

WORLD AIDS DAY 2019

Communities make the difference

STAR HEALTH DESK

World AIDS Day, held each year on December 1, is an opportunity to celebrate and support global efforts to prevent new HIV infections, increase HIV awareness and knowledge, and support those living with HIV.

Since World AIDS Day was first observed more than 30 years ago, progress in preventing and treating HIV has been extraordinary. HIV medicines are available to help people with HIV live long, healthy lives and prevent HIV transmission.

Also, effective HIV prevention methods, including pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP), are available. The theme for the 2019 observance is "Ending the HIV/AIDS Epidemic: Community by Community."

Communities are a unique force behind the success of the HIV response. On World AIDS Day 2019, World Health Organisation (WHO) is highlighting the difference the communities are making to end the HIV epidemic while drawing global attention to the need for their broader engagement in strengthening primary health care.

KEY MESSAGES
1. Today 4 in 5 people with HIV get tested, and 2 in 3 get treatment: communities played a major role in achieving this success.
• Of the estimated 37.9 million

people living with HIV at the end of 2018, 79% were diagnosed, 62% received treatment, and 53% had achieved suppression of the HIV with low risk of infecting others.
• One of the key contributors to this success in all countries has been the thousands of members



of HIV and "key population" community networks and community health workers, many of whom are living with or affected by HIV.
2. WHO recommends countries to adopt community-based HIV testing, prevention, treatment and care as a core strategy.
• WHO recommends a strategic mix of approaches for testing, including community-based testing, self-testing, and provider-

assisted referral to reach people at the highest risk of HIV.
• Countries like South Africa and Rwanda have shown how trained peers or community health workers have delivered rapid diagnostic tests with same-day results, enabling more people to

know their HIV status.
• WHO recommends increased rapid testing in community settings for key populations in Europe, Asia, and the Americas to replace laborious approaches causing weeks of delays in test results and treatment initiation.
3. Community-based HIV treatment and monitoring saves money and reduces workloads for doctors, nurses, and other health care professionals.
• WHO recommends countries

train and mobilise community health workers, including people living with HIV, to provide decentralised and differentiated HIV treatment and care.
• Evidence shows more people continue with HIV treatment when peer educators counsel and

support each other.
• WHO also recommends that community health workers support monitoring and data collection.
4. Expanding the role of communities and community-based health care will help countries meet global HIV and UHC targets.
• Health services are struggling to provide all people with HIV services they need. Global fast-track targets for HIV for 2020 are

unlikely to be met unless more support becomes available.
• The most glaring gap is seen in prevention. In 2018, 1.7 million people were newly infected with HIV – this number must reduce by three-fold to meet the 2020 target of 500 000.
• Testing and treatment coverage is off-track, too – especially for key populations and children. For example, more than half of all new infections are among key populations and their partners; only half of the children in need are receiving ART, of which only half achieved viral suppression due to the use of suboptimal medicines.
5. Community and civil society engagement must remain a key strategy to boost primary health care.
• Activism and civil society action have been key resources in the HIV response from the early days, inspiring the global health community to galvanise efforts for increased equity, respect for health and human rights, and scientific innovation.
• In September 2019, global leaders signed the first-ever UN declaration on UHC with a central focus on primary health care, tailored for and built through empowered and engaged communities.
• Today, people-centred care, community, and civil society engagement are included in three Sustainable Development Goal targets.

MATERNAL HEALTH



In quest of managing high risk labour and delivery management

Recently SAJIDA Foundation, in collaboration with Canadian health professionals Team Broken Earth, organised a three-day hands-on training programme on the best practices of High Risk Labour and Delivery Management with an inauguration ceremony chaired by National Prof Dr Shahla Khatun and inaugurated by the Director General Health Services, Ministry of Health and Family Welfares, Md Abul Kalam Azad.
Ms Zahida Fizza Kabir, Executive Director of SAJIDA Foundation, addressed the audience with a welcome speech. She said, "Bangladesh is gradually moving into digitising the health systems as technology is addressing the enormity of the need."
The three-day comprehensive training designed to ensure the learnings be applied to combat the maternal and neonatal mortality and morbidity in Bangladesh, is based on the high burdens of maternal and new-born mortality during intra and postpartum periods in Bangladesh.
It works as a highly relevant initiative in the improvement of care in this field for health practitioners like physicians, nurses and midwives alike. The course was aimed to provide an understanding of the latest best practices to help health practitioners in providing better care for women during labour, their foetuses, as well as new-borns and their families.

HEALTH bulletin



Two vaping advisories released by CDC

The United States Centres for Disease Control and Prevention (CDC) has issued two advisories — one on how to evaluate flu-like symptoms in the face of concerns about vaping, and the other about how the CDC will count and report e-cigarette and vaping-associated lung injuries (EVALIs).
Given that EVALI symptoms are similar to those of influenza, the agency makes several recommendations in Morbidity and Mortality Weekly Report (MMWR), among them: Ask patients with flu-like symptoms about their use of e-cigarettes and vaping. Strongly consider influenza testing during flu season. Evaluate suspected EVALI cases with pulse oximetry and chest imaging. Consider outpatient management for stable EVALI. Use corticosteroids with caution in patients who are not admitted.
From an epidemiologic standpoint, the CDC says it will no longer count non-hospitalised EVALI cases, given that hospitalised and non-hospitalised patients share similar characteristics and that only 5% of cases were non-hospitalised.
The advisory recommends that patients with EVALI can be managed as outpatients if they have oxygen saturations at 95% or above on room air, no respiratory distress, and no comorbid conditions that could impair pulmonary reserve.

