

Abusing a physician is unethical

DHIRAJ KUMAR NATH
 Bangladesh Medical Association called upon all physicians to abstain from practicing for a day (May 23, 2017) in protest of vandalism due to the death of a student of Dhaka University. The University authority instantly filed a criminal case against 9 doctors and other officials of the Central Hospital at Dhanmondi Thana on charge of "negligence in treatment" that led to the unwanted death of a female student. Vandalism in such a manner and arrest of doctors on a charge of wrong treatment before the allegation of negligence is proved cannot be accepted in any way. It does not justify to proceed and is not a sensible way of handling such a sensitive and delicate case. This is not a new incident; such situations occurred many times in different hospitals of Bangladesh in recent past where physicians were abused. Situations were under control on reconciliation through mutual understanding and local mitigation. Very recently in March 2017, in Mumbai, at Lokemanya Tilak Hospital one doctor Rahith Kumar was beaten mercilessly

and around 2,000 doctors abstained from duties and assembled in a park with the slogan, "Save the Saviours." Many people gathered in the park in their support. At the same time, some public showed resentments outside and expressed to media, "These doctors are rascals." When asked about the reason of such perception, a few learned people opined, "Commercialisation of medical profession must come to an end to re-set doctor-patient relationship." It is thought that this is the root cause of such episode where some citizens find doctors commercial without having any ethical sense of values and fully motivated how to earn more money and accumulate more resources to start a diagnostic centre as quickly as possible. Some experts in the health sector have echoed equally stating that private medical colleges are charging very large capitation fee to gain admission and medical education became an investment for future earnings. They are admitting medical students in consideration of huge money and so after getting out of colleges, these doctors act like shylocks to

earn more and more money to repay their loan and get return of their huge investment. What a peculiar situation prevailing in the country! Besides, in some medical colleges, private hospitals and clinics, there are many touts who deceive the patients by promising some false assurances of best medicare at cheapest rate in some clinics privately managed. When at one stage, this turns out to be a bluff and patients feel cheated and frustrated. This results to direct assault on doctors with complete chaos which is undesirable and unacceptable. Dr. Bidhan Chandra Roy or many other world renowned physicians gained their fabulous fame because of their correct understanding of the problem of the patients. Always patient cannot correctly say what has happened to him. S/He is a good doctor who can detect from patient's sporadic and spontaneous words her/his problems in reality. Sometimes headache occurs due to eye sight problem; it is the doctor to guess and go in depth to prescribe glasses, not paracetamol to reduce headache. Dr Devi Shetty gained his

popularity not because of his very sharp and accurate surgery but he talks to his clients, makes him/her understand his/her problem and brief him/her correctly what type of surgical operation he is going to perform. It is known as doctor-client relation what is practically and for all purposes is gradually reducing due to heavy engagement of doctors in hospital and private clinics from early morning to late night. Sometimes, such a physician gets very little time to listen to the client or see their faces correctly before prescribing or taking the surgical equipment to operate. Many people are in view that such a situation is prevailing because of acute scarcity of doctors and when a patient does not find any option to choose or go elsewhere. Secondly, the expenditure to incur is also a question. In Bangladesh, public in average pays 65% of medical expenses out of own pocket and about 64% patients take medication on the advises of quacks and traditional healers. Many of Health and Family Welfare indicators of Bangladesh

are very promising and laudable in comparison to many countries. We have achieved almost all MDGs and advancing very quickly to attain the targets and goals of SDG by 2030. Bangladesh is an exporter of drugs and medicine in around 125 countries and the pharmaceutical industries earned their reputation around the world. The physicians are also good but cannot do justice always due to heavy engagement and other reasons of which earning more is one of them. Social scientists are in view, there should be some regulatory framework so that such a situation of doctor-patient relation does not aggravate further. The violence against doctors cannot be condoned on any grounds. It is unethical and untenable. It is the time to identify root causes of such increasing assaults on medical practitioners and take step to reduce the widening of the gaps between doctor and clients. The commercialisation of medical profession must come to an end. **The writer is a former advisor to the caretaker government. E-mail: dknath888@gmail.com**

SAFE MOTHERHOOD



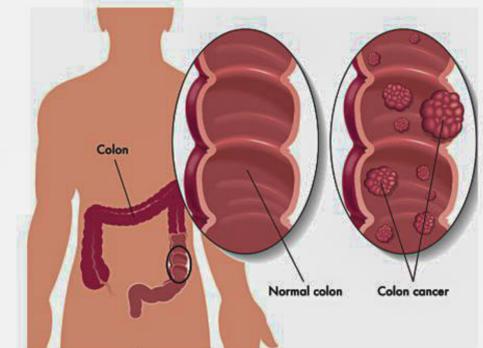
Preventing pregnancy-induced hypertension

70,000-150,000 pregnant mothers can be saved from pregnant-induced hypertension if Calcium Carbonate can be consumed for last 6 months of pregnancy with close monitoring.

