

Simpler ovarian cancer testing saves lives

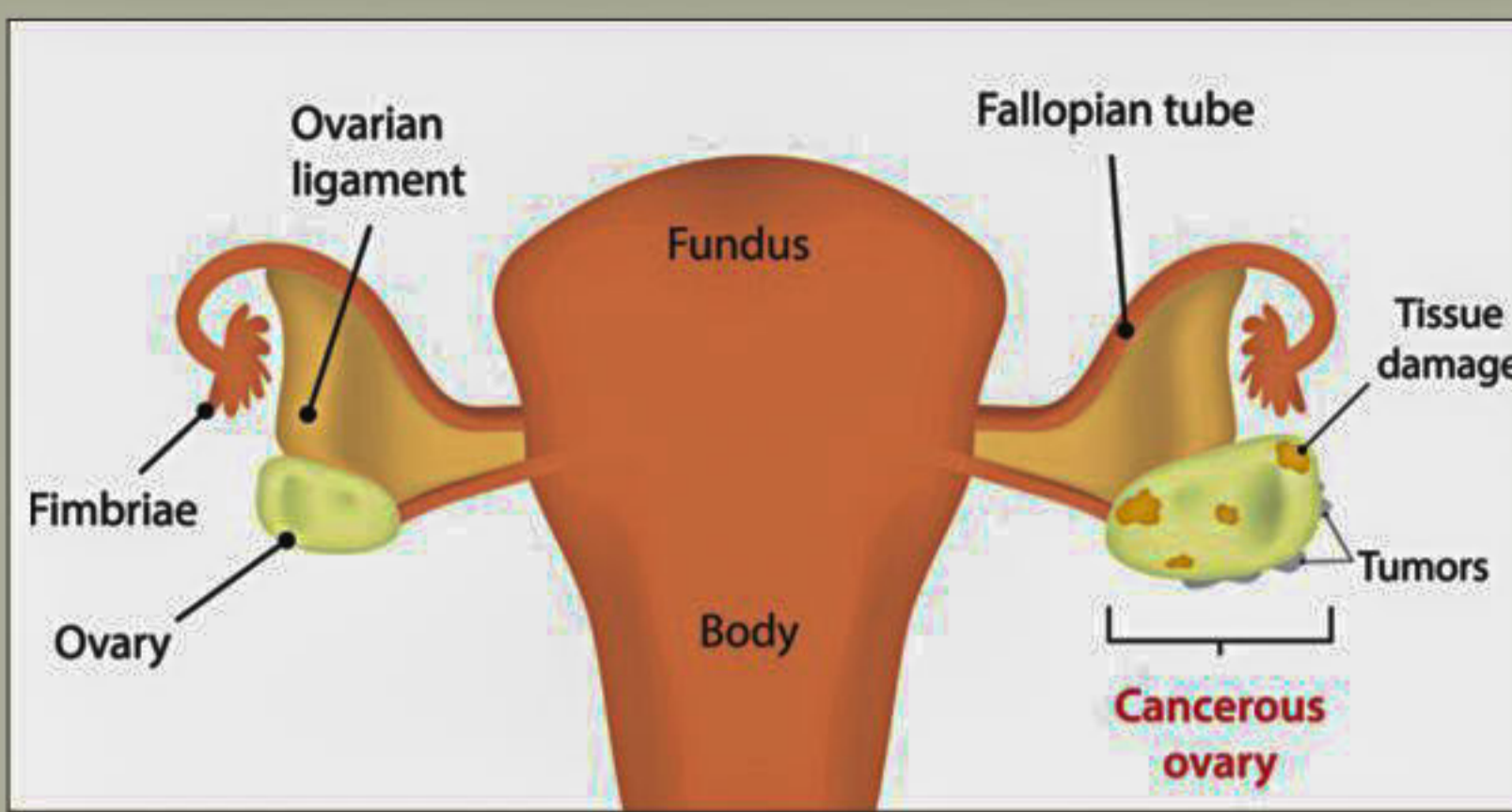
STAR HEALTH DESK

Simplifying the way ovarian patients are tested is a "win-win" that saves both lives and money, a study shows. Testing their DNA should identify the most effective drugs and finds out if other family members are at risk. Fewer than a third of patients are currently tested, but the team at the Institute of Cancer Research (ICR) in London made it easier for women and increased uptake to 100%, reports BBC.

