

World Health Day 2019

Health for all: everyone, everywhere

STAR HEALTH REPORT

Key to achieving universal health coverage (UHC) is ensuring that everyone can obtain the care they need, when they need it, right in the heart of the community. Progress is being made in countries in all regions of the world. But millions of people still have no access at all to health care. Millions more are forced to choose between health care and other daily expenses such as food, clothing and even a home. Each year World Health Day is being celebrated on 7 April.

World Health Day is a chance to celebrate health and remind world leaders that everyone should be able to access the health care they need, when and where they need it. Advocacy events will be held around the world to fuel the momentum of the #HealthForAll movement and to highlight the goal of achieving a fairer, healthier world — in which no one is left behind. The focus will be on equity and solidarity — on raising the bar for health for everyone, everywhere by addressing gaps in services, and leaving no one behind. The theme for World Health Day this year is: *Health for all — everyone, everywhere.*

Why universal health coverage and primary health care? UHC means that all people have access to the quality health



services they need, when and where they need them, without financial hardship. This is possible and it starts with strong primary health care.

Primary health care is a whole-of-society approach to health and wellbeing centred on the needs and preferences of individuals, families and communities. To make health for all a reality, governments need to invest in quality, accessible primary health care. Health workers need to care and advocate for patients and educate them on how to get and stay healthy. Individuals and communities need to be empowered to take care of their own

health.

Many countries are already making progress towards UHC. All countries can take actions to move more rapidly towards it, or to maintain the gains they have already made.

In countries where health services have traditionally been accessible and affordable, governments are finding it increasingly difficult to respond to the ever-growing health needs of the populations and the increasing costs of health services.

Moving towards UHC requires strengthening health systems in all countries. Robust financing structures are key. When people

have to pay most of the cost for health services out of their own pockets, the poor are often unable to obtain many of the services they need, and even the rich may be exposed to financial hardship in the event of severe or long-term illness.

Pooling funds from compulsory funding sources (such as mandatory insurance contributions) can spread the financial risks of illness across a population.

Primary health care is the most efficient and cost effective way to achieve universal health coverage around the world. To meet the health workforce requirements of

the Sustainable Development Goals and UHC targets, over 18 million additional health workers are needed by 2030.

Gaps in the supply of and demand for health workers are concentrated in low- and lower-middle-income countries. The growing demand for health workers is projected to add an estimated 40 million health sector jobs to the global economy by 2030.

Investments are needed from both public and private sectors in health worker education, as well as in the creation and filling of funded positions in the health sector and the health economy. The Government of Bangladesh is committed to achieve universal health coverage by strengthening the accessibility of primary health care for the citizens of Bangladesh. As part of the initiative, a 'National Protocol for Management of Diabetes and Hypertension' has been developed and is being rolled out across the country.

The chief of the expert panel for the protocol and Secretary General of Association of Physicians of Bangladesh (APB) Dr. S. M. Mostafa Zaman stressed on the need of public awareness regarding the primary health issues and how to prevent this. He also underscored the media's role in spreading the messages.

YOGA

The rise in the popularity of yoga

SHAZIA OMAR

If the body is stiff and the mind is rigid, what life can one live? The practice of yoga is to remove weeds from the body so that a garden can grow. Yoga stretches and strengthens the mind, body and spirit. No wonder yoga is the top choice for people living healthy lifestyles.

In Bangladesh, the number of yoga teachers and studios offering yoga has increased tremendously. People are becoming more health conscious. Youths want active lives rather than sedentary lives that lead to back problems, depression and diabetes. Increasingly corporates are offering yoga classes to improve team performance and schools are offering yoga classes to increase concentration span of children. The rise in popularity of yoga probably represents a general shift in attitude towards more conscientious living.

There are many proven benefits of yoga such as stress relief, calming of the nerves, increased strength and flexibility, enhanced creativity, higher immunity and improved confidence. Yoga improves mental, psychological and physical health. It helps concentration, circulation and respiration. Yoga therapy helps the body heal from illnesses, disease and injury. Yoga offers practitioners a deeper understanding of self.

