

# All you need to know about fatty liver

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Fatty liver, or steatosis, is a term that describes the buildup of fat in the liver. While it is normal to have some fat in your liver, more than 5 to 10 percent of your liver weight is fat in the case of fatty liver. Fatty liver is a reversible condition that can be resolved with changed behaviours.

It often has no symptoms and typically does not cause permanent damage. Around 10 to 20 percent of people have too much fat in their liver, but no inflammation or damage is present. Most cases of fatty liver are detected in people between ages 40 and 60. When fatty liver is caused by an underlying condition, it can become harmful to the liver if the cause is not recognised and treated.

## Symptoms of fatty liver

Fatty liver typically has no associated symptoms. You may experience fatigue or vague abdominal discomfort. Your liver may become slightly enlarged, and your doctor can detect this during a physical exam. Excess fat can cause liver inflammation. If your liver becomes inflamed you may have a poor appetite, weight loss, abdominal pain, weakness and confusion.

## Causes of fatty liver

The most common cause of fatty



liver is alcoholism and heavy drinking.

Fatty liver develops when the body creates too much fat or cannot metabolise fat fast enough. The excess fat is stored in liver cells where it accumulates to form fatty liver disease. Besides alcoholism, other common causes of fatty liver include obesity, high levels of fats in the blood, diabetes, genetic inheritance, rapid weight loss and side effect of certain medications,

including aspirin, steroids and tetracycline.

## Who are at risk for fatty liver?

It is more likely to develop if you are overweight or obese. Having type 2 diabetes also may increase your risk for fatty liver. Fat accumulation in the liver has been linked to insulin resistance, which is the most common cause of type 2 diabetes. Other factors that may increase your risk for fatty liver are excessive alcohol use, taking more than the recom-

mended doses of certain over-the-counter medications like paracetamol, pregnancy, high cholesterol, high triglyceride levels, malnutrition and metabolic syndrome.

## Diagnosis of fatty liver

Your doctor may find that liver enzymes are higher than normal on a routine blood test. This does not confirm a diagnosis of fatty liver. Further analysis is necessary to find the cause of the inflammation. Liver biopsy is the only

way to know for certain if you have fatty liver. The biopsy will also help the doctor determine the exact cause.

## Treatment of fatty liver

There is no medication or surgery to treat fatty liver. Instead, doctors will offer recommendations to reduce your risk factors. These recommendations include limiting or avoiding alcoholic beverages, managing your cholesterol, losing weight and controlling your blood sugar.

If you have fatty liver because of obesity or unhealthy eating habits, doctors may also suggest that you increase physical activity and eliminate certain types of food from your diet. Choose healthier foods like fresh fruits, vegetables, and whole grains. Replace red meats with lean animal proteins like chicken and fish.

Protecting your liver is one of the best ways to prevent fatty liver. You should avoid drinking alcoholic beverages. Follow your doctor's instructions and take medications for diabetes or high cholesterol as directed. Additionally, aim for at least 30 minutes of exercise most days of the week to maintain a healthy weight.

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## CAUTION

### Puffer fish poisoning and few deaths



PROF M KARIM KHAN

Five persons including two children died after eating puffer fish recently. This tragic incidence occurred in Sylhet district. This type of episode is not very uncommon in Bangladesh. Every year quite a few lives are claimed by the ingestion of puffer fish in our country.

Puffer fish is a cheap fish containing a neurotoxin that causes paralysis of the diaphragm and causes death. Signs and symptoms of toxicity start within 30 minutes after ingestion of puffer fish. Nausea, vomiting, numbness, paresthesia (tingling sensation) and ultimately paralysis of the respiratory system ensure death if not treated properly. Tetrodotoxin is the poison responsible for this serious situation. It is sometimes more toxic than cyanide.

Puffer fish is a popular delicacy in Japan but they do not have any such history of poisoning. If the liver, gonads, salivary glands and skin of puffer fish are being removed before cooking, toxicity is unlikely.

If any toxicity develops, victims have to be transferred to tertiary hospital immediately as they may require ventilatory support. Mass awareness is needed to avoid such unexpected death. Avoidance of taking such fish should be advocated.

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## HEALTH bulletin



### Augmented reality and serious gaming may help relieve phantom limb pain

Moving and visualising a phantom limb in augmented reality may help reduce phantom limb pain and how often amputees' lives are affected by the condition, according to a study published in The Lancet.

The small study involved 14 patients who began experiencing phantom limb pain soon after they had their arm amputated between two and 36 years ago and had not benefitted from other treatments.

Phantom limb pain occurs when amputees experience painful sensations which seem to come from their missing limb. Most amputees experience some pain after losing a limb, but for a third of cases it becomes very severe leading to poor quality of life, worse disability, poorer mental health and greater difficulty in prosthesis use than for amputees without phantom limb pain. The condition is believed to be caused by the brain not adapting to the loss of a limb so the neurons for that area remain active and trigger pain.

## Universal Health Coverage Day 2016

### Act with ambition

STAR HEALTH DESK

Universal Health Coverage (UHC) means that all individuals and communities receive the health services they need without suffering financial hardship. Tomorrow, on 12 December 2016, for the UHC Day, the World Health Organisation (WHO) and partners will demand political action from leaders to invest in policies and health systems that reach every person and community based on need, and not ability to pay.

All UN Member States have agreed to try to achieve Universal Health Coverage by 2030. This includes financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.

On 12 December 2012, the UN resolution on Foreign Policy and Global Health recognised the importance of UHC for the first time ever, and this prompted the UHC Day movement together with 734 partners in 117 countries.

In September 2015, the commitment to UHC was embedded in the Sustainable Development Goals (SDGs), underpinning the health goal to address both financial and physical access to essential health services in a more comprehensive manner.

In 2016, the G7 strongly endorsed UHC and emphasised the

need for resilient health systems at their recent Ise-Shima Summit. African Union Heads of State also committed to advance UHC in order to achieve SDGs following the Sixth Tokyo International Conference on African Development (TICAD-VI).

Attaining UHC and SDG 3 will require a new commitment to reduce fragmentation in health. In this regard, the International Health Partnership for UHC 2030 (UHC2030) was established to support a movement for accelerated, equitable and sustainable progress towards UHC as well as the other health targets in the SDGs.

The partnership builds on a transformed IHP+, making it fit for purpose in the new SDG era with an increased focus on mobilisation of national resources. Countries with potential roles and contributions in driving UHC and the

International Health Partnership for UHC2030 need to strengthen multi-stakeholder policy dialogue and coordination on health systems at country level and improve the coordination of efforts at global level, as well as build political momentum and advocate for equitable and sustainable progress towards UHC.

There is growing global consensus that universal health coverage is a smart investment and an achievable goal everywhere.

World leaders including the G7 have affirmed that health is a human right, that no one should go bankrupt when they get sick, and that universal health coverage underpins our collective security and prosperity.

Universal health coverage improves how health care is financed and delivered – so it is more accessible, more equitable and more effective.



### Seminar on viral haemorrhagic fever

American International University-Bangladesh (AIUB) organised a seminar on *Viral Haemorrhagic Fevers of Public Health Importance* which was held recently at AIUB auditorium.

Prof Dr ABM Abdullah, Dean, faculty of Medicine, Bangabandhu Sheikh Mujib Medical University (BSMMU) was the Chief Guest. The speakers emphasised on the role of public health professionals to prevent viral haemorrhagic fever (VHF).

Prof Dr Tazul Islam, Dean, Faculty of Arts and Social Sciences, AIUB concluded the seminar thanking the distinguished guests.

### Never Stop Moving at Apollo Dhaka

In order to create awareness among patients with knee disorders, Apollo Hospitals Dhaka in collaboration with UniHealth organised a campaign *Never Stop Moving* recently, says a press release.

Dr. M. Ali, Coordinator, Knee Centre, Apollo Hospitals Dhaka was the keynote speaker of the event. He shared his views on how patients can be benefitted by the latest treatments and the rules they need to follow to keep moving.

/StarHealthBD

## Leptospirosis

Leptospirosis is a type of bacterial infection spread by animals. It's caused by a strain of bacteria called leptospira.

In 90% of cases, leptospirosis only causes mild flu-like symptoms, such as a headache, chills and muscle pain.

### Symptoms of leptospirosis

The symptoms of leptospirosis usually develop suddenly around 7 to 14 days after exposure to the leptospira bacteria.

About 90% of leptospirosis infections only cause mild symptoms, including:

- A high temperature (fever) that is usually between 38C and 40C (100.4-104-F)
- Chills
- Sudden headaches
- Nausea and vomiting
- Loss of appetite
- Muscle pain, particularly affecting the muscles in the calves and lower back
- Conjunctivitis (irritation and redness of the eyes)
- Cough
- A short-lived rash

These symptoms usually resolve within five to seven days. However, in about 10% of cases people go on to experience more serious symptoms.

### How is leptospirosis treated?

Leptospirosis is treated with a course of antibiotics.

For mild forms of leptospirosis, antibiotic tablets that can be taken at home are usually used for about a week.

Most people with more severe leptospirosis will be admitted to hospital so their body's functions can be supported while the underlying infection is treated with injections of antibiotics.

