



Practical approach to deal with prolonged fever

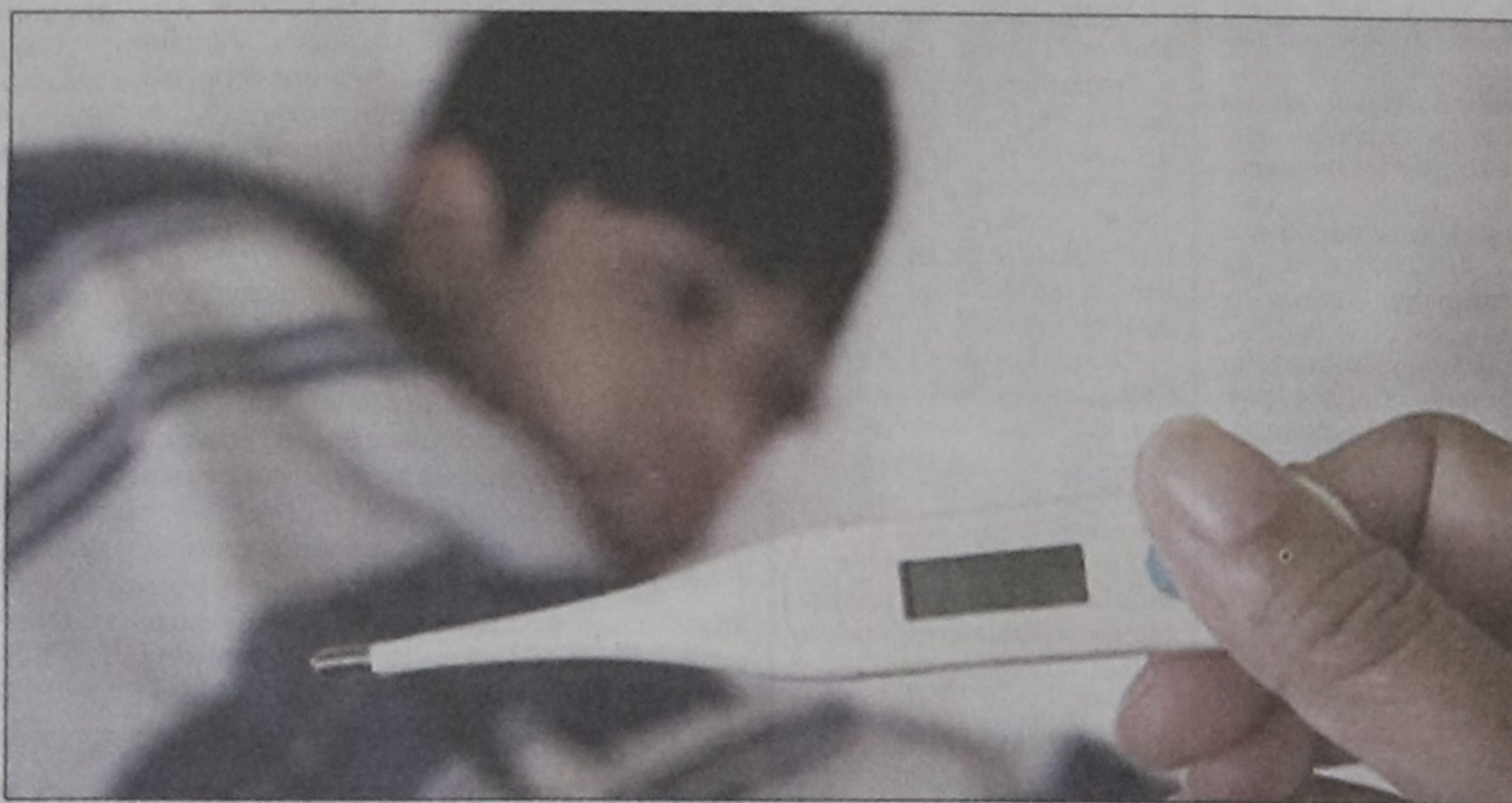
STAR HEALTH DESK

Fever is body's defense against intruders. In maximum cases, it usually lasts for three to five days. However, the causes of fever in certain cases are hard to pin down and the duration may be prolonged enough to cause unbearable suffering. Knowing the general approach to identify the cause may help your doctor to reach early diagnosis and can lessen the intractable affliction.

Fever, when persists beyond 14 days, is termed as prolonged fever or Fever of Unknown Origin (FUO). It is distinguishable from the common viral fever which is self-resolving that may last a week or longer, but generally not as long as two weeks. We should keep in mind that many different diseases may present as prolonged fever. They include:

- Infections - urinary tract, upper respiratory tract, bone and joint, central nervous system, heart.
- Autoimmune diseases - juvenile rheumatoid arthritis, systemic lupus erythematosus (SLE), polyarteritis nodosum, inflammatory bowel disease.
- Cancers like leukemia, lymphoma
- Miscellaneous - factitious fever, drug fever, etc.

A certain percentage of cases self-resolve over a period of weeks to months without ever coming to



a specific diagnosis. When approaching a patient with prolonged fever, it is helpful to remember that the patient more often has an occult presentation of a common disease than a truly rare disease.