There are three levels of quest through yoga. The external quest is for firmness of body. The internal quest is for steadiness of intelligence. The innermost quest is for benevolence of spirit. In yoga, each pose should be held in a state of calm bliss. Each movement should be an art. Awareness should be distributed across the body so every pore of the skin becomes an eye.

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HEALTH bulletin

Globally, one in five deaths are associated with poor diet

STAR HEALTH DESK

People in almost every region of the world could benefit from rebalancing their diets to eat optimal amounts of various foods and nutrients, according to the Global Burden of Disease study tracking trends in consumption of 15 dietary factors from 1990 to 2017 in 195 countries, published in The Lancet.

The study estimates that one in five deaths globally — equivalent to 11 million deaths — are associated with poor diet, and diet contributes to a range of chronic diseases in people around the world.

In 2017, more deaths were caused by diets with too low amounts of foods such as whole grains, fruit, nuts and seeds than by diets with high levels of foods like trans fats, sugary drinks, and high levels of red and processed meats.

The authors say that their findings highlight the urgent need for coordinated global efforts to improve diet, through collaboration with various sections of the food system and policies that drive balanced diets.

Overall in 2017, an estimated 11 million deaths were attributable to poor diet. Diets high in sodium, low in whole grains, and low in fruit together accounted for more than half of all diet-related deaths globally in 2017.

The causes of these deaths included 10 million deaths from cardiovascular disease, 913,000 cancer deaths, and almost 339,000 deaths from type 2 diabetes. Deaths related to diet have increased from 8 million in 1990, largely due to increases in the population and population ageing.

The largest shortfalls in optimal intake were seen for nuts and seeds,

milk, whole grains, and the largest excesses were seen for sugar sweetened beverages, processed meat and sodium. On an average, the world only ate 12% of the recommended amount of nuts and seeds (around 3g average intake per day, compared with 21g recommended per day), and drank around ten times the recommended amount of sugar sweetened beverages (49g average intake, compared with 3g recommended).

Regionally, high sodium intake (above 3g per day) was the leading dietary risk for death and disease in China, Japan, and Thailand.

In Bangladesh, low intake of fruits (below 250g per day) was the leading dietary risk. High consumption of red meat (above 23g per day), processed meat (above 2g per day), trans fat (above 0.5% total daily energy), and sugar-sweetened beverages (above 3g per day) were towards the bottom in ranking of dietary risks for death and disease for highly populated countries.

The magnitude of diet-related disease highlights that many existing campaigns have not been effective and the authors call for new food system interventions to rebalance diets around the world.

Importantly, they note that changes must be sensitive to the environmental effects of the global food system to avoid adverse effects on climate change, biodiversity loss, land degradation, depleting freshwater, and soil degradation.



Promoting better glucose management for type 2 diabetes

Among patients with type 2 diabetes who use insulin, many have difficulty reaching their targets for glycaemic control.

Barriers to success include the months that usually pass between opportunities for clinicians to titrate insulin doses and the time required to calculate these adjustments and convey them to patients.

In a study from three U.S. diabetes centres, researchers evaluated the effectiveness and safety of a novel system (d-Nav Insulin Guidance System) that measures, records, and analyses scheduled fingerstick blood glucose levels and uses an algorithm to recommend insulin dose adjustments directly to patients.

No difference was noted in frequency of hypoglycaemic events. On average, the system algorithm adjusted insulin doses 1.1 times weekly.

At study's end, total daily insulin doses for system users were more than 60% higher than those for control patients.



NOWW to improve nutrition for women RMG workers in Bangladesh

Bangladesh Knitwear manufacturers and Exporters Association (BKMEA) and Nutrition International jointly launched a new initiative 'Nutrition of Working Women (NoWW)' to improve nutrition of women workers of garment factories in Bangladesh recently, says a press release.

