

Overweight and obesity soaring among Bangladeshi adult

STAR HEALTH REPORT

Over the last 33 years, rates of either being overweight or obese doubled among Bangladeshi adults but remained low among children, according to a new, first-of-its-kind analysis of trend data from 188 countries.

In 1980, 7% of adults and 3% of children were overweight or obese. In 2013, those rates had climbed to 17% for adults but only 4.5% for children. These findings were revealed in a study entitled, "Global, regional, and national prevalence of overweight and obesity in children and adults during 1980–2013: a systematic analysis for the Global Burden of Disease Study 2013," conducted by an international consortium of researchers led by the Institute for Health Metrics and Evaluation (IHME) at the University of Washington was recently published in The Lancet.

Overweight is defined as having a Body Mass Index (BMI), or weight-to-height ratio, greater than or equal to 25 and lower than 30, while obesity is defined as having a BMI equal to or greater than 30.

"Bangladesh has lowered the rates of death from infectious diseases, childhood causes of death and complications during



pregnancy," said Dr. Aliya Naheed, Associate Scientist at the International Centre for Diarrhoeal Disease Research in Bangladesh and one of the paper's co-authors.

"For overweight and obesity to be rising to the point where nearly 1 in 5 adults are too heavy, we must look for ways to change

behaviour and change policy."

Of the 17% of overweight or obese adults in Bangladesh, just 4% were obese, and obesity rates in Bangladesh are increasing at a slower pace. From 1980 to 2013 obesity rates in adults grew from 2% to 4%, and rates in children and adolescents remained at about 1.5%.

While the percentage of people worldwide who are either overweight or obese has risen substantially over the last 30 years, there have been marked variations across regions and countries. In developed countries, increases in obesity that began in the 1980s and accelerated from 1992 to 2002 have slowed since

2006. Conversely, in developing countries like Bangladesh increases are likely to continue.

Health risks such as cardiovascular disease, cancer, diabetes, osteoarthritis, and chronic kidney disease increase when a person's BMI exceeds 23.

In 2010, obesity and overweight were estimated to have caused 3.4 million deaths globally, most of which were from cardiovascular causes. Research indicates that if left unchecked, the rise in obesity could lead to future declines in life expectancy.

"Being overweight carries significant health risks, and those risks are greatly increased for obese individuals," said Alan Lopez, Laureate Professor at the University of Melbourne and a co-founder of the Global Burden of Disease (GBD) study. "Unlike tobacco control, there is very little evidence that public health campaigns or industry regulatory mechanisms are yet having an impact. Health authorities across Asia need to take the population health consequences of weight gain much more seriously."

Obesity and its complications may cause a huge economic toll to our resource-poor health system. It is the high time to be aware, to be active.

SMOKEFREE LAWS



STAR HEALTH REPORT

A guide published by the International Union Against Tuberculosis and Lung Disease (The Union) promoting best-practice in assessing compliance with smoke-free laws has been launched recently in Bangladesh along with some other countries, says a press release.

The guide offers how to advice on best practices for researchers, public health advocates and non-governmental organisations to ensure that smoke-free laws are implemented to the high degree needed to protect public health. Copies of the guide may be downloaded for free at www.tobaccofreeunion.org.

While 102 countries have now passed some level of smoke-free legislation, implementing thorough assessment and achieving high levels of compliance, continue to be major challenges for many governments.

The World Health Organisation identifies smoke-free policies as a critical strategy to reversing the tobacco epidemic, as well as reducing the harm caused by second-hand smoke - but it is essential to be able to measure how effectively they are being implemented, and to keep developing the legislation and improving its enforcement. Experts from Union opined that this step-by-step guide gave those responsible for assessing smoke-free compliance the latest and most practical insights we could draw from our work.

HEALTH bulletin

For obese diabetics, weight-loss surgery may work best

Compared to diet and lifestyle changes, gastric bypass surgery appears to be the clear winner in helping obese people with type 2 diabetes lose weight and even rid themselves of the disease, new studies published in the Journal of American Medical Association (JAMA) Surgery showed.

