

Headaches: When to worry

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Everybody has experienced some sort of headache during their daily life, sometimes it has just nagging discomfort but it may be so severe that it could disrupt your daily activities or make you home bound, not getting any interest in anything.

Tension-type headaches are the most common variety of headaches that we usually suffer from. It may be experienced as a tight band of pain around your head, a dull ache or pressure. It may cause mild to moderate pain on both sides of the head. It can be triggered by stress, neck strain, missed meals, depression, anxiety or lack of sleep. It may vary widely in frequency and can last from 30 minutes to a week. Most intermittent tension-type headaches are easily treated with over the counter medications like aspirin, paracetamol and ibuprofen.

Medications combined with behaviour therapies may be more effective. In addition, alternative therapies aimed at stress reduction may help. They include meditation, relaxation training, cognitive behavioural therapy, biofeedback therapy, massage and gentle neck stretches and heat therapy (warm compress or shower).

Migraines affect three times more in young women than men. Migraines may cause pain that is moderate to severe and may pulsate. It may cause nausea, vomit-



ing, or increased sensitivity to light or sound, may affect only one side of your head or may affect both sides of your head, worsen with daily activity, may last from 4 to 72 hours without treatment, it may occur with the women having oral contraceptive pill.

Migraine treatment is aimed at relieving symptoms and preventing additional attacks. If you know what triggers your migraines, avoiding those triggers and learning how to manage them may help prevent and lessen migraine pain. It cannot be cured but lessen your suffering. You can lessen migraine by: resting in a quiet, dark room; hot or cold compresses to your head or neck; massage and small amounts of

caffeine; over the counter medications such as ibuprofen, paracetamol and aspirin; asking your doctor to prescribe some preventive medicine. Latest treatment is transcranial magnetic stimulation (therapy using electrical currents to stimulate nerve cells in the brain) for migraine with aura.

Cluster headaches occur on and off for weeks at a time over the course of a few months. These headaches are rare, but most often affect men and smokers. Cluster headaches begin and evolve quickly, becoming intense within minutes. It tends to develop at the same time of day or night. It usually affect one side of your head, often behind an eye. It may occur

with tearing, redness or swelling of the eye on the affected side of the head, cause a runny or stuffy nose, typically last from 15 minutes to 3 hours and may cause agitation or a restless feeling. Talk to your doctor so they can arrange the relief as well as preventive therapy.

Medication-overuse headaches occur from overuse of pain relieving medications for headaches for at least three months. Taking pain medication several times per month can increase the risk of developing medication-overuse headaches. These headaches feel dull, aching, throbbing or pounding. It may be most painful when medication first wears off. It can occur daily or nearly daily and sometimes cause nausea, trouble

concentrating or irritability. Typical treatment involves discontinuing the medications that cause these headaches. Sometimes medications need to be tapered off, and sometimes they are stopped altogether.

Seek emergency evaluation if you experience:

- A very severe, sudden headache as it is worst headache you ever have
- Headache after a head injury or fall
- Fever, stiff neck, rash, confusion, seizure, double vision, weakness, numbness or difficulty speaking
- Pain that worsens despite treatment

These symptoms suggest a more serious underlying condition, so it is important to get a prompt diagnosis and treatment. Immediately call your doctor, check your blood pressure and if possible go to the hospital without delay.

Almost everyone gets headaches, and most are nothing to worry about. But if headaches are disrupting your daily activities, work or personal life, it is time to take action. Headaches cannot always be prevented, but your doctor can help you manage the symptoms.

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LIVER CANCER



A Bangladeshi researcher at the forefront of fight against liver cancer

Dr Devanand Sarkar's ground breaking research that uncovered the mechanism of development of liver cancer is now in the spotlight once again. His new research is close to bringing about new treatments for liver cancer.

Dr Sarkar and his colleagues had originally discovered and cloned AEG-1 gene which was overexpressed in liver cancer and made cancer cells resistant to chemotherapy. His team also discovered another gene called SND1 which also promotes liver cancer. After discovering the mechanism, he developed therapeutic approach including nanoparticle-based therapy and other drug that successfully blocked both of these genes in mouse model.

His research also uncovered the link between obesity and liver cancer. Obesity leads to the deposition of fat in the liver called fatty liver disease which causes chronic inflammation and eventually develops into liver cancer.

Dr Sarkar is currently an Associate Professor in the Department of Human and Molecular Genetics and the Associate Director of Education and Training at Massey Cancer Centre, Virginia Commonwealth University, USA. He holds numerous prestigious awards including The Harrison Foundation Distinguished Professorship in Cancer Research. He graduated from Dhaka Medical College and has a doctorate degree from Japan. He moved to the USA thereafter and did his post doctoral fellow in Oncology/Virology, Departments of Pathology and Urology, Columbia University, New York.

Dr Sarkar's ultimate goal is to bring a combination of therapies that offer patients the best chance of beating liver cancer, a potentially aggressive cancer that costs the lives of millions in the world.

HEALTH bulletin



3-4 servings of fruits and vegetables more realistic target for health

Eating three to four servings of fruit, vegetables and legumes per day (375-500g) achieves a similar benefit against the risk of mortality to higher portions, according to a study of more than 135,000 people around the world published in The Lancet.

