. If you use cholesterol-lowering spreads, use them as directed and most importantly, follow a healthy lifestyle, including a diet that's low in saturated fat and cholesterol.

Be a smart patient!

DR MUNTASIR MARUF

It is common in our daily practices to have 'hand-on-the-door-knob' patients who suddenly remember their main concern just as they are about to leave after the consultation. Some patients, minutes after leaving the chamber, return and tell — 'Sorry to bother doc, I just forgot to tell...'

Perhaps some of you may experienced the same sometimes. You got the prescription, driven home and then remembered an important point or question you forgot to mention or ask. Avoiding such situations, to get the best from your doctor, you need to be more prepared before you even step into the waiting room.

Don't delay
If you notice a physical or mental problem worrying you, make an appointment straight way making sure that you see your doctor as soon as possible. The longer you wait, the worse things could get.

Make a list
Before you visit your doctor, it is a good idea to make up your mind what you want to tell your doctor or to think through all the information you believe your doctor needs to know.

Write down your important symptoms, complaints and worries. Be specific. Make sure the list is concise and clear. Prepare a copy to give your doctor so that you may run through the list together.

Take all important medical records
Take a list of all medications, even vitamins and/or herbs you take on a regular basis together. This is particularly crucial for a first visit.

This is helpful for avoiding adverse drug interactions that might occur with medications your doctor will prescribe. Bring the important prescriptions of other doctors you might have seen previously and any the investigation reports.

It is often helpful to keep photocopies of all previous records.

Know your pedigree
Some diseases have a genetic link. It is important for prognosis and treatment to know about the presence of the

diseases in your first-degree relatives. So, be informed about the illness of even your dead grandfather/ grandmother.

Be prepared for a physical examination

A physical examination may be necessary. Be prepared in a way so that the doctor gets an easy access. Dress in clothes you can get in and out of quickly. A common trend is to wear long or tight-sleeved dresses which interfere in measuring blood pressure. Zips are quicker than buttons. Avoid undergarments that are going to embarrass you.

Take a relative/friend

It is good to have a friend or family member with you rather than being alone. S/he will help you discuss your problems or remember important information that could be missed, give you moral support, help you make inquiries about your illness and your reports.

Be sure that the person accompanying you knows you and your condition well. Ask if your doctor would mind more than one person being present in the room.

Be honest

It is embarrassing to talk about problems with a complete stranger — it is natural to feel ignorant, scared and not in control. But do not feel you need to please the doctor or hide things. Even if you are uncomfortable admitting to unhealthy behaviours, it is imperative to tell your doctor the truth. Do not worry about shocking or embarrassing your doctor.

Every week thousands of women who have trouble with sexual life visit a general practitioner or medicine specialist and complain of a headache or non-specific burning sensation or discomfort without saying what is really on their minds.

If a doctor suggests something that would be hard for you to do, let him know so you can work out other arrangements.

Get information, learn about the illness

Listen to what your doctor says. If you do not understand, or if you feel that s/he has not answered your questions, do not hesitate to ask again.

written for you, ask the doctor to explain what they are, how they will help, dosage, possible drug interactions with anything else you are taking, etc. This is the time to ask all your questions including the possibility of any adverse reactions about any new medications.

Ask for clarification of tests and their results. Ask for more detail on recommendations such as diet and exercise modifications.

When first diagnosed, most people want more information. It is reasonable to quiz the doctor about health problems and fears. If the doctor is too busy for an in-depth conversation, then assistants are usually available to explain. If an assistant is not available, do not hesitate to ask the doctor.

Now-a-days, doctors are not your only source of medical information. Books are the best way to build up a picture of any disease. But make sure the book is aimed at patients rather than at doctors. Some busy doctors may provide with a printed hand-out with the details of the disease.

You may go through the Internet, but be cautious! Visit sites recommended by health professionals or hosted by respected organisations.

Be realistic

Some people have the impression that all known ills can be cured; the truth is that medicine will always be a bit of a hit-and-miss affair. Any medicine is approved by the authority as it was seen effective in most or many patients through researches. As everybody is different anyway, the same medicine may not work for all. After a certain period, the medicines may have to be changed. Do not expect instant solutions.

Changing your doctor

Sometimes people feel uncomfortable with a certain doctor. If your current doctor is not meeting your expectations, express your concerns. If no improvements follow, find another doctor.

Doctor visits are facts of life. So why not make the visit a productive and fruitful one by advanced planning? Be a smart patient — get the best out of your doctor.

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HEEL HEALTH

Posture
High heels push the center of mass in the body forward, taking the hips and spine out of alignment.

Pressure
High heels may make legs look longer, but as the heel height goes up, so does the pressure on the forefoot.

Pressure increases on forefoot when wearing 3-inch heels

2	+76%
3	+57%
4	+22%

The calf
Calf muscles contract and adjust to the angle of the high heels. Muscles may shorten and tighten.

Morton's neuroma
Heel height and a narrow toebox can create a thickening of tissue around a nerve between the third and fourth toes, which can lead to pain and numbness in the toes.

Achilles tendon
When the front of the foot moves down in relation to the heel, the Achilles tendon tightens up.

Bunions
Tight-fitting shoes can cause a bony growth on the joint at the base of the big toe, which forces the big toe to angle in toward the other toes, resulting in pain.

Pump bumps
The rigid backs or straps of high heels can irritate the heel, creating a bony outgrowth also known as Haglund's deformity.

Ankle injuries
High heels impair balance, a wearer is at a greater risk of falling, which could lead to a sprained or broken ankle.

Metatarsalgia
High heels force the body's weight to be redistributed. Prolonged wear can lead to joint pain in the ball of the foot.

Corns, Callus, Bunionettes
A narrow toebox pushes the smaller toes into a bent position at the middle joint. Eventually, the muscles in the second, third and fourth toes become unable to straighten, even when there is no confining shoe.



NUTRITION CORNER

Eating for eye health

STAR HEALTH DESK

Eating a diet rich in leafy vegetables, nuts, fish and low in starchy carbohydrates appears to lower risk for age-related macular degeneration, the leading cause of severe vision loss in people over 50.

The findings, published recently in the journal Ophthalmology, is the first to calculate the combined effect of certain dietary nutrients and eating habits on a person's risk for age-related macular degeneration.

The greatest benefit was seen among the study-participants who regularly consumed a combination of the protective nutrients as part of a low-glycemic index diet. The glycemic index ranks carbohydrates according to their effect on blood glucose levels. Processed foods like white bread and pastries, as well as starchy carbohydrates like potatoes, have a higher glycemic index because they are digested and absorbed quickly, producing rapid spikes in blood sugar and insulin levels. Lower glycemic index foods, such as most vegetables, protein and nuts, produce

gradual rises in blood sugar and insulin levels.

The protective nutrients linked with eye health are typically found in fruits, green vegetables, nuts and cold-water fish. Citrus foods are good source of Vitamin C. Food sources of vitamin E include green leafy vegetables, beans, nuts and vegetable oils. Beans, nuts, seafood and whole grains are sources of zinc.

Food sources of lutein and zeaxanthin include eggs, kale, spinach, turnip greens, romaine lettuce, broccoli, zucchini and garden peas. Fatty fish such as salmon is a good dietary source of the omega-3 fatty acids.

Scientists are not sure what causes macular degeneration, but risk factors include aging, cigarette smoking, family history and obesity. Women and Caucasians also are at increased risk. Although the disease has a strong genetic component, a growing body of research shows that healthy behaviors can lower risk. People with macular degeneration lose the central vision in their eye. This vision loss simulator shows how vision changes as macular degeneration worsens.