Stress could make weaker sperm

A small new study published in the journal Fertility and Sterility suggests that higher levels of stress may hurt the quality of men's sperm, potentially making it more difficult for them to impregnate women.

However, the findings are not definitive and do not prove cause-and-effect, since it is possible that stressed-out men share another trait that disrupts their reproductive systems.



Shaping midwifery to save lives

STAR HEALTH DESK

Every day, midwives around the world are to be thanked for their work in providing care to women and their newborns, in particular at the critical time around childbirth.

Much progress has been made in recent years in increasing access to skilled care at birth and the proportion of women who give birth in facilities. Nevertheless, every year, 2.9 million newborns die in the first month of life and another 2.6 million babies are stillborn with many of these deaths occurring around the time of birth. In addition, an estimated 2,87,000 women die as a result of pregnancy and childbirth. One of the most effective ways to prevent these deaths is to train midwives to tackle adverse conditions during the critical period.

Bangladesh has a severe shortage of trained midwives. Nationally, just 32% of women are looked after by skilled attendant while giving birth.

Shaping midwifery in providing quality of care around childbirth and the immediate postnatal period for saving the lives of women and newborns, and preventing stillbirths — is crucial and a triple return on investment.

Experts recognise that care for women and newborns — from before conception through the postnatal period — is best provided by a dedicated health professional qualified in midwifery, and that this care should be based on respect for the normal biological process of childbirth.



Professional midwives are uniquely placed to provide such care, working in teams with communities and specialists in order to create access and ensure timely recognition and management of complications when they occur.

Experts from the World Health Organisation (WHO) urged governments to allocate adequate resources for maternal and newborn health services within national health sector plans which should include funds for the training and retention of midwives. WHO recommended to ensure all women have access to sexual, reproductive, maternal and newborn services. These include issues such as preventive and supportive care from a collaborative midwifery team, immediate access to emergency services when needed, and completing post-secondary education. From a broader perspective, women should delay marriage, have access to healthy nutrition and receive four pre-

birth care visits.

Midwives are crucial to achieve the Millennium Development Goal (MDG) specially 4, 5 and 6. The key issue however, there is not enough midwives to these huge number of preventable deaths. In order to ensure high levels of coverage and quality care, an estimated 3,50,000 more midwives are still needed globally. To improve this situation and fill gaps in maternal and neonatal health provision, the Government of Bangladesh, supported by WHO and the UN Population Fund (UNFPA), is aiming to train 3,000 midwives by 2015.

Along with increasing their number, we should also ensure that they are properly trained and have a good environment to work. The challenge is also to ensure there are enough teachers with the right skills to keep developing the quantity and quality of midwives in Bangladesh.

Source: World Health Organisation

Roundtable Discussions

Prevention of needle stick injury

Needle stick injury poses a great risk for transmission of HIV/AIDS, hepatitis and other life threatening diseases to the healthcare workers.

With a view to finding an escape route of this problem, B. Brown a German medical company organised a roundtable at a local hotel in the city, says a press release.

Speakers urged the government to formulate legislation on needle stick prevention like many other countries including the USA and European Union.

Nutrition, gender & social accountability

The Global Alliance for Improved Nutrition (GAIN) recently organised a roundtable discussion on Nutrition, Gender and Social Accountability, says a press release. The roundtable provided insights of the issues relating nutrition with entitlement and social position of the marginalised particularly women, analysed multi-stakeholder interventions, governance and accountability.



/StarHealthBD

Knowing for better living

In Bangladesh ...

26.3% people are suffering from musculoskeletal pain !

Avoid heavy physical activities

Use firm mattress while sleeping

Keep your back straight while sitting on chair

Avoid standing at same position for a long time

Avoid smoking

Exercise regularly

Consult your doctor



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