



Sleepwalking: Fact or fiction?

DR SYED AHMED MORTADA
Somnambulism, noctambulism or sleepwalking is a combination of sleepiness and sleeplessness. It constitutes a sleep disorder of parasomnia. It takes place during slow wave sleep in a state of low consciousness while repeating the activities which were performed during full consciousness. These activities can be simple and harmless or could be serious and dangerous as opening a gas line, driving, wielding bludgeon and blunderbuss even committing a homicide. Slow wave sleep of non-rapid eye movement sleep cycles typically occurs during the first third of night with eyes open but the expression of sleepiness is always portrayed on the facade. They have little memory about the events and they can never recall

the episodes, lasting between 30 seconds to 30 minutes. The truth is Somnambulism is neither a myth nor a fiction. William Shakespeare chronicled in his play *Macbeth* one of the most pervasive scenes on somnambulism. In 1907 Sigmund Freud delivered a lecture on sleepwalking to the Vienna Psychoanalytic Society. He believed that somnambulism was commensurate with fulfilling sexual desire and was flabbergasted at how an incumbent could move without interrupting his dream. I was confined to bed once when my family was away and asked my driver to stay put overnight with me. He readily agreed but same time appraised me that he was a sleep walker whether that would be a concern to me. Instead of being concerned I

found a goldmine to explore. Indeed throughout my nearly fifty years of medical practice I never came across a somnambulist and now in my bedroom my own driver gave me an opportunity unfolding the mystery of sleep walking. As I delve into history, he furnished me with his story that he was twenty years old and he started espousing with sleepwalking since very early age as told by the family members. His father, mother, sibling, uncle, aunt nobody displayed any trait but his grandfather (paternal) whom he never saw, was a harbinger of somnambulism. That was how genetics divulged its long-held secrets on some occasions. He was a non-smoker, non-alcoholic with no insomnia or stress, riding an easy life. He had been going to bed between ten to eleven and

falling to sleep in ten to fifteen minutes. He had the attacks once or twice a month which he realised when he stumbled on something. He then fell back to sleep, waking up in the morning fighting fit without any hangover or exhaustion from the previous night. His bowel habit, appetite and other systems were normal. One connection he related that he had experienced the episode when his site or place of sleep was changed. Sleep walking happens in the deepest stage of sleep and the incumbent remains in sleep state while walking. More often than not somnambulism is encountered in children. Other than genetics, delay in maturity of central nervous system, increase in slow wave sleep, sleep deprivation, tiredness,

Parkinsonism, some medications like are considered as culprits. The diagnosis is largely confirmed on the history retrieved from the person concerned or from the family members. However, polysomnography remains the cornerstone of diagnosis which is seldom accessible or hardly required. The treatment spectrum encompasses two kinds of modalities. First can be psychological intervention including psychoanalysis, hypnosis, anticipatory walking, assertion training, managing aggressive behaviour, classical conditioning (electric shock), play therapy. Second and the commonly practice done is the pharmacological therapy. Your doctor can prescribe appropriate medicine for you. **E-mail: samara1985@hotmail.com**

WASH TARGETS

Radical increase in investment required to meet targets

Countries are not increasing spending fast enough to meet the water and sanitation targets under the Sustainable Development Goals (SDGs), says a new report published by WHO on behalf of UN-Water – the United Nations inter-agency coordination mechanism for all freshwater-related issues, including sanitation. "Today, almost two billion people use a source of drinking-water contaminated with faeces, putting them at risk of contracting cholera, dysentery, typhoid and polio," says Dr Maria Neira, WHO Director, Department of Public Health, Environmental and Social Determinants of Health. "Contaminated drinking-water is estimated to cause more than 500,000 diarrhoeal deaths each year and is a major factor in several neglected tropical diseases, including intestinal worms, schistosomiasis, and trachoma," added Neira. The report stresses that countries will not meet global aspirations of universal access to safe drinking-water and sanitation unless steps are taken to use financial resources more efficiently and increase efforts to identify new sources of funding. According to the UN-Water Global Analysis and Assessment of Sanitation and Drinking-Water (GLAAS) 2017 report, countries have increased their budgets for water, sanitation and hygiene (WASH) at an annual average rate of 4.9% over the last three years. Yet, 80% of countries report that water, sanitation and hygiene financing is still insufficient to meet nationally-defined targets for WASH services. In order to meet the SDG global targets, the World Bank estimates investments in infrastructure need to triple to US \$114 billion per year – a figure which does not include operating and maintenance costs.

HEALTH bulletin

Detox for a healthy life



Global inequalities in survival for childhood leukaemia persist

Although global inequalities in survival from childhood leukaemia have narrowed, they still persist with five-year survival in some countries nearly twice as high as in others for children diagnosed during 2005-2009, according to a study published in *The Lancet Haematology*. While survival has increased in many countries, five-year survival for acute lymphoblastic leukaemia (ALL) in Germany was 92%, compared to 52% in Colombia for children diagnosed in 2005-2009. Additionally, the study finds that survival has improved for most age groups, but it remains lowest for infants under 1. According to the latest data on global childhood cancer incidence, also published in *The Lancet Oncology*, leukaemia is the most common cancer in children aged 0-14 years old worldwide – accounting for a third of cancer cases in 0-9 year olds, and a quarter of cases in 10-14 year olds. The chances of survival depended on the child's age when diagnosed with leukaemia.

DR TAUHIDA RAHMAN EREEN
Detoxifying body means total body regeneration. Detoxification amazingly improves your immune system, energy level, complexion and texture of skin, weight loss, mental alertness, and overall health condition. Our body needs total care through diet and lifestyle as our bodies are being contaminated by gene damaging chemicals, toxins and pollutants every day. **Detox diet:** Revive your body through antioxidant therapy, antioxidants fight with free radicals and reduce toxin level. Hydrogen is the most powerful antioxidant; it is called fuel of life. Enrich your meal plan with hydrogen containing food like fresh raw food, good fat and animal protein. Preservatives and wrong cooking process may help to reduce hydrogen levels in food. Try to prepare food in a healthy way and save hydrogen. **Detox drink:** If you want to live a long vibrant life start and end your day with detox drink - It helps balance your body's pH. Easily available seasonal fruits, vegetables and herbs are the best ingredients for detox drink. Add few slices these with water and make your refreshing drink. Apple cider vinegar speeds up detoxification with its acetic acid and probiotics. Green tea and jasmine tea is amazing beverage for skin. They are rich in phytonutrients which help hydrate skin making fresher and plumper. Dry skin is more prone to ageing. **Detox the mind:** Detox mind means pure inside out. Relax your

mind. If you feel good you will look good and good things will happen. Fit in a nap, watch a funny movie and spend quality time with friends and family, also keep participating in favorite activities. The science behind the fasting for detox is during fasting our body takes a complete break from food. Surprisingly our body needs this break to repair the damage from trauma and toxins. **Go sweating:** Steam bath and sauna room in your gym or home is not a luxury these days. Once you sweat it helps you to cleanse impurities through the skin. Soaking in a detoxifying bath with Epsom and sea salt 3 times per week for 20 minutes can help clear toxins and dead cells from the pores of your

skin. Running, jogging, cycling, heat yoga and swimming are all natural exercises which make you sweat. **Dry brushing skin:** This detoxifying process may sound daunting, what could a dry brushing detox do for you? It is great for the lymphatic system. Brush your body in a slow circular motion, before shower. As metabolic end products accumulate in body when we sleep, morning is the best part of the day for this detoxifying procedure. Soft pumice stone, natural bristle brush is wonderful dry brushing tools. Detoxification does not have to mean compromising your skin care routine and with just a few tricks, it will take a few weeks to notice the difference. Start a detox routine, stay healthy.



Int'l conference held on diabetes care for refugees

In a conference organised by the United Nations Relief and Works Agency for Palestine Refugees (UNRWA), and the World Diabetes Foundation (WDF), experts in healthcare services delivery for refugees from different sectors gathered at the Dead Sea in Jordan last week to address on how to improve the quality of healthcare services delivered to refugee populations with diabetes, says a press release. "There are now nearly 21.3 million refugees worldwide. There is an urgent need for joint efforts by all stakeholders to address the growing threat that diabetes poses to this vulnerable population," says Dr. Akihiro Seita, the Director of the UNRWA Health Programme. This conference offered an opportunity for participants to share their experiences and best practices concerning diabetes prevention and management among refugees. It also helped in establishing a joint coordination mechanism between different key organisations providing non-communicable disease (NCD) care – in particular diabetes care – to refugees. During the conference, an Action Plan with practical solutions for improving coordinated diabetes care for refugees were created, and a Call to Action was endorsed by the participants.



Hidradenitis suppurativa (hi-drad-uh-NIE-tis sup-yoo-ruh-TIE-vuh) is rare, long-term skin condition that features small, painful lumps under the skin. They typically develop where the skin rubs together, such as the armpits, the groin, between the buttocks and under the breasts. The lumps may break open and smell or cause tunnels under the skin.

Signs and symptoms of hidradenitis suppurativa include:

- Blackheads
- Painful, pea-size lumps
- Red, tender bumps
- Tunnels

Complications

Persistent and severe hidradenitis suppurativa often causes complications, including:

- Infection
- Obstructed lymph drainage
- Scars and skin changes
- Social isolation
- Restricted movement
- Cancer

When to see a doctor

Early detection of hidradenitis suppurativa is key to getting effective treatment. See your doctor if your condition:

- Is painful
- Doesn't improve in a few weeks
- Returns within weeks of treatment
- Appears in several locations
- Recurs often

If you've already received a diagnosis of hidradenitis suppurativa, keep in mind that the warning signs of a disease flare (recurrence) are often similar to those that occurred originally. Also pay attention to any new signs or symptoms. These may indicate either a recurrence or a complication of treatment

