

Protect children from rotavirus illness and death

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Just a few months ago, thousands of children gained access to rotavirus vaccines in four states of India marking Asia's largest national introduction to date. But over 90 million children around the world still lack access to this vital vaccine.

While it is preventable and treatable, diarrhoea continues to have a devastating toll on children around the world. It is a leading cause of child death, and is responsible for hospitalising millions more.

Rotavirus is responsible for claiming the lives of more than 200,000 children each year and results in nearly 40% of all diarrhoea hospitalisations in the world.

We have dramatically reduced diarrhoeal deaths among children under five, through providing oral rehydration solution (ORS), increasing access to clinical facilities, and improving water and sanitation programmes. However, too many children still suffer growth and cognitive impairments from serious and repeated diarrhoeal disease illnesses.

More emphasis needs to be given on preventive measures particularly vaccine, and implementation of hygienic practices and sanitation facilities.



The health and economic consequences of rotavirus ripple across families, communities, and countries. In Bangladesh, a recent study showed that a single episode of rotavirus costs the average Bangladeshi family US\$ 84, or nearly 85% of the average Bangladeshi family's monthly income.

Moreover, the total cost of rotavirus hospitalisations to the country is an estimated US\$66.8 million (about 500 crore Taka) each year, resulting in major economic strain.

Yet this is entirely preventable. We know how to stop rotavirus

illnesses and deaths, and we have the tools today to do it.

Vaccination is the best tool available today to protect children from rotavirus. Rotavirus vaccines are improving health, reducing healthcare costs, and saving lives today in countries where they are in use. To make the case in point, introducing rotavirus vaccine in Bangladesh could prevent an estimated 135,000 hospitalisations yearly and protect thousands of children from sickness, malnourishment, and death.

The ROTA Council, a global body of scientific experts on

rotavirus, strongly agrees with the World Health Organisation's recommendations for introducing rotavirus vaccines into national immunisation programmes. So far, over 80 countries have introduced the vaccines, but not enough countries in Asia or Africa have taken action — the regions where burden is highest.

Compared to developed countries, there are several challenges unique to industrialising nations of Asia, including potential financing and supply. These issues are further complicated by competing priorities in public

health systems.

However, several South East Asian countries have taken steps toward closing the rotavirus immunisation gap in the region. India recently initiated a phased national introduction beginning with four states. Thailand began a pilot programme in 2011.

Pakistan's EPI manager recently announced their intentions to apply for Gavi funding to introduce rotavirus vaccine, and Myanmar's National Committee on Immunisation Practices has recommended introduction of the vaccine. These are remarkable milestones for Asia, but much work remains to protect our children from rotavirus.

In 2016, it's unconscionable that millions of children, particularly in Asia, still suffer from a disease we have the knowledge and tools to prevent. It's time to protect all children, everywhere, from the scourge of rotavirus.

It's time to take action!

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HEALTH bulletin

Deserved rights demanded

DOLILUR RAHMAN

By 2050 the global population will include 2 billion people aged 60 or over, and 400 million aged 80 or over. In Bangladesh, it will be 17% of total population; millions of people will be disabled and affected with movement related disorders.

World Health Organisation's *World Report on Ageing and Health* says, "Maintenance of functional ability has the highest importance" for these sufferers. Evidently it is proven that physiotherapists have a key role in enabling disabled people and patients with movement related disorders to make them physically independent, improving their quality of life as well functional abilities, more social participation and overall to reduce health care cost.

With a view to raise awareness on the necessity of physiotherapy,

World Physiotherapy Day is observed on September 8. This year's theme is *Add life to years*.

The evidence of the clinical and cost-effectiveness of physiotherapy for disabilities and movement disorders is incontrovertible. Physiotherapists are the qualified movement and exercise experts who can directly and safely help people to become physically active to reduce 50% of functional limitation risk and 40% of death rate.

Physiotherapists help people to reach their physical potential after stroke and reduce readmission and care costs.

Movement related disorders and disability rate in all ages are increasing alarmingly worldwide due to spread of obesity, diabetes, heart diseases, stroke, arthritis, pain, paralysis, cancer and other diseases which would be the greatest chal-

lenge of healthcare.

The magnitude of these conditions for different reasons in Bangladesh is quite high to address as an emerging health problem. These conditions affect our mobility and motor coordination which seriously jeopardises our lifestyle, work, day to day activities and independence of movement. Physiotherapy is the most mainstream of all non-surgical treatments including prevention of recurrence for these problems.