Experts said the findings were an important step. The focus of testing is a set of genetic mutations which run in families called BRCA — they cause 15% of the 7,100 ovarian cancers detected in the UK each year. Knowing if the patient is in the 15% helps improve treatment as some chemotherapy drugs are more effective against tumours caused by BRCA mutations. And cancer drugs such as PARP inhibitors work only in women with BRCA mutations.

A tumour that is positive for BRCA is also an early warning to other family members that they may be at risk of developing ovarian, breast or prostate cancers.

Testing currently involves getting an appointment with a separate genetics team after being



TOP: A graphical representation of a part of female reproductive system showing healthy and cancerous ovary. LEFT: Prof Nazneen Rahman, Head of Genetics and Epidemiology at the Institute of Cancer Research, who led the trial, is a British national of Bangladeshi descent. Her research work has been directed towards mapping and identifying human disease genes, with her primary areas of research being breast, ovarian and childhood cancer susceptibility, and studies of human overgrowth.

diagnosed by a cancer doctor. The average wait is 12-15 weeks, the researchers say, and only a minority of women go for it.

The ICR team used advances in genetics testing — which is getting faster and cheaper — to offer screening with the original cancer doctor. Prof Nazneen Rahman, head of Genetics and Epidemiology at the Institute of Cancer Research, who led the

trial, informed: "It cuts off all that time on a waiting list and extra consultation. The feedback from patients has been overwhelmingly positive."

The results of the trial, published in the journal Scientific Reports, showed all patients had screening and got their results in a quarter of the time. It also estimated the National Health Service would save £2.6m a year

if it changed the way testing was offered.

Prof Rahman added: "There would be 283 fewer cancers and 77 fewer deaths a year - it really does save lives and money. It's very unusual to get a win-win all round that allows us to help more people but doesn't cost more." It is likely the approach would also work for other cancers, such as those in the breast.

Alexandra Holden, from the charity Target Ovarian Cancer, commented: "Any improved access to genetic testing for all women with ovarian cancer is an important step. It is essential that all women with ovarian cancer get genetic counselling, as we know from the women with ovarian cancer we support that there can be numerous, complex implications of a test, for all the family."

SYMPTOM CHECKER

Know your symptom of depression

Depression varies from person to person, but there are some common signs and symptom. It is important to remember that these symptoms can be part of life's normal lows. But the more symptoms you have, the stronger they are. Signs and symptoms of depression include:

Feelings of helplessness and hopelessness: A bleak outlook — nothing will ever get better and there is nothing you can do to improve your situation.

Loss of interest in daily activities: You don't care anymore about former hobbies, pastimes, social activities or even sex. You have lost your ability to feel joy and pleasure.

Appetite or weight changes: Significant weight loss or weight gain — a change of more than 5% of body weight in a month.

Sleep changes: Either insomnia, especially waking in the early hours of the morning or oversleeping.

Anger or irritability: Feeling agitated, restless, or even violent. Your tolerance level is low, your temper short and everyone gets on your nerves.

Loss of energy: Feeling fatigued, sluggish and physically drained. Your whole body may feel heavy and even small tasks are exhausting or take longer to complete.

Self-loathing: Strong feelings of worthlessness or guilt.

Reckless behaviour: You engage in escapist behaviour such as substance abuse, compulsive gambling, reckless driving or dangerous sports.

Concentration problems: Trouble focusing, making decisions or remembering things.

Unexplained aches and pains: An increase in physical complaints such as headaches, back pain, aching muscles and stomach pain.

If symptoms of depression are causing difficulties with relationships or work issues or causing family disputes and there is no clear solution to these problems, then you should seek help.

HEALTH bulletin



Pregnancy multivitamins are a waste of money!

Pregnancy multivitamins are a waste of money because most mothers-to-be do not need them, according to researchers.

In *Drug and Therapeutics Bulletin*, researchers say they looked at all evidence and found supplements did not boost the health of mothers and babies.

But pregnant women should make sure they take folic acid and vitamin D, as well as eating a well-balanced diet, they add. Supplements-makers said some women were not getting enough nutrients.

The researchers said folic acid had the strongest evidence to support its use — taking 400 micrograms a day can protect against abnormalities called neural tube defects in the developing baby. Vitamin D — 10 micrograms a day — is recommended for healthy bones in the mother and baby. A supplement that can be dangerous in pregnancy is vitamin A. Too much can harm the baby.

