

The Lancet Bangladesh Series

# Exceptional achievement despite chronic poverty

STAR HEALTH REPORT

Exceptional improvements in the survival of infants and children under 5 years of age, life expectancy, immunisation coverage and tuberculosis control in Bangladesh are part of a remarkable success story for health in the South Asian countries, according to a major new series published in The Lancet. This is despite low spending on healthcare, a weak health system and widespread poverty. The Lancet is one of the most prestigious and leading medical journals of the world and believed to be the most persuasive scientific heritage to guide and influence public health policies and strategies of the future. "Over the past 40 years, Bangladesh has outperformed its Asian neighbours, convincingly defying the expert view that reducing poverty and increasing health resources are the key drivers of better population health", explains Series co-leader Professor Mushtaque Chowdhury from BRAC in Dhaka, Bangladesh. "Since 1980 maternal mortality has dropped by 75%, while infant mortality has more than halved since 1990, and life expectancy has increased to 68.3 years — surpassing neighbouring India and Pakistan."

According to the series, what sets Bangladesh apart is its pluralistic health system in which many stakeholders including the private sector and NGOs have been encouraged to thrive and experiment. This has led to rapid improvements in access to essential services such



A health worker on an NGO in Sylhet district is following up the health status of a neonate along with counselling the mother.

as diarrhoea treatment, family planning, vitamin A supplementation, and vaccination coverage.

"Promoting an open culture of research-based innovation has made Bangladesh a pioneer in scaling up community-based approaches that have brought key health interventions to every household, making huge inroads into improving maternal and child health and reducing population growth", explains Series co-leader Professor Abbas Bhuiya from ICDDR,B.

One striking example is tuberculosis treatment. By mass deployment of community health workers, cure rates escalated from less than 50% to more than 90% — among the highest in the world.

Another is contraceptive use. By recruiting female health workers to deliver door-to-door family planning services, Bangladesh has achieved high (62%) contraceptive prevalence and a rapid fall in fertility from 6.3 births per woman in 1971 to 2.3 in 2010 — a rate unparalleled in other countries with similar levels of development.

Less successful have been attempted improvements in poverty reduction, maternal and child malnutrition and access to primary care. "The stark reality is that prevalence of malnutrition in Bangladesh is among the highest in the world. Nearly half of children have chronic malnutrition. Moreover, over a third the population (more than 47

million) live below the poverty line, and income inequality is widening", says Professor Bhuiya.

Additionally, more needs to be done to address the poorly-equipped public health sector which, although free to the poor, faces a reported shortage of 800000 doctors and nurses. They point out that every year 4–5 million people are pushed into poverty because they have to pay for health services directly, partly due to the rapid growth of the unregulated, low-quality, high-cost private sector.

"Arguably the most daunting challenge is the health of poor people living in urban areas", says Professor Chowdhury. "In the last 40 years, the proportion of the population living in urban areas has risen from around 5% to 28%. This is projected to grow to more than 50% by 2050 — roughly 100 million people — putting tremendous pressure on already inadequate water, sanitation, and primary health-care services."

Shamim Ahmed, an author of the special Lancet series said, "This is certainly a logical concern that if equity fails to take its due place in the development process then the targeted sustainability will be heavily flawed and will corrupt the system that considers only number of cases reduced or per capita income increased!"

The authors conclude by setting out a plan to create a second generation of health-system innovations that will guide Bangladesh towards universal health coverage.

## HAVE A NICE DAY

### Enjoying growing old-2

Studies show that older people have fewer rows and come up with better solutions to conflict. But try to choose a job you enjoy; even the return is poor. Avoid back-handed compliments (like, when you were young you were handsome/ beautiful!!). Keep in your mind that you are still beautiful — 'Gracefully aged' — it has an awesome attractiveness. Well, maintain your health first. Listen to your body. That is the most important part. Your joints may give more accurate forecasts before going to a doctor. And always remember overweight is the mother of all culprits. Look at the following 5 points:

