



## Don't ignore Anthrax, awareness please!

It was just 9 years back. After 9/11, Anthrax was a serious issue in the western world. During that time, I was involved with a reputed university in a developed country. One morning, we had to face an alert due to this Anthrax — a potential weapon for Bioterrorism.

Still today, Anthrax is of serious interest due to the world terrorism issues. As an infective agent, it is a concern because it forms very resistant spores that can be transported easily. At present, it has come back in Bangladesh and infecting human and cattle.

Anthrax is commonly known as 'Tarka disease' among the villagers. Someone can ask — Are you sure? Do we have enough detection and research facilities? Do we know how to monitor? Or, are concerned authorities playing their role honestly? Frankly speaking, then my answer is — "I am not sure."

What I can say is that informing general mass about Anthrax in time does not mean creating panic. Knowing and developing awareness about it are certainly essential. And before making an important statement to the nation, our scientists and doctors should talk to each other with utmost importance. Public or private concerned policy makers' roles are going to be crucial at the end of the day, especially if the situation does not improve.

Here are some remarkable points about widely talked Anthrax:

- Anthrax infection is a condition caused by a bacteria *Bacillus anthracis* that usually causes infections with mainly domestic animals like cattle, goats, sheep, dogs, horses etc. The infection in humans is also called 'Woolsorters disease'.

- The bacterium infects the skin — most occupational cases are skin infections. But fortunately, skin infections are less severe and a more easily treated. It also infects the lungs — causing a form of pneumonia. It infects many small air sacs in the lung. This tends to be the most dangerous form. It sometimes infects the intestines. But this is rather rare.

The infection is typically treated by massive doses of antibiotics like Ciprofloxacin. But this article does not provide anthrax treatment advice. You should consult a qualified medical doctor for Anthrax infection advice and treatment specific to you.

# Bridging agriculture and health for better life

DR MD RAJIB HOSSAIN

Agriculture is very closely related to several major health problems like undernutrition, malaria, AIDS, food-borne diseases, diet-related chronic diseases (heart disease), diabetes, obesity and a range of occupational health hazards. This creates a strong reason for the sectors to work together — to orient agricultural systems to the benefit of health systems, and vice versa.

In spite of these obvious linkages, agriculture and health sectors are poorly coordinated in Bangladesh. Neither sector has seen each other as a key partner in achieving either their own sectoral goals or national development goals (including the Millennium Development Goals). But the most important barrier to integration is the longstanding isolation of agriculture and health, and their research and policy processes.

Management of water resources can be a good example of how practices in agricultural system interact with each other. Irrigation, multi-purpose dams, and ponds for livestock and fish can benefit health by



increasing food production, and generating higher incomes for the producers. On the other hand, they can also create conditions suitable for the propagation of water-related insect vectors and augment transmission of related diseases such as malaria, schistosomiasis and Japanese encephalitis.

This links between malaria and agriculture present opportunities for innovative approaches to address poor health and livelihoods. In a case reported from Sichuan province, China, a shift in irrigation techniques to an annual

cycle of wet crop/dry crop rotation resulted in a reduction of vector-breeding to a level lower than that of required to sustain malaria transmission. Other potential approaches include keeping cattle as deliberate bait and combining health interventions (i.e. distribution of bednets) with irrigation programmes.

At the same time, production of more energy dense and nutrient poor foods is contributing malnutrition, obesity, diabetes and diet-related chronic diseases. Taking combined strategies for improving

basic nutrition like biofortification of food with Vit-A, zinc etc., supplementing diets for the poor, fortifying processed foods, encouraging greater agricultural and dietary diversity is crucial. It needs a strong coordination between health and agriculture.

Eminent media personality and agriculture development activist Shykh Seraj, who also runs a programme designed to provide primary healthcare services and awareness for farmer in association with Japan Bangladesh Friendship Hospital said that the level of aware-

ness on basic healthcare among farmers is extremely low. As there is no distinct health awareness programme for farmers, they do not know how to protect them from occupational health hazards and reluctant to access healthcare when needed. Integration of health and agriculture policy will improve both sectors.

Experts urged that it is the high time to develop the framework and national policy in order to identify the common process mediating the relationship between agricultural supply chain and different health conditions.

Farmers, the backbone of the economy are mostly poor and solely depend on agriculture for their livelihoods, including the income needed to buy health services. Threats to agriculture become threats for health as well. Government, institutions, individual — all should work together to bring agriculture and health under common platform for the betterment of livelihood and lifestyle.

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## Know your Doctor!

KAZI RAQUIBUL ISLAM

You have got a disease (do not panic, but imagine!). So, you should go to a doctor for treatment purpose. Medical terms are complicated that you often get confused which type of physician you should consult with. But when they are broken up into their root parts (mostly Greek and Latin) they become comparatively simple.