The findings provide a more affordable option for those in low- and middle-income countries, and may have important implications on household spending and food security in poorer countries.

Global dietary guidelines, like the World Health Organisation, recommend eating five servings of fruit, vegetables or legumes a day (equivalent to minimum 400g), but these targets are unaffordable for most people in low- and middle-income countries. The study suggests that three to four portions amounting to 375-500g could be just as beneficial.

The authors do not recommend changes for people in high-income countries who can afford fruit, vegetables and legumes, but suggest that, for people who live in low- and middle-income countries, this provides an approach that is likely to be more affordable.

Heart attack vs. cardiac arrest: What is the difference?

STAR HEALTH DESK

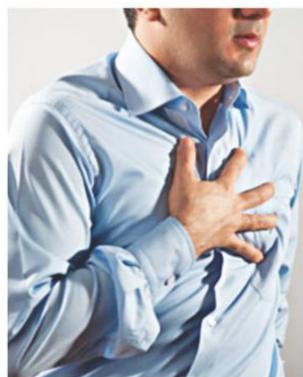
Cardiac arrest, sometimes called sudden cardiac arrest, means that your heart suddenly stops beating. This cuts off blood flow to the brain and other organs. It is an emergency and is deadly if not treated immediately.

Cardiac arrest is quick and drastic: You suddenly collapse, lose consciousness, have no pulse, and are not breathing. Right before it happens, you could be very tired, dizzy, weak, short of breath, or sick to your stomach. You may pass out or have chest pain. But not always. Cardiac arrest can happen with no warning signs at all.

Your heart has an electrical system that keeps it beating regularly. Cardiac arrest can strike if the electrical signals go haywire and cause an irregular heartbeat, or arrhythmia. There are different types of arrhythmias, and most are not dangerous. One called ventricular fibrillation triggers cardiac arrest the most. If this happens, the heart cannot pump enough blood to your body. That is life-threatening within minutes.

Many people who have cardiac arrest also have coronary artery disease. Often, that is where the trouble starts. Having coronary artery disease means less blood flows into your heart. This can lead to a heart attack that damages your heart's electrical system.

Cardiac arrest can also happen



for other reasons, including: major blood loss or severe lack of oxygen; intense exercise, if you have heart problems; too high levels of Potassium or Magnesium, which could lead to a deadly heart rhythm; your genes. You may inherit certain arrhythmias or a tendency to get them; changes to your heart's structure. For instance, an enlarged heart or changes caused by an infection.

Unlike cardiac arrest, your heart does not usually stop during a heart attack. Rather, blood flow is blocked in a heart attack, so your heart does not get enough oxygen. That can kill some of the heart muscle. But the two are linked: The scar tissue that grows as you recover from a heart attack can mess with the heart's electrical signals and could put you at risk. And a heart attack itself can

sometimes trigger cardiac arrest.

Cardiac arrest strikes suddenly. It is an instant crisis. Heart failure is different. It is a condition where your heart gets weaker over time until it cannot send enough blood and oxygen around your body.

When your cells do not get enough of these nutrients, your body does not work as well. You may find it hard to catch your breath when you do simple things like carry groceries, climb stairs, or even walk.

It is more likely if you: have coronary artery disease (this is the biggest risk); are a man; have had arrhythmias or cardiac arrest, or someone in your family has; smoke or abuse drugs or alcohol; have had one or more heart attacks; have diabetes, high blood pressure, or heart failure; are obese.

If you have cardiac arrest, you need immediate treatment with a defibrillator, a machine that sends an electric shock to the heart. This shock sometimes can get your heart to beat normally again. But it must be done within minutes to help.

The doctors will try to find out what caused your cardiac arrest and treat the problem. If you have coronary artery disease, you may get a bypass or a procedure called angioplasty to open narrowed or blocked arteries in your heart. You may also get medicines and advice for lifestyle changes to lower your chances of having it again.

Source: Web MD

Breastfeeding associated with reduced endometriosis risk

A longer duration of breastfeeding is associated with a lower risk for endometriosis in the mother, according to a study in The BMJ.

Researchers studied 72,000 participants from the Nurses' Health Study II who reported at least one pregnancy. Over 20 years' follow-up, 5% had confirmed endometriosis.

For every 3 additional months of total breastfeeding (up to 45 months), the risk for endometriosis fell by 3%. Women who breast-fed exclusively for 18 months or more across their reproductive lives had a 27% lower risk than women who did not breast-feed exclusively (199 vs. 413 cases per 100,000 person-years). The association was influenced by longer duration of postpartum amenorrhoea.

The authors note that breast-feeding promotes circulating oxytocin and prolactin and inhibits circulating gonadotropins. They conclude: "Given the chronic and incurable nature of endometriosis, breast feeding should be further investigated as an important modifiable behaviour to mitigate risk for pregnant women."



Sinusitis

Symptoms

- A green or yellow discharge from your nose
- A blocked nose
- Pain and tenderness around your cheeks, eyes or forehead
- A high temperature (fever) of 38°C (100.4°F) or more
- Toothache
- Bad breath (halitosis)

Prevention

- Treat stuffiness (nasal congestion) caused by colds or allergies promptly.
- Avoid smoking.
- If you have allergies, avoid the things that trigger your allergy attacks.
- Make sure your child gets all the recommended immunizations.