1. Drink plenty of liquids. It could be water, coconut water (not too much), soup, fruit / vegetable juice (home made) and low fat milk. Don't wait until you feel thirsty as with age, you may lose some of your sense of thirst. You can drink a glass of water before walking or working.
2. Eating more fiber (whole grains, vegetables, beans, nuts, seeds and fruits) might prevent stomach or intestine problems — from constipation to cancer. It is better to start adding fiber slowly. Make sure at least half of your grains are whole grains. Leave skins on your fruit and vegetables if possible. Eat many different colors and types of vegetables and fruits.
3. The usual way people get sodium is by eating salt. The body needs sodium, but too much can make blood pressure go up in some people. Most fresh foods contain some sodium, especially those high in protein. If you are 50 or above, about 2/3 of a teaspoon of table salt (1,500 mg sodium) is all you need each day. That contains all the sodium in your food and drink, not just the salt you add. Ban table salt — make it a habit. Eat fewer salty snacks (like potato chips).
4. Eat only small amounts of solid fats and foods with added sugars. Limit saturated fat (found mostly in foods that come from animals) and trans fats. Fat in your diet comes from two places — the fat already in food and the fat added when you cook. Fat gives you energy — but it varies from one to one (whether you are fat or not). To lower the fat in your diet, choose fat free parts of meat, fish, or poultry (with the skin removed). Be careful about salad dressings with mayonnaise or something like that. Prefer healthy oil for cooking. Avoid fried items. Try to bake, steam or boil them. Buy sugar free breads.
5. Walk more, anywhere you like. No need to run. Aim for at least 150 minutes of physical activity each week. Ten-minute sessions several times a day on most days are fine. Go for shopping, to the park and get free hand-exercise. Get a nap. And take your medications. Drink water after pills as those are all 'chemicals'. Keep in touch with helpless friends and people. Pray more. Exchange your views softly. Read more and worry less.



Dr Rubaiul Murshed

## HEALTHbulletin



### Older men who walk daily may lower their stroke risk

Older men who walked at least one to two hours each day compared to less than half an hour per day had a reduced risk of stroke, in a large population-based study reported in the American Heart Association journal Stroke.

### Women with asthma may take longer to get pregnant

Women with asthma seem to experience delays in getting pregnant, Danish researchers report in the European Respiratory Journal.

Whether this trend is because asthma has a direct biological effect on fertility or because having asthma reduces the frequency of intercourse is not clear, however, the researchers said.

## Adolescent pregnancy and associated risks

STAR HEALTH DESK

Adolescent girls who give birth each year have a much higher risk of dying from maternal causes compared to women in their 20s and 30s. These risks increase greatly as maternal age decreases, with adolescents under 16 facing four times the risk of maternal death as women over 20. Moreover, babies born to adolescents also face a significantly higher risk of death compared to babies born to older women.

About 16 million adolescent girls aged 15-19 give birth each year, roughly 11% of all births worldwide. Almost 95% of these births occur in developing countries. Bangladesh is one of the seven countries where half of all adolescent births takes place.

About 75% of adolescent pregnancies are intended due to social and cultural norms or because unmarried young women see it as their only means of establishing identity. Worldwide, births to unmarried adolescent mothers are far more likely to be unintended and those outside marriage are more likely to end in abortion. A small but significant percentage of adolescent pregnancies result from non-consensual sex.

Despite the downward trend in developed world, adolescent



pregnancy remains very prevalent, particularly in the poorest countries. Adolescent childbearing has a negative impact on these three dimensions: health of the adolescents and their infants; individual social and economic effects; and societal level impacts.

Conditions associating adolescent childbearing and maternal health problems include obesity, anemia, malaria, STIs, mental

illness, unsafe abortion complications, and obstetric fistula. Accounting for about 11% of all births worldwide, maternal conditions in adolescents cause 13% of all deaths and 23% of all disability adjusted life years. Studies have shown rates of newborn death to average about 50% higher to adolescent mothers versus mothers in their 20s.

Studies have also shown that delaying adolescent births could significantly lower population growth rates, potentially generating broad economic and social benefits.

We can prevent adolescent pregnancy by mass awareness, increase access to contraception and can reduce complications related to pregnancy by proper care. Mothers and babies need care in pregnancy, for childbirth and after birth. It must be delivered as a continuum of care that starts in the household and community and extends into the healthcare system, including care for complications.

Making pregnancy safer for the youngest mothers and their babies is a priority for countries as they strive to meet targets for improving basic health care. Maternal and newborn health programmes have a clear role in better serving the needs of the youngest mothers.

Source: World Health Organisation

## Apollo completes 15 yrs of liver transplantation

The Apollo Transplant Institute, under the aegis of the Apollo Group of Hospitals, marks its 15th anniversary of having conducted India's first successful liver transplant in November 2013, says a press release.

The Apollo solid organ transplant programme has registered unprecedented growth to become the world's busiest solid organ transplant programme with 1200 transplants in 2012. The Hospitals has successfully completed 30 livers transplants programme for Bangladeshi patients till date.

Speaking on the occasion, Dr. Anupam Sibal, Group Medical Director and Senior Consultant Paediatric Gastroenterologist at Apollo Hospitals, Delhi and part of the team responsible for the first successful liver transplant said, "when we started our liver transplant programme in 1998, little did we realise that we could make such a big difference and become the busiest solid organ transplant programme in the world."

/StarHealthBD

## Knowing for better living

### In Bangladesh

### Anemia affects

46% of pregnant women

&

33% of non-pregnant women

Take plenty of Iron and Vitamin rich foods like fish, meat, fruits and green leafy vegetables.

Take care of pregnant women to ensure Iron and Vitamin rich diet everyday.

Consult your Doctor.



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