

Stop tobacco industry interference



STAR HEALTH DESK

Despite knowing the harm tobacco causes to human health for decades, the tobacco industry has energetically promoted tobacco sale. Dependency on tobacco is engineered, especially in the case of smoking, by carefully-prepared formulations of more than 1,000 chemicals and other ingredients. The tobacco industry markets a product that, unlike other legally sold goods, kills up to half of its regular users when consumed as per the directions of the manufacturer.

Tobacco kills by causing cancer, heart disease, stroke, respiratory diseases and by many

other ways. The global tobacco epidemic kills nearly 6 million people each year, of which more than 600,000 are people exposed to second-hand smoke or passive smoke. Almost half of all children regularly breathe air polluted by tobacco smoke and more than 40% of children have at least one smoking parent. It also impinges economic burden by increasing huge cost of ailments related to tobacco.

The number of deaths will increase up to 8 million people by 2030, of which 4 out of 5 of these deaths occurring in low- and middle-income countries like Bangladesh. The World Health Organisation (WHO) has selected

"tobacco industry interference" as the theme of the 2012 World No Tobacco Day, which was observed on May 31 this year.

Article 5.3 of the WHO FCTC urges countries to protect public health policies from commercial and other vested interests of the tobacco industry. In the recent years, the tobacco industries have been shamelessly fuelling its marketing by using tactics including: maneuvering to hijack the political and legislative process, exaggerating the economic importance of the tobacco industry, manipulating public opinion to gain the appearance of respectability, fabricating support through

front groups, discrediting proven science, intimidating governments with litigation or the threat of litigation.

Experts from WHO urged national leaders and policy makers resist these tactics and use the full force of the convention to protect the hard won gains to safeguard people's health from the scourge of tobacco.

In line with article 5.3, countries can adopt other measures: limit interactions and disclose all meetings with the tobacco industry; reject partnerships and non-binding agreements with the industry; refuse funds and other support, and reject industry endorsement and participa-

tion in youth initiatives, etc.

WHO also said that countries should not grant incentives, privileges or benefits to the tobacco industry, such as subsidies or tax exemptions, and should create firewalls against the interference of the tobacco industry in public health, including state-owned tobacco companies.

WHO urged countries to put the fight against tobacco industry interference at the heart of their efforts to control the global tobacco epidemic. Let us resist the industry's attacks and create a tobacco-free world.

Source: WHO

RIGHT WAY

Never brush your teeth just after a meal

Most of us believe that proper dental care means flossing and brushing often — at a minimum, twice daily. Those who are particularly diligent may brush more often, after meals, snacks or sugary drinks.

But research shows that brushing too soon after meals and drinks, especially those that are acidic can do more harm than good. Acid reflux poses a similar problem: While it might seem like a good idea to brush after a reflux episode, doing so can damage your teeth.

Acid attacks the teeth, eroding enamel and the layer below it, called dentin. Brushing can accelerate this process. With brushing, you could actually push the acid deeper into the enamel and the dentin.

Researchers suggest that we should not brush immediately after an acidic meal or drink. It is always to wait at least 30 minutes. In the meantime, to get rid of acid, they suggested rinsing the mouth out with water or using an acid-neutralizing mixture: one part baking soda, eight parts water.

Source: The New York Times

HEALTH bulletin



Calcium pills pose 'heart risk'!

People who take calcium supplements could be increasing their risk of having a heart attack, according to researchers in Germany.

Calcium is often taken by older people to strengthen bones and prevent fractures. But the study, published in the journal Heart, said the supplements "should be taken with caution".

Experts say promoting a balanced diet including calcium would be a better strategy.

Male pill: gene discovery may lead to contraceptive

It may be possible to develop a new male contraceptive pill after researchers in Edinburgh identified a gene critical for the production of healthy sperm.

Experiments in mice found that the gene, *Katnal1*, was vital for the final stages of making sperm; so a drug which interrupts *Katnal1* could be a reversible contraceptive.

A fertility expert said there was "certainly a need" for such a drug. Contraception in men is largely down to condoms or a vasectomy.

The findings came out of infertility research by the researchers at the Centre for Reproductive Health at the University of Edinburgh.

Source: BBC

Asthma, a neglected priority needs attention

STAR HEALTH DESK

Despite the call for a massive scale-up of efforts to address non-communicable diseases which include asthma, there has been no sign of any new international mechanisms for funding the start-up of proper asthma management programmes with quality-assured essential medicines.

Asthma affects around 235 million people worldwide. Most asthma-related deaths occur in low- and lower-middle income countries.

Asthma is a chronic disease characterised by recurrent attacks of breathlessness and wheezing, which vary in severity and frequency from person to person. Symptoms may occur several times in a day or week in affected individuals, and for some people become worse during physical activity or at night.

Asthma cannot be cured, but proper diagnosis, treatment and patient education can result in good asthma control and management. For effective control, it is essential to make medications affordable and available.

In many low- and middle countries, the large majority of asthma patients are only treated on an emergency basis — when they arrive at a hospital with an acute attack of asthma. Part of the problem in these countries is that quality-assured asthma inhalers, especially the inhaled corticosteroids that are essential for life long to well-managed asthma, are not available. If they are available, the cost is usually prohibitively expensive. Another barrier is: the health services lack the strategy, systems and trained staff for providing good asthma care.

Experts urged to set up sustainable financing strategies for asthma medicines. Some pilot projects in low-income countries show that asthma can be addressed effectively. The International Union Against Tuberculosis and Lung Disease (The Union) has been working for long to scale up asthma care and make quality-assured essential asthma medicines and asthma care accessible for all. But a coordinated approach is needed to make asthma care, a priority and place in the centre of fight against non-communicable diseases.



ANNOUNCEMENT

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NEWS IN FRAME



Cardiac cath lab started to operate in Khulna Shaheed Seikh Abu Naser Specialised Hospital. Now Patients of south Bengal will have access to world class interventional cardiology.



Expert in the Apollo Heart Centre has recently used a better technique to unblock an artery (blood vessel) in the abdomen. Dr Tamzeed Ahmed (left), Senior Cardiology Consultant of Apollo Heart Centre put a stent to pop open the main blood vessel supplying blood to lower limbs (abdominal aorta). This procedure was done through radial route (through the artery by wrist), which is a modern and less hazardous technique used by expert cardiologists to stent artery to heart.

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