# Reproductive health of men: Why is it important?

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A man's health before conception can distort sperm in such a way that it can affect his children's health. This includes the father's age, his habits — alcohol and drug use, smoking — as well as his exposure to chemicals at home, work, and in the environment. There is increasing evidence that damaged sperm can affect pregnancy outcomes, from miscarriage and birth weight to birth defects and childhood illnesses.

We still do not have a male birth control pill. Men's contraceptive options have not been researched well for decades. They have condoms and vasectomies, and that is all. In contrast, the early emergence of obstetrics and gynaecology generated robust research due to which there are numerous interventions for women's contraception, infertility, pregnancy, and birth.

Males do not know that sperm takes two to three months to grow in the male body, which is the key window before conception when each step probably matters most. They do not know enough that with every passing year, older men are more likely to develop new mutations in their sperm, which have been



linked to an increased risk of autism and schizophrenia in their children. So it is important to pay more attention to men's sexual health because it has the potential to improve men's lives and the lives of their children.

How males can start to look after themselves: Boys from 9 years old can get the Human papilloma virus (HPV) vaccine through the school vaccination programme. The vaccine is very safe and most effective when given to young men before they become sexually active. HPV affects most people at some point in their lives without them realising it. In most cases

it is harmless, but it can lead to genital warts and cause cancer, including mouth and throat cancers, and cancer of the reproductive organs.

During puberty alongside physical changes, like developing a deeper voice, more facial hair,

growing taller and muscular, boys may also have ejaculation and frequent erections. Normalise talking about these changes with boys. It will help them with guidance amidst new changes.

Males need to know more about family planning. Condoms are the only (no permanent) method of contraception available for men, however, males affordable, and very effective.

need to talk maturely with their partner about her contraception to increase their protection, and assist her to appointments.

Men aged 15-39 are the most at-risk age group for developing testicular cancer. Regularly selfchecking their testicles will help men catch any unusual changes. Early detection is the best way to beat testicular cancer.

Males can choose a permanent method of contraception as an idea for couples who have completed their families and do not want to worry about contraception. A vasectomy is an excellent option, as it is quick,

How society can focus on the reproductive health of males: Focusing attention on men's reproductive health can happen in several ways. Health care providers can disrupt the implicit association of reproductive health with women's health by offering patients information about the importance of sperm health. Biomedical researchers can work to identify the precise levels of risk posed by men's age, behaviours, and exposures. Health agencies and professional medical associations can develop materials to educate the public about how men's health can affect children's health.

In addition to emphasising that both women's and men's age and health matters, we can also move away from stigmatising and blaming individuals for reproductive outcomes. COVID-19 is providing us with a deadly reminder that any one person's health is not solely a matter of their individual choices. It is not possible to reduce reproductive risk to zero. But paying more attention to men