Recording the temperature pattern and explaining the proper history to doctor will help to attain a diagnosis at the beginning. And the appropriate treatment can be delivered rapidly to help recover soon.

The most important information to attain an early diagnosis is generally revealed by the history and physical examination. According to experts, history has

utmost importance in diagnosis any kind of disease. Significant clues may be identified only after elaborated history is taken. Important elements of the history include: fever pattern, weight loss, and other constitutional symptoms, such as anorexia and night sweats.

Here are examples of how history reveals the disease. If fever is associated with chill and rigor and recurs once in every 48 hours with a history of travelling malaria endemic zone, it is possibly due to malaria. If the fever is associated with weight loss then it goes under favour of tuberculosis, malignancy or cancer.

Like these, exposures with ill contacts, residence and travel, animals, insects, unpasteurised dairy products, wild game, medications, tuberculosis contacts, HIV risk factors are need to be explored.

Symptoms/signs also may help discriminate among possible diagnoses, e.g., rash, joint findings, cardiac/respiratory or other localising abnormalities. Prolonged fever also may be associated with many noninfectious illnesses, such as juvenile rheumatoid arthritis. Therefore, when an obvious illness is not present, it is important to rule out latter phase the underlying causes with

CT scans, blood studies and extensive antibody testing for other less common infectious illnesses.

The treatment of prolonged fever is supportive until the specific diagnosis is made. Physicians recommended only Paracetamol to lower the temperature. Experts strongly forbid giving any empirical therapy. Antibiotics or corticosteroids should generally not be administered unless a specific diagnosis justifying their use is uncovered.

In the absence of a diagnosis, such empiric treatment may provide transient response and frequently masks the diagnosis, resulting in a more prolonged and complicated disease. Maintaining fluid and electrolyte balance with adequate fluid and juice is important during the prolonged phase. Hospitalisation can be considered if the clinical and laboratory pictures are worrisome like severe vomiting, diarrhoea, rash, breathing difficulty, extremely high temperature and when the physician recommends to explore proper fever history or to reach a early diagnosis in coordination of consultations and diagnostic tests.

Children are especially in need of urgent care. It is strongly recommended to consult a physician before getting any treatment for children with any fever and adult with prolonged fever.

Want sun protection? Wear red or blue

Fabric color affects absorption of ultraviolet (UV) radiation, researchers say recently. Deep blue and red cotton fabrics are better than yellow at protecting skin against damaging UV radiation from the sun, according to Spanish scientists.

The researchers said their findings could lead to clothing fabrics that offer improved sun protection.

The color of fabric is one of the most critical factors in determining how well clothing protects people against UV radiation. But there are gaps in knowledge about exactly how color interacts with other factors to influence the degree of UV protection offered by a fabric, explained Ascension Riva of the Universidad Politecnica de Catalunya in Terrassa, Spain.

The researchers dyed cotton fabrics in a wide range of red, blue and yellow shades and measured the ability of each to absorb UV light. Deep blue shades had the highest UV absorption, while yellow shades had the least, they found.

Source: American Chemical Society, news release



An autistic's mind is normal, even brilliant!

Autism is a severe developmental disorder that begins at birth or within the first two-and-a-half years of life. Most autistic children are perfectly normal in appearance, but spend their time engaged in puzzling and disturbing behaviours which are markedly different from those of typical children.

Less severe cases may be diagnosed with Pervasive Developmental Disorder (PDD) or with Asperger's Syndrome (these children typically have normal speech, but they have many "autistic" social and behavioural problems). It is the fastest-growing developmental disability and becoming a worldwide epidemic.

Autism knows no racial, ethnic, or social boundaries, and family income, lifestyle, and educational levels do not affect the chance of its occurrence. However, since the early 1990's, the rate of autism has increased exponentially around the world with figures as high as 60 per 10,000.

In Bangladesh there is no statistics but to observe the increasing number of autistic children in special schools, it may be assumed easily that the rate of autism in Bangladesh is alarming. Given the magnitude of the problem, there is an urgent need to create awareness about autism in this country.

My son Aunindo Momen Aurko, age 14 plus is an autistic child. To the world, he is simply an awkward kid, but to me against all of his odd behaviour and activities is the most beloved. He is full of intelligence and sometimes brilliant, but because of his unusual behaviour,



the society treats him as strange. My personal feeling is that this is our limitations that we cannot explore his potentials as per his talent. So, problem lies with us, our society — not with the autistic one.

Despite its prevalence, autism is a disorder that is still largely misunderstood. Many people have an idea about a typical autistic person is — non-verbal, dumb, sitting in a corner rocking. The world sees the autistic as weird and insane. The world and the autistic are like a drama theatre. The autistic children can understand everything that is happening around them as a silent observer beyond of normal people's imagination. The tragedy of autism is being unable to communicate in words.

An autistic's mind is normal, even brilliant, but the absence of verbal expression makes their behaviour totally misunderstanding. Parents must probe and think where the strength of the child lies. Where does it

show interest or aptitude? What activity calms him or what activity he does not mind doing? The earlier the talent is detected, the larger will be the benefits. Research is showing that autism is treatable. Early identification and appropriate management can improve the quality of life of these individuals and their miserable families.