Physiotherapists are professionals with specific education and skills who can successfully transform lives through the application of their clinical skills and experience. In Bangladesh we are still very far away from the track to see such revolution. Although the profession in Bangladesh has already passed 50 years, still there is no authority to regulate it. Many people are being treated by quacks and are frequently victimised.

On World Physiotherapy Day, physiotherapists around the country raised their voices to demand their deserved rights. The concerned authorities should take necessary steps to fulfill their rights in order to create a healthy working environment for the physiotherapists to continue their services to the society.

The writer is the President of Bangladesh Physiotherapy Association.



Earlier diabetes diagnosis linked to worse mid-life heart health

When people develop diabetes early in life they may also be more likely to experience heart problems in middle age, a study suggests.

Cardiovascular disease has long been linked to diabetes in older adults. The new study, however, offers fresh evidence that getting diabetes as a younger adult may exacerbate or accelerate the erosion of heart function as people age.

"Diabetes is toxic to the heart since it affects many important components of the machinery," said Dr. Genevieve Derumeaux, a researcher at Henri Mondor Hospital in Creteil, France and author of an editorial accompanying the study.

In particular, diabetes can damage the left ventricle, the bottom left chamber of the heart responsible for pushing oxygen-rich blood out into the circulatory system, Derumeaux said. Over time, diabetes can make it harder for the chamber to fill with blood and pump blood out into the body.



CONFERENCE



Int. conference on healthcare for RMG workers held in Dhaka

STAR HEALTH REPORT

A conference focusing on the healthcare of the garment workers titled *International conference on healthcare delivery system for the garment factory workers: challenges and solutions* was held at CIRDAP auditorium, Dhaka on August 28, 2016. The conference was organised by the Brown University Global Health Initiative, USA and Child Health Awareness Foundation, Bangladesh.

The main goal of the conference was to bring all the stakeholders in the RMG sector under one platform to discuss the healthcare scenario of the RMG workers of Bangladesh and seek cooperation and partnership in providing improved healthcare services to them.

State Minister for Women and Children Affairs Meher Afroz Chumki was the Chief Guest of the conference. Faculty of Brown University, USA Dr Ruhul Abid chaired the conference and presented the keynote paper. Former Foreign Minister Dr Dipu Moni and US Ambassador to Bangladesh Marcia Bernicat also spoke in the conference.

Participants of the conference stressed the need for strengthening health facilities and creating proper awareness in RMG units to reduce risk of diseases saying their women workers in many cases were unwilling to go for health care services which is largely responsible for them to lag behind. They also suggested access to healthcare and affordability of the healthcare for the garment factory workers alongside creating awareness among them about health, nutrition and hygiene.

There are around 5,500 garment factories with around 4 million workers in Bangladesh while 70% of the workers are women of reproductive-age.

Complicated surgery in Apollo Hospitals Dhaka



A 35 years old gentleman, from Keraniganj, Dhaka came to Apollo Hospitals Dhaka with the diagnosis of carcinoma lower rectum and got admitted under Associate Professor Dr Mohammad Farid Hossain who is a renowned G.I. Surgical oncologist. Laparoscopic surgery (without cutting abdomen) was performed, called laparoscopic abdomino-perineal excision of the rectum. Laparoscopic surgery is less traumatic, almost blood less (does not require any blood transfusion) with minimum pain during post-operative period.

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Respiratory tract infections (RTIs) are any infection of the sinuses, throat, airways or lungs

RTIs usually caused by viruses, but can be caused by bacteria.

RTIs are thought to be one of the main reasons why people visit their GP or pharmacist. The common cold is the most widespread RTI.

Healthcare professionals generally make a distinction between:

- Upper respiratory tract infections - which affect the nose, sinuses and throat
- Lower respiratory tract infections - which affect the airways and lungs

Children tend to get more upper RTIs than adults because they haven't built up immunity (resistance) to the many viruses that can cause these infections.

Managing your symptoms at home

Most RTIs pass without the need for treatment and you won't usually need to see your GP. You can treat your symptoms at home by taking over-the-counter painkillers, drinking plenty of fluids and resting.

In most cases, antibiotics aren't recommended because they're only effective if the infection is caused by bacteria.

The symptoms of an upper RTI usually pass within one to two weeks.