STAR HEALTH REPORT

Calcium supplements taken during pregnancy can reduce severe complications which lead to 70,000-150,000 pregnancy complication in the Bangladesh each year, says Dr Mahfuzar Rahman of Research and Evaluation Division of BRAC. Pregnant women should increase their calcium intake to help avoid eclampsia and high blood pressure, Research and Evaluation of BRAC's study concludes. The study found that women who took supplements throughout their pregnancy were 47% less likely to get preeclampsia and other complications. Dr Mahfuzar Rahman said the study was not conclusive with regard to preeclampsia but that the supplements did lead to a significant drop in incidence of the far more serious but rare eclampsia. Eclampsia can bring life-threatening convulsions which could lead to maternal deaths during labour. Currently the Maternal Mortality Rate (MMR) is 172 per 100,000 live births in Bangladesh. Globally it has been proven that 1.5-2g/daily Calcium is recommended. Each tablet contains 500mg, therefore 3-4 tablets are required during pregnancy period. Calcium decreases risk of gestational hypertension, pre-eclampsia, low birth weight, and chronic hypertension in children. The World Health Organisation (WHO) recommended 1.5-2 daily where Calcium intake is low and Government of Bangladesh has adopted this recommendation. However, to date, these WHO recommendations have not been widely adopted, because of practical impediments to implementation, including the size and number. BRAC Health, Nutrition and Population Programme is implementing a special maternal nutrition programme. One component is delivering Calcium Carbonate tablet 500 mg daily. 11,387 mothers from 10 upazilas (Lalmonirhat, Kurigram, Rangpur and Mymensingh) were monitored monthly on Calcium tablets delivered/consumed, blood pressure, and weight measurement. Various tools were implemented during the project including awarding the husbands regarding their wives' food variety. High compliance (78%) during second trimester and 71% during the third trimester allowed observing a reduction of 47% less risk of being gestational hypertensive than who consumed less. It means, 70,000-150,000 pregnant mothers can be saved from pregnant-induced hypertension if Calcium Carbonate can be consumed for last 6 months of pregnancy with close monitoring. This data allowed with an opportunity to assess the effectiveness in large MNCH programme as well as this evidence can help programme to promote practice of using Calcium which may be considered a policy in Bangladesh and similar countries. Furthermore, about 50% pregnant women of the country suffer from anaemia while intake of 180 calcium tablets during pregnancy increases weight significantly, Dr Rahman concluded. The research also showed that right suggestion improves maternal nutrition and practical training to mothers brings variety in mothers' food.

HEALTH bulletin



Overweight boys at greater risk of colon cancer as adults

New research presented at the European Congress on Obesity (ECO) in Porto, Portugal (17-20 May) suggests that overweight boys may be at greater risk of colon (bowel) cancer when they grow up than their slimmer friends. However, overweight boys who shed the pounds and achieve a healthy weight by young adulthood do not appear to be at increased risk of colon cancer as adults. The findings underline how important it is for children to be a healthy weight. Previous research shows that overweight children are at higher risk of colon cancer as adults. In this study, Dr Britt Wang Jensen and Associate Professor Jennifer Baker from Bispebjerg and Frederiksberg Hospital, Copenhagen, Denmark and colleagues analysed the health records of over 61,000 Danish school boys born between 1939 and 1959, to examine how changes in BMI in childhood and young adulthood are associated with colon cancer risk in adulthood. The study took educational level into account but not lifestyle factors that might contribute to a person's risk of developing cancer.