Non-autistic people see autism as a great tragedy and parents experience continuous disappointment and grief at all stages of the child's and family's life cycle. But this grief does not stem from the child's autism itself. It is the grief over the loss of a normal child of the parents had hoped and expected to have. Parents' attitudes and expectations and the discrepancies between what parents expected from their children at a particular age cause more stress and anguish than the practical complexities of life with an autistic person.

Of course the autistic children would not respond in the way parents expect, and may well find the whole interaction confusing and unpleasant. You know it takes more work to communicate with someone whose native language is not the same as yours. And autism goes deeper than language and culture; autistic people are "foreigners" in any society.

There is a common question which arises among all parents: What will happen to our children when we won't be able to take care of them? This is also my question to the society.

The article is by Syeda Shahnewaz Lotika, a researcher and a Mom of an autistic child.



Feeling old and blue? Green tea may help

REUTERS HEALTH, New York

Elderly men and women who sip on several cups of green tea a day may be less likely to have the blues, hint findings of a study from Japan.

Dr. Kaijun Niu, at Tohoku University Graduate School of Biomedical Engineering in Sendai, and colleagues found men and women aged 70 and older who drank four or more, versus one or fewer, cups of green tea daily were 44 percent less likely to have symptoms of depression.

Several prior studies have linked green tea consumption to reduced levels of psychological distress. This led Niu and colleagues to look at associations between drinking green tea and symptoms of depression in 1,058 relatively healthy elderly individuals.

About 34 percent of the men and 39 percent of the women had symptoms of depression, according to a report in the American Journal of Clinical Nutrition. These symptoms were severe in about 20 percent of the men and in about 24 percent of the women.

Overall, 488 participants said they drank four or more cups of green tea a day, 284 said they downed two to three cups daily and the remaining 286 reported having one or fewer cups daily.

According to the investigators, the apparent protective effect of greater green tea consumption on symptoms of depression did not fade after they factored in social and economic status, gender, diet, history of medical problems, use of antidepressant medications, smoking, and physical activity.

By contrast, there was no association between consumption of black or oolong tea, or coffee, and lower symptoms of depression.

A green tea component, the amino acid theanine, which is thought to have a tranquillising effect on the brain, may explain the "potentially beneficial effect" shown in the current study, Niu noted.

SOURCE: American Journal of Clinical Nutrition, December 2009

Opportunity for Bangladesh in the health care business

ABU SIDDIQUI

After nearly sixteen years, I recently travelled Bangladesh and stayed more than three weeks-travelling, meeting people and examining the immense changes in Bangladesh. I had the opportunity to view not through the eyes of a tourist, but through the eyes of an experienced healthcare scientist who felt and saw the tremendous accomplishments that Bangladesh has been made despite all negative movement. I was amazed seeing all signs of a robust and thriving economy.

What stroked me was the anxiety with the hospitals being built and their standard of services to the patients. Quality management remains an elusive dream. The cost of treatment varies very much from

hospital to hospital. There was not enough historical data of what it costs for the treatment of a particular condition.

Healthcare is very expensive in western countries. Therefore, the insurance companies and private hospitals in the USA are encouraging patients to travel to India, Abu Dhabi, Thailand, Singapore, Greece and Italy for treatment. The USA based healthcare companies are now outsourcing their healthcare services in the overseas either through joint venture initiative or opening their own state-of-the-art hospital facilities. The goals are to provide comparable healthcare services to their own patients as well as to the international communities with a reasonable cost.

Like call centers and IT business;

healthcare services are promising field especially the diagnostic and imaging services, cosmetic and regular surgery, and short-term treatments. It is time to act and develop clear strategies to motivate these potential healthcare companies to expand their services in Bangladesh. It will not only create thousand of new jobs but also provide better treatment opportunity to the local people. Here are few suggestions to be considered:

1. The ministry of health, doctors, nurses, pharmacists, hospitals and business schools should work together and develop clear plan for getting attention to the potential healthcare companies.

2. Send highly trained professionals to the international professional meetings and potential healthcare

companies to promote our ability to the international community.

3. Revise the curriculum in medical, nursing and pharmacy schools that train healthcare professionals, so that they are trained according to the new international paradigm.

4. Encourage business schools to develop executive training programmes in healthcare, which will effectively reduce the talent gap for leadership in this area.

5. Develop and implement international standard examination by which doctors, nurses and pharmacists are qualified for employment in the Joint Commission International (JCI) accredited organisations.

6. Encourage local hospitals to evaluate their services by JCI and meet their compliances.

7. Utilise and apply medical

information systems that encourage the use of evidence-based medicine, guidelines and protocols as well as electronic prescribing in inpatient and outpatient settings.

8. Develop partnerships between the western and local hospital that design newer ways to deliver healthcare.

9. The government should appoint a commission, which makes recommendations for the healthcare system and monitors its performance.

It is time to think, commence the debate, develop a clear plan and execute it. It has been done in many countries and I am confident it can be done in Bangladesh too.

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