Abu Sayeed Al Mahmood Swapon, MP, Honourable Whip, Bangladesh Parliament was present as the Chief Guest. High Commissioner of Canada to Bangladesh, Benoit Préfontaine; Country Director of International Labor Organisation Bangladesh, Tuomo Poutiainen; Vice President Strategy and Growth of Nutrition International, Brian Harrigan and Country Director of Nutrition International Bangladesh Zaki Hasan were also present in the occasion.

Through a joint investment of BKMEA and Nutrition International, supported by the Government of Canada, the NoWW initiative aims to benefit a total of 240,000 workers including 180,000 women employed in the garment factories in Bangladesh located in greater Dhaka and Narayanganj over a period of 18 months.



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

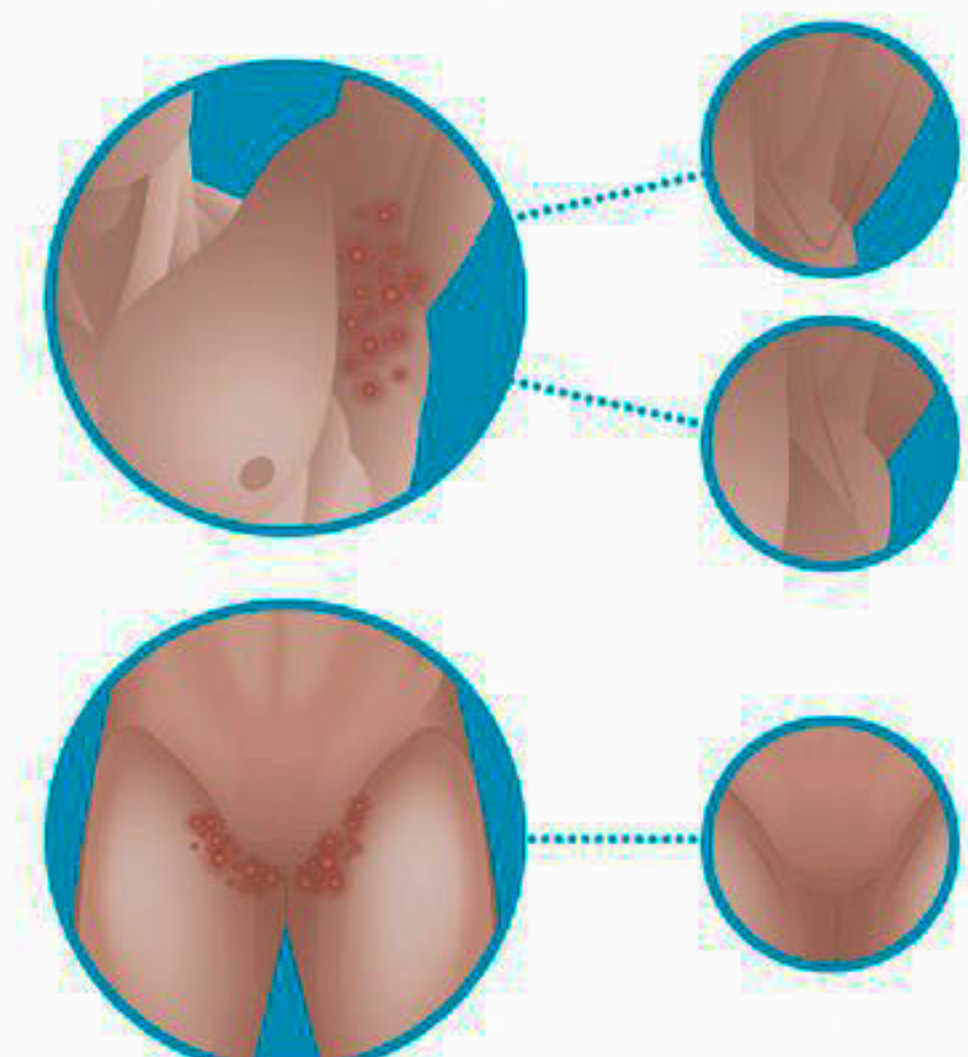
Persistent and severe hidradenitis suppurativa often causes complications, including:

- 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



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