The researchers said pregnant women might feel coerced into buying expensive multivitamins in order to give their baby the best start in life. "The only supplements recommended for all women during pregnancy are folic acid and vitamin D, which are available at relatively low cost," they said.

Prospects for developing a cure or sustained remission for HIV

STAR HEALTH REPORT

Sixteen years ago, the historic 13th International AIDS Conference inspired a new paradigm for HIV treatment access that helped change the trajectory of the global AIDS epidemic.

This year, as 18,000 scientists, policymakers, advocates and people living with HIV return to Durban, South Africa, AIDS 2016 will highlight the latest accomplishments and challenges in a rapidly expanding area of scientific inquiry that few could have imagined at the first Durban conference — the prospect of developing safe, effective, and globally scalable approaches to

curing or achieving sustained remission of HIV infection.

"HIV cure research has the potential to alter the future of this epidemic," said Nobel Laureate Françoise Barré-Sinoussi, co-chair of the IAS Towards an HIV Cure Initiative. "With 37 million people currently living with HIV worldwide, and another 2 million newly infected each year, an effective approach to curing or achieving sustained remission of HIV infection would be a groundbreaking advance in global health.

Research to achieve such cures is in a formative stage, but significant advances are being made and will be explored in Durban at the fifth

annual Towards and HIV Cure Symposium, and with the release of the IAS Global Scientific Strategy: Towards an HIV Cure 2016."

"HIV cure research became a scientific reality with the launch of the first IAS Global Scientific Strategy: Towards an HIV Cure at AIDS 2012," noted IAS President Chris Beyrer. "Today, HIV cure research has come into its own as a top HIV research priority, marked by significant advances in our understanding of the scientific challenges and opportunities, more cure-focused research collaborations, and a new optimism that a cure or sustainable remission for HIV is feasible."



Health benefits of liquid gold

Honey is one of the oldest sweeteners on earth. Lucky for us, it also has many health benefits and uses. Read on for health benefits and uses for this golden sweetener.

Helps prevent cancer and heart disease: Honey contains flavonoids, antioxidants which help reduce the risk of some cancers and heart disease.

Reduces ulcers and other gastrointestinal disorders: Recent research shows that honey treatment may help disorders such as ulcers and bacterial gastroenteritis.

Increases athletic performance: Ancient Olympic athletes ate honey and dried figs to enhance their performance.

Reduces cough and throat irritation: Honey helps with coughs. In a study of 110 children, a single dose of buckwheat honey was just as effective as a single dose of dextromethorphan in relieving nocturnal cough.

Helix regulate blood sugar: Even though honey contains simple sugars, it is not the same as white sugar or artificial sweeteners. Its exact combination of fructose and glucose actually helps the body regulate blood sugar levels.

Heals wounds and burns: External application of honey has been shown to be as effective as conventional treatment with silver sulfadiazine. It is speculated that the drying effect of the simple sugars and honey's anti-bacterial nature combine to create this effect.

Is probiotic: Some varieties of honey possess large amounts of friendly bacteria. This includes up to 6 species of lactobacilli and 4 species of bifidobacteria. This may explain many of the mysterious therapeutic properties of honey.

Helps improve skin: Its anti-bacterial qualities are particularly useful for the skin, and, when used with the other ingredients, honey can also be moisturising and nourishing.



Group B Streptococcus, or *Streptococcus agalactiae*, is a type of bacteria that is naturally found in the digestive tract and birth canal in up to **1 in 4** pregnant women. Unfortunately, babies can be infected by GBS before birth and up to about 6 months of age due to their underdeveloped immune system.

Preventing Early-Onset Group B Strep Disease (GBS)

The two most important ways to prevent early-onset (occurs in babies younger than 1 week old) group B strep disease include:

- Testing all pregnant women for group B strep bacteria late in pregnancy (ideally between 35 and 37 weeks pregnant)
- Giving antibiotics during labor to women who test positive for group B strep bacteria



Alternative Prevention Strategies

Antibiotics taken by mouth instead of through the vein and antibiotics taken before labor and delivery are not effective at preventing group B strep disease in babies. Birth canal washes with the disinfectant chlorhexidine also do not reduce the risk of a mother spreading group B strep bacteria to her baby or her baby developing early-onset disease. To date, receiving antibiotics through the vein during labor is the only proven strategy to protect a baby from early-onset group B strep disease.