The following includes the lists of doctors describing their fields so that you should know where to go.

**Cardiologist:** 'Cardio' means heart while 'Logos' means knowledge. So a person who is expert in the diagnosis and treatment of the heart is a Cardiologist.

**Dentist:** 'Denti' means tooth. So for the treatment needed for your teeth, you should go to a dentist.

**Dermatologist:** 'Derm/Dermat' means skin. So a dermatologist is a specialist of skin disease.

**Gastroenterologist:** 'Gastro' means stomach while 'Entero' means intestine. A Gastroenterologist treats patient having difficulty in his/her stomach or intestine or both.

**Haematologist/Hematologist:** 'Haem/Hem' means blood. A haematologist is that specialist who treats blood related diseases.

**Hepatologist:** 'Hepato' means liver. A hepatologist is a specialist in liver and gall-bladder disease.

**Nephrologist:** 'Nephro' means kidney. So should go to a nephrologist when you have difficulty in your kidney (Generally urine related).

**Neurologist:** Neuron is the main unit of the brain. A neurologist treats neuron



related diseases.

**Oncologist:** 'Onco' means cancer. An oncologist is a cancer specialist.

**Ophthalmologist:** 'Ophthalmo' means eye. An ophthalmologist treats disease of eye.

**Orthopaedic surgeon:** 'Ortho' means straight while 'Paedi' means child. Etymologically it is meant straight-child. But an orthopaedic surgeon is a surgeon dealing with straightening bones — that means dealing with the disease of the bones!

**Psychiatrist:** 'Psych' means mind. A psychiatrist deals patients having mental illness.

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## Breastfeeding for a month cuts mom's diabetes risk

REUTERS HEALTH, New York

Mothers who don't breastfeed their newborns for at least one month are more likely to develop type 2 diabetes at some point in their lives than women who do, a Pennsylvania study finds.

Previous research demonstrated health benefits to moms who breastfed as long as six months or a year. The Pennsylvania results suggest that even a month of breastfeeding can have positive, lasting effects.

"What we found that was somewhat surprising was the pretty dramatic benefits for moms who breastfed as short as a month after the birth of their child," the lead author, Dr. Eleanor Schwarz

of the University of Pittsburgh, told.

In type 2 diabetes, the most common form of the disease, either the body does not produce enough insulin or the cells ignore the insulin that the body needs to turn food into energy.

The researchers found that 26.7 percent of the study mothers who did not breastfeed their infants later went on to develop diabetes compared to 18 percent of women who exclusively breastfed their newborn at least one month and 17.5 percent of women who never had children.

The findings "highlight the importance to maternal health of consistent lactation after each birth" and

add to the growing body of evidence that not breastfeeding might add to health risks.

"Women who give birth but do not breastfeed face an increased risk of developing type 2 diabetes," the authors conclude.

Why this is so, they point out, is not known. Animal studies have shown that the formation and secretion of milk by the mammary glands (lactation) may itself start biological processes that increase sensitivity to insulin and reduce the formation of belly fat.

"Breastfeeding is part of the normal recovery process" from pregnancy and giving birth, Schwarz said.

The study results tell new mothers that they can do something for their own health by breastfeeding for at least a month, Schwarz said. The authors also have a message for moms who, for whatever reason, never breastfed their children.

The authors urge "ongoing support of breastfeeding" from doctors, legislators and employers.

Source: The American Journal of Medicine



## Health Ministers from South-East Asia highlight challenges to health

STAR HEALTH REPORT

Health Ministers from WHO's South-East Asia Region met at the 28th Meeting of Ministers of Health in Bangkok to review health development in the Region, identify challenges and provide policy direction for future action on health issues, says a press release.

Health is at the nexus of interrelated trends such as rapid and often unplanned urbanisation, climate change, and a huge burden of injuries from road accidents and other causes. The ministers underscored the need for urgent action to improve urban health; they also adopted the Bangkok Declaration on "Urbanisation and health".

WHO Director-General Dr Margaret Chan said, "Urban poverty and squalor are strongly linked to social unrest, mental disorders, crime, violence, and outbreaks of disease associated with crowding and filth." Describing health inequalities as an excellent social accountant, she added, "Poor health, including mental health, is one of the most visible and measurable expressions of urban harm."

Dr Samlee Plianbangchang, WHO Regional Director for South-East Asia, informed that Thailand has developed a tool guide for furthering the work on community empowerment, which is the essence of Primary Health Care development. The Bangkok Declaration on "Urbanisation and health" was adopted by the health ministers in recognition that unplanned urbanisation has major impacts on public health.

## Knowing for better living

In Bangladesh...

**900** children die of malnutrition everyday!

Ensure breast-feeding for your child

Ensure proper nutrition for your child

Ensure proper care for pregnant mother

Ensure vaccination on time for your child

Consult your Doctor



Courtesy...

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