

Progress in malaria and future challenges

STAR HEALTH DESK

Global efforts to control and eliminate malaria have saved an estimated 3.3 million lives since 2000, reducing malaria mortality rates by 45% globally, according to the World Malaria Report 2013 published recently by the World Health Organisation (WHO).

An expansion of prevention and control measures has been mirrored by a consistent decline in malaria deaths and illness, despite an increase in the global population at risk of malaria between 2000 and 2012. Increased political commitment and expanded funding have helped to reduce incidence of malaria by 29% globally, and by 31% in Africa. But there is still a huge scope for further progress and more needs to be done.

Malaria prevention suffered a setback after its strong build-up between 2005 and 2010. The new WHO report notes a slowdown in the expansion of interventions to control mosquitoes for the second successive year, particularly in providing access to insecticide-treated bed nets. This has been primarily due to lack of funds to procure bed nets in countries that have ongoing malaria transmission.

Only 70 million new bed nets were



delivered to malaria-endemic countries in 2012, below the 150 million minimum needed every year to ensure everyone at risk is protected. However, in 2013, about 136 million nets were delivered, and the pipeline for 2014 looks even stronger (approximately 200 million), suggesting that there is real chance for a turnaround.

There was no such setback for malaria diagnostic testing, which has continued to expand in recent years. Between 2010 and

2012, the proportion of people with suspected malaria who received a diagnostic test in the public sector increased from 44% to 64% globally.

Access to WHO-recommended artemisinin-based combination therapies (ACTs) has also increased, with the number of treatment courses delivered to countries rising from 76 million in 2006 to 331 million in 2012.

Despite this progress, millions of people

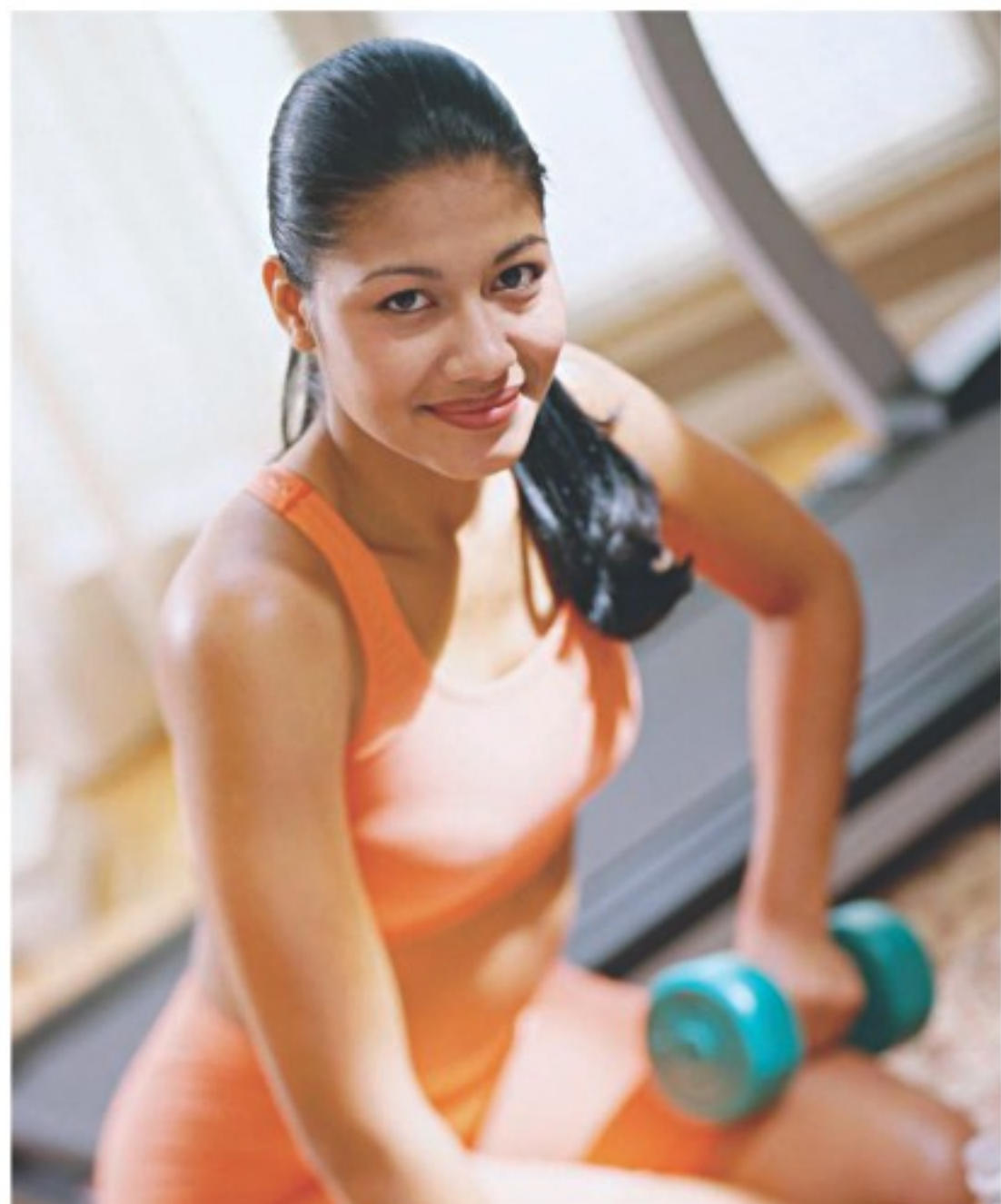
continue to lack access to diagnosis and quality-assured treatment, particularly in countries with weak health systems. The roll-out of preventive therapies — recommended for infants, children under 5 and pregnant women — has also been slow in recent years. In order to win this fight, sustainable and increased the International funding for malaria control is crucial.

Without adequate and predictable funding, the progress against malaria is also threatened by emerging parasite resistance to artemisinin, the core component of ACTs, and mosquito resistance to insecticides. Artemisinin resistance has been detected in 4 countries in south-east Asia, and insecticide resistance has been found in at least 64 countries. Although international funding has increased from less than US\$ 100 million in 2000 to almost US\$ 2 billion in 2012, it is less than half the US\$ 5.1 billion needed each year to achieve universal access to interventions.

Dying from mosquito bites is one of the greatest tragedies of the 21st century. To win the fight against malaria we need to ensure everyone has the access to diagnosis, treatment and prevention tools.

Source: World Health Organisation

HEALTHbulletin



Exercise later in life tied to healthy aging

It is never too late to start exercising, according to a new study published in British Journal of Sports Medicine that found formerly inactive seniors who took up exercise still experienced health benefits.

Screen time again linked to kids' extra weight

Children and teenagers who spend lots of time in front of screens — especially TVs — tend to gain more weight as they age, according to a new study published in the journal Paediatrics.

Researchers said that when kids watch TV, there is more purposeful, deliberate exposure to eating options, commercials that come on that might cue you to go off to the pantry and grab a cookie or a soft drink.

Common problems of children in winter

PROF M KARIM KHAN

November and December are the month for annual exam of children. Now a days even the students of kinder garden faces exams in many subjects. After exam they usually go out for travel in different places along with parents. So November and December are important months for the children as well as for the parents. But unfortunately during these months many diseases may put them in trouble.

Common diseases that occur in children during winter include Bronchiolitis, Pneumonia, Asthma, Sore throat and fever, Rhinitis, Flu, winter diarrhoea, Scabies etc.

Bronchiolitis: It is the commonest respiratory problem of children younger than 2 years. After mild coryza, cough, runny nose, the young healthy child starts respiratory distress. There are hurried respiration along with wheeze and chest in-drawing. Fever may or may not be present. Babies are not toxic. They may have feeding problem. It mimics Pneumonia but actually it is not Pneumonia.

It is a viral disease and the commonest cause is respiratory syncytial virus. It is a contagious disease. Humidified oxygen is the ideal treatment option for this disease.

Pneumonia: Another common and relatively serious disease of children is Pneumonia. Fever, cough, respiratory distress with some toxicity is the usual presenting feature in this disease. X-ray confirms the diagnosis.

It may occur due to bacteria or viral infection. In children mainly

due to bacteria, early diagnosis and prompt antibiotic treatment are necessary to cure the disease. Hib and Pneumococcal vaccine may help to reduce the incidence by developing immunity.

Asthma: Winter is not the cause of Asthma but during winter dust, pollens are abundant and they provoke Asthma attack. Chronic cough, wheeze, respiratory distress, chest tightness may need immediate treatment for relief.

Salbutamol inhalation alone is enough in intermittent Asthma. But in mild or moderate persistent Asthma, some steroid inhalation is necessary along with Salbutamol inhalation. In severe Asthma, hospital management is mandatory. Montelukast for prolong time may reduce the attack.

Rhinitis and Influenza: They are very common viral disease in winter. Symptomatic treatment with Paracetamol and antihistamins is needed. Sometimes nasal decongestant drops may be used. Antibiotic usually does not have any role. It takes 5-7 days to be cured. Hand washing and strict maintenance of personal hygiene may help to reduce the spread of the disease.

Tonsillitis and Pharyngitis: Fever, throat pain, malaise, headache and difficulty in feeding arouse the suspicion of the condition.

By inspecting the oral cavity and pharynx, diagnosis can be done confidently. Ten days Penicillin or Amoxicillin is necessary to get rid off the disease. If not given proper and prompt attention Acute Glomerulonephritis (AGN), a common kidney disease of children or Rheumatic fever may develop in

the long run as complication.

Winter diarrhoea or Rotavirus diarrhoea: Frequent passage of liquid watery corn soup like stool with development of dehydration is the presenting feature of this disease. It may be accompanied by vomiting and fever. Correcting dehydration by oral rehydration saline (ORS) is the mainstay of treatment. Breast milk should be continued if the baby is on breastfeeding. But if the baby becomes lethargic, s/he may need hospitalisation for intravenous saline.

Antibiotic has no role, as it is a viral disease. Rotavirus vaccine and proper hand washing may help in preventing the disease.

Scabies: Intense itching with burrows and scratches in between fingers, armpit, genital region and in other parts of the body is not uncommon in winter. Scabies is a contagious disease caused by mites.

It need treatment of all the family members at a time. Simple 5% Permethrine cream application solve the problem. Personal hygiene is important to prevent the spread.

Cleaning the used clothes with soap water and ironing them properly reduces the spread of the disease.

Take care of your children. Teach them to maintain personal hygiene. Ask them to make a habit of hand washing. Breast milk, vaccination and proper nutrition are important to prevent many disease. Be happy and healthy.

The writer is a Professor of Paediatrics at Community Based Medical College (CBMC), Mymensingh. E mail: mmukkh@gmail.com

QUIT SMOKING



10 ways to stop your smoking habit

For most tobacco users, tobacco cravings or urges to smoke can be powerful. But you are not at the mercy of these tobacco cravings. When an urge to use tobacco strikes, remember that although it may be intense, it will be short-lived, and it probably will pass within a few minutes whether or not you smoke a cigarette or take a dip of chewing tobacco. Each time you resist a tobacco craving, you are one step closer to stopping smoking or other tobacco use for good. It can be difficult but not impossible.

So here are 10 ways to help you resist the urge to smoke or use tobacco.

- 1. Delay.** If you feel like you are going to give in to your tobacco craving, tell yourself that you must first wait 10 more minutes and then do something to distract yourself for that period of time. This simple trick may be enough to derail your tobacco urge. Repeat as often as needed.
- 2. Don't have 'just one.'** You might be tempted to have just one cigarette to satisfy a tobacco craving. But don't fool yourself into believing that you can stop at just one. More often than not, having just one leads to another, then another — and you may wind up using tobacco again.
- 3. Avoid triggers.** Urges for tobacco are likely to be strongest in the situations where you smoked or chewed tobacco most often, such as at parties or functions, in the car or while watching television or giving adda. Identify your trigger situations and have a plan in place so that you can avoid them entirely or get through them without using tobacco. Don't set yourself up for a smoking relapse. If you usually smoked while you talked on the phone, for instance, keep a pen and paper nearby to occupy yourself with doodling rather than smoking.
- 4. Get physical.** Physical activity can help distract you from tobacco urge and reduce the intensity of cravings. Just 30 minutes of moderate physical activity can make a tobacco craving go away. Get out for a walk even in the office. If you are stuck at home, try squats, deep knee bends, push-ups, running in place, or walking up and down a set of stairs a few times. If physical activity does not interest you, try prayer, writing or reading books.
- 5. Practice relaxation techniques.** In the past, smoking may have been your way to deal with stress. Trying to resist a tobacco craving can itself be stressful. Take the edge off stress by practicing relaxation techniques. These include deep-breathing exercises, muscle relaxation, yoga, and massage.
- 6. Call reinforcements.** Spend more times with family member, friends or relative for moral support as you struggle to resist a tobacco craving. Chat on the phone, go for a walk together or simply share a few laughs.
- 7. Remember the benefits of quitting.** Write down or say out loud the reasons you want to stop smoking and resist tobacco cravings. These might include feeling better, getting healthier, sparing your loved ones from secondhand smoke or saving money.
- 8. Go online.** Join an online stop-smoking programme. Go to Google and type quit smoking or stop smoking you will get lot of information which might help you in quitting.
- 9. Try nicotine replacements.** Try a nicotine replacement product instead of a cigarette. Some types of nicotine replacement therapy, including patches, gums and lozenges may get in local market or you can bring it from any country by your relatives abroad, these are available over-the-counter.
- 10. Chew on it.** Give your mouth something to do to fight a tobacco craving. Chew on sugarless gum or labanga, elachi etc.

Remember, trying something to beat the urge is always better than doing nothing. And each time you resist a tobacco craving, you are one step closer to being totally tobacco-free. It is never too late to stop, so please try it from today.

  /StarHealthBD

Knowing for better living

7 serious symptoms in children to never ignore !

1. High fever
2. Skin infections or rashes
3. Frequent sore throats
4. Breathing problems
5. Severe stomach bug
6. Stiff neck
7. Sleep problems or change in behaviour

Ensure healthy foods for children

Ensure enough sleep and exercise

Ensure child's physical, mental & social well-being

Keep children safe



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