Insights on liver transplant

DR MAHMOOD KAZI MOHAMMED

A liver transplant is an operation to remove a diseased or damaged liver and replace it with a healthy one. It is usually recommended when the liver has been damaged to the point that it cannot perform its normal functions. This is known as liver failure. The only hope for the long-term survival of a person with liver failure is a liver transplant because – unlike the kidney, heart or lungs – there is no device (such as a dialysis machine) that can permanently replicate the functions of the liver. The Star Health recently interviewed renowned liver surgeon specialising in liver transplants Dr. Tan Kai Chah from the Asian American Liver Centre at the Gleneagles Hospital, Singapore. Dr Tan is a pioneer in various liver transplant procedures including the first ever 'split-liver' transplant. He shared his insights regarding the various aspects of liver transplant. When he was asked about how to take measures against liver damage, Dr Tan emphasised on the importance of having a healthy dietary habit. Regular and adequate physical exercise is one key measure that can keep the liver healthy. Obesity is one of the major causes that damage the liver. Due to the sedentary lifestyle, inadequate physical exercise, unhealthy diet and fast food consumption, people are getting not only obese but morbidly obese these days. At least 30% of the total population in South Asia now has fatty liver. It is a condition that is becoming more common day by day. It is going to be the number one cause of liver damage in the coming



Mr. Lee Suen Ming, CEO, Gleneagles Hospital, Singapore (Middle Right), Dr. Tan Kai Chah, Senior Consultant, Gleneagles Hospital, Singapore (Middle Left), Mr. Cherinjit Kumar Shori, Group Chief Operating Officer, Asian American Medical Group, Singapore (on Right) & Mr. Zahid Khan, Director - Dhaka Office, Parkway Hospitals Singapore Pte Ltd (On left).

days surpassing hepatitis. When a patient comes to Dr Tan with a fatty liver, He suggests a liver function test. If the test indicates of higher enzyme levels, it indicates that there is ongoing liver damage. This is a condition that is known as steatohepatitis which means that the fatty liver has progressed into liver damage. The patient is then suggested to avoid oily food, reduce extra weight, perform physical exercise regularly, control diabetes and prescribed some medication. After all these measures taken, if the patient follow up reveals reduction in the liver enzymes, it indicates that the ongoing damage of the liver has stopped and it is unlikely to cause liver cirrhosis from there. Dr. Tan emphasised on the need of liver donation as it is extremely hard to find a living donor for a

liver transplant. The risks of the donor undergoing surgical procedure for donating the liver for transplant can easily be avoided. There is not much of a difference between living donor liver transplant (LDLT) or a cadaveric (from a dead body) liver transplant because the result is almost similar in a good liver transplant centre. In fact, a cadaveric liver transplant is preferable than LDLT because it is easier to perform the surgery as there is less emotional stress involved for the donor, no risks involved for a donor who needs to undergo surgical procedure and a cadaveric liver is easier to transplant as the structures are bigger and well defined so it is easier to perform the transplant. **The writer is a reporter of Star Health. E-mail: mkmohammed86@gmail.com**



Heatstroke

Heatstroke is a condition caused by your body overheating, usually as a result of prolonged exposure to or physical exertion in high temperatures. This most serious form of heat injury, heatstroke can occur if your body temperature rises to 104 F (40 C) or higher. Heatstroke requires emergency treatment. Untreated heatstroke can quickly damage your brain, heart, kidneys and muscles. The damage worsens the longer treatment is delayed, increasing your risk of serious complications or death.

Symptoms

- **High body temperature.** A body temperature of 104 F (40 C) or higher is the main sign of heatstroke.
- **Altered mental state or behavior.** Confusion, agitation, slurred speech, irritability, delirium, seizures and coma can all result from heatstroke.
- **Alteration in sweating.** In heatstroke brought on by hot weather, your skin will feel hot and dry to the touch. However, in heatstroke brought on by strenuous exercise, your skin may feel moist.
- **Nausea and vomiting.** You may feel sick to your stomach or vomit.
- **Flushed skin.** Your skin may turn red as your body temperature increases.
- **Rapid breathing.** Your breathing may become rapid and shallow.
- **Racing heart rate.** Your pulse may significantly increase because heat stress places a tremendous burden on your heart to help cool your body.
- **Headache.** Your head may throb.

Causes

Heatstroke can occur as a result of:

- Exposure to a hot environment
- Strenuous activity

In either type of heatstroke, your condition can be brought on by:

- Wearing excess clothing
- Drinking alcohol
- Becoming dehydrated

When to see a doctor

If you think a person may be experiencing heatstroke, seek immediate medical help. Take immediate action to cool the overheated person while waiting for emergency treatment.

- Get the person into shade or indoors.
- Remove excess clothing.
- Cool the person with whatever means available — put in a cool tub of water or a cool shower, spray with a garden hose, sponge with cool water, fan while misting with cool water, or place ice packs or cold, wet towels on the person's head, neck, armpits and groin.

