

Winter illnesses and how to deal with them

STAR HEALTH DESK

Some health problems, such as asthma, sore throat and cold sores, are triggered or worsened by cold weather. Here is how to deal with cold weather ailments.

Colds: You can help prevent colds by washing your hands regularly. This destroys bugs that you may have picked up from touching surfaces used by other people, such as light switches and door handles. It is also important to keep the house and any household items such as cups, glasses and towels clean, especially if someone in your house is ill.

Sore throat: Sore throats are common in winter and are almost always caused by viral infections. There is some evidence that changes in temperature, such as going from a warm, centrally heated room to the icy outdoors, can also affect the throat.

Asthma: Cold air is a major trigger of asthma symptoms such as wheezing and shortness of breath. People with asthma should be especially careful in winter. Stay indoors on very cold, windy days. If you do go out, wear a scarf loosely over your nose and mouth. Be extra vigilant about taking your regular medications, and keep reliever inhalers close by.

Norovirus: Also known as the winter vomiting bug, norovirus is an extremely infectious stomach bug. It can strike all year round, but is more common in winter and in places such as hotels, hospitals, nursing homes and schools. The illness is



unpleasant, but it is usually over within a few days. When people are ill with vomiting and diarrhoea, it is important to drink plenty of fluids to prevent dehydration.

Painful joints: Many people with arthritis say their joints become more painful and stiff in winter. There is no evidence that changes in the weather cause joint damage. Daily exercise can boost a person's mental and physical state. Swimming is ideal as it is easy on the joints.

Cold sores: Most of us recognise that cold sores are a sign that we are run down or under stress. While there is no cure for cold sores, you can reduce the chances of getting one by looking after yourself through winter.

Heart attacks: Heart attacks are more common in winter. This may be because cold weather increases blood pressure and puts more strain on the heart. Your heart also has to work harder to maintain body

heat when it is cold. Stay warm in your home. Wrap up warm when you go out and wear a hat, scarf and gloves.

Cold hands and feet: Raynaud's phenomenon is a common condition that makes your fingers and toes change colour and become very painful in cold weather. Fingers can go white, then blue, then red, and throb and tingle. The small blood vessels of the hands and feet go into spasm, temporarily reducing blood flow to your hands and feet. In severe cases, medication can help, but most people manage to live with their symptoms.

Dry skin: Dry skin is a common condition and is often worse during the winter, when environmental humidity is low. Moisturising is essential during winter. Contrary to popular belief, moisturising lotions and creams are not absorbed by the skin. Instead, they act as a sealant to stop the skin's natural moisture evaporating away. The best time to apply moisturiser is after a bath or shower while your skin is still moist, and again at bedtime.

Flu: Flu can be a major killer of vulnerable people. People aged 65 and over, pregnant women and people with long-term health conditions, including diabetes, kidney disease and chronic obstructive pulmonary disease (COPD), are particularly at risk. The best way to prevent getting flu is to have the flu jab (or flu nasal spray for children aged 2 to 17). The flu vaccine gives good protection against flu and lasts for one year.

HEALTHbulletin



Air pollution alerts may be inadequate in protecting public health

The air quality alert programme in Toronto (Canada) had limited effects in protecting the public's health from air pollution between 2003 and 2012, according to an observational study of 2.6 million people published in The Lancet Planetary Health journal.

Toronto has low to moderate air pollution levels, but spikes in air pollution remain common. On these days, authorities issue air quality alerts to warn the public and encourage people to reduce physical activities outdoors. The programme is based on information campaigns (web notifications and media coverage), rather than enforceable public actions. This type of programme is used elsewhere where air pollution levels are also similar.

The study authors suggest that air pollution problems may be best addressed through collective and enforceable actions. These could include improved urban and transportation planning, and improved fuel standards and emission control, rather than advising individuals and leaving to them to protect themselves from the harmful effects of air pollution.

Occupational therapy for scarf injury

RABEYA FERDOUS

Scarf is a part of the traditional dress of women in Bangladesh. Women wear it in different styles. But it can cause harm, sometimes even death may also occur. Scarf injury is a common cause of spinal cord injury (SCI) in our country. This may cause SCI in cervical region.

Spinal cord is the most important part of human body. It can get injured for various reasons. It can cause paralysis of the body.

Symptoms of spinal cord injury include both hands and legs or both legs (lower half of the body) can be paralysed; difficulty to control body movement; difficulty to understand sensation; and person may have problem to perform daily activities like eating, dressing, bathing, combing hair, brushing teeth and so on.

Why occupational therapy is required

The occupational therapy services in

the spinal cord injury start from admission to discharge into the community. The main areas of occupational therapy intervention are:

Bed mobility and functional transfers: Training and practice in bed mobility and in getting to and from the bed, wheelchair, shower chair, toilet, bath, stair lift, sofa, car and other transfers for daily living etc.

Daily living skills: Training and practice in self-care and domestic tasks such as washing, dressing, feeding, drinking, grooming and housekeeping.

Wheelchair, posture and cushion requirements: Trial and assessment for a wheelchair that allows for maximum independence, identification of appropriate pressure relieving cushions, posture assessment and identification of correction/support systems required, liaison then takes place with each patient's local wheelchair service for provision of equipment.

Hand therapy: Maintaining range



A woman shows marks of surgery done on her neck at the Centre for the Rehabilitation of the Paralyzed. She was injured when one end of her scarf got tangled in a prop-shaft of an easy bike.

PHOTO: RASHED SHUMON

of movement, oedema management, assessment and training of functional potential, splint provision to prevent deformity, maintain aesthetics and replace function etc.

Communication aids: Trial of equipment to aid communication such as telephone adaptations, writing splints, computer keyboard hand splints, mouth sticks, and environmental control units etc.

Community living skills: Advice on returning to work, returning to driving, training and practice in advanced wheelchair skills, arranging driving lessons, assistance with establishing routines and problem solving.

Leisure and vocational training: Involve the patient in different leisure activities as well as select vocational training area according to preference.

Home modification: Occupational therapist modifies the patients' home according to needs.

In Bangladesh, The Centre for Rehabilitation of the Paralyzed (CRP) is working with this type of patients from acute phase to community reintegration phase. So if you know any patient with spinal cord injury then please refer them to CRP for proper occupational therapy.

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EMERGENCY



PHOTO: WHO

Diphtheria vaccination held in Cox's Bazar

As schools reopened on 1st January after the winter break, children in Ukhia sub-district of Cox's Bazar, Bangladesh, lined up to not only receive new books, but also a dose of diphtheria tetanus (DT) vaccine. Children were vaccinated by World Health Organisation (WHO) and United Nations International Children's Emergency Fund (UNICEF) mobilised vaccinators and military nurses.

School children, living in areas close to the Rohingya camps in Ukhia and Tekhna sub-districts are being administered a dose of DT vaccine, as part of the diphtheria outbreak response.

"Childhood vaccination coverage is already high in Bangladesh. Protecting children with another dose of DT as a precautionary measure, will help to curtail further spread of diphtheria," Dr Roderico Ofri, Regional Emergency Director said, adding that this initiative demonstrates the health sector's commitment to protect people, particularly children, through vaccination.

The school vaccination initiative was planned on 1st January as children report to schools in large numbers to receive free books given by government at the start of the academic year.

Earlier, 149,962 children six months to six years were administered vaccines for diphtheria and other life threatening diseases in a vaccination campaign that ended on 31st December 2017. Additionally, 165,927 children and adolescents aged 7 years to 15 years were given DT vaccine.

Diphtheria is an infectious respiratory disease. It spreads through air droplets by coughing or sneezing. Risk factors include crowding, poor hygiene and lack of immunisation.

Between 8 November and 31 December, 28 deaths and 3,014 suspected cases of diphtheria have been reported from Cox's Bazar. Nearly 10,594 contacts of these suspected cases have been put on diphtheria preventive medication.

Healthy eating most beneficial to those at high risk for obesity



The benefits of a healthy diet may be greatest in those at the highest genetic risk for obesity, according to a study in The BMJ.

Researchers examined weight change among roughly 10,000 U.S. health professionals from 1986 to 2006. Participants completed food-frequency questionnaires every 4 years and had blood samples tested for 77 genetic variants associated with body-mass index.

The researchers found that as diet quality improved over time — as assessed by adherence to diets such as Dietary Approaches to Stop Hypertension (DASH) — BMI and body weight decreased. These effects were more pronounced in participants at high genetic risk for obesity than among those at low genetic risk.



/StarHealthBD

Over a lifetime you have a **20 per cent** or one in five, chance of having an episode of **Depression**



Major depressive disorder is a mental disorder characterized by a pervasive and persistent low mood that is accompanied by low of interest by low self-esteem and by a loss of interest or pleasure in normally enjoyable activities

- Persistent sad, anxious, or empty mood
- Feelings of hopelessness or pessimism
- Feelings of guilt, worthlessness, or hopelessness
- Loss of interest or pleasure in hobbies and activities that were once enjoyed, including sex
- Decreased energy, fatigue, being "slowed down"
- Difficulty concentrating, remembering, or making decisions
- Insomnia, early morning awakening or over-sleeping
- Appetite and/or weight loss, or overeating & weight gain
- Thoughts of death or suicide, suicide attempts
- Restlessness, irritability