BLACK PEPPER: more than your cooking partner

RIZWAN AHMED

Ever think about making your food even more delicious with black pepper? Well, I bet you have tried this so far, as women in Bangladesh often want to make their recipes unique and spicy with its subtle heat and bold flavour.
Black pepper is often considered as the 'king of spices', which is derived from the dried, unripe fruit of the native Indian plant Piper nigrum. A bit of black pepper can be a tasty seasoning for cooked vegetables, beef, fish, pasta dishes, poultry, soup, and many more. But, the question is, do you ever consider black pepper for its health benefits apart from cooking?
Basically, 'Piperine' is the main chemical constituent of pepper that is one kind of alkaloid (3-9%). Black pepper is such an ingredient that offers a lot of health benefits that we might not know.
Besides adding flavour to foods, black pepper can act as an antioxidant and offer a variety of health benefits. Excess amounts of free radical damage may lead to inflammation, premature ageing, and certain cancers. Antioxidants are compounds that fight cellular damage caused by unstable molecules called free radicals.
Research also shows that black pepper may improve the absorption of beta-carotene, a compound found in fruits and vegetables that our body converts to vitamin A.

Beta-carotene act as a powerful antioxidant that may combat cellular damage, thus preventing conditions like heart disease.
Piperine has been shown to improve brain function in animal studies. In particular, it has demonstrated potential benefits for symptoms related to degenerative brain conditions like Alzheimer's and Parkinson's disease.
The most interesting case is that test-tube studies found that piperine slows down the replication of cancer cells. Reviews noted that black pepper extracts were able to stop up to 85% of cellular damage associated with cancer development. Though these results are promising, more studies are needed to understand the potential cancer-fighting properties

of black pepper.
For example, a study conducted at the University of Michigan's Cancer Centre, says that black pepper, along with turmeric, is capable of preventing the growth of cancerous stem cells in breast tumours.
Black pepper is believed to increase the absorption of dietary supplements that have potential cholesterol-lowering effects like turmeric and red yeast rice. For example, studies have shown that black pepper may increase the intake of the active component of turmeric curcumin by up to 2000%.
Furthermore, you can use black pepper as a natural anti-depressant also. Several studies also suggest it in the use of epilepsy.
However, the use of black pepper should be limited as excess use may cause a burning sensation in the stomach and eyes (even though it is temporary). One must not inhale black pepper as it may lead to respiratory problems like respiratory irritation and asthma etc. Patients taking cyclosporine A, digoxin, and cytochrome P450 should avoid consuming black pepper as it shows contraindication.
So, the use of black pepper not only provide spicy food but also helps you to improve specific health conditions silently. Just make sure to use it between its safety margins.

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Foods that lower cholesterol

Changing your foods can lower your cholesterol and improve the armada of fats floating through your bloodstream. Adding foods that lower LDL, the harmful cholesterol-carrying particle that contributes to artery-clogging atherosclerosis, is the best way to achieve a low cholesterol diet.
Oats: An easy first step to lowering your cholesterol is having a bowl of oatmeal or cold oat-based cereal for breakfast. It gives you 1 to 2 grams of soluble fibre. Add a banana or some strawberries for another half-gram.
Barley and other whole grains: Like oats and oat bran, barley and other whole grains can help lower the risk of heart disease, mainly via the soluble fibre they deliver.
Beans: Beans are especially rich in soluble fibre. They also take a while for the body to digest, meaning you feel full for longer after a meal. That is one reason beans are useful food for folks trying to lose weight.
Nuts: A bushel of studies shows that eating almonds, walnuts, peanuts, and other nuts are good for the heart. Two ounces of nuts a day can slightly lower LDL, on the order of 5%.
Vegetable oils: Using liquid vegetable oils such as canola, sunflower, and others in place of butter or shortening when cooking or at the table helps lower LDL.
Apples, grapes, strawberries and citrus fruits: These fruits are rich in pectin, a type of soluble fibre that lowers LDL.
Fatty fish: Eating fish two or three times a week can lower LDL in two ways: by replacing meat, which has LDL-boosting saturated fats, and by delivering LDL-lowering omega-3 fats.



WORLD AIDS DAY 2019
DECEMBER 1

AIDS (acquired immunodeficiency syndrome) is a syndrome caused by a virus called HIV (human immunodeficiency virus). The disease alters the immune system, making people much more vulnerable to infections and diseases. This susceptibility worsens if the syndrome progresses.

How is HIV transmitted?

- ✗ Sexual transmission
- ✗ Perinatal transmission
- ✗ Blood transmission

HIV and AIDS myths and facts

There are many misconceptions about HIV and AIDS. The virus CANNOT be transmitted from:

- ✗ Shaking hands
- ✗ Hugging
- ✗ Casual kissing
- ✗ Sneezing
- ✗ Touching unbroken skin
- ✗ Using the same toilet
- ✗ Sharing towels
- ✗ Sharing cutlery
- ✗ Mouth-to-mouth resuscitation
- ✗ Or other forms of "casual contact"

Myth : HIV always leads to AIDS

HIV is the infection that causes AIDS. But this doesn't mean all HIV-positive individuals will develop AIDS. AIDS is a syndrome of immune system deficiency that is the result of HIV attacking the immune system over time and is associated with weakened immune response and opportunistic infections. AIDS is prevented by early treatment of HIV infection.

With current therapies, levels of HIV infection can be controlled and kept low, maintaining a healthy immune system for a long time and therefore preventing opportunistic infections and a diagnosis of AIDS," explains Dr. Richard Jimenez, professor of public health at Walden University.



In Search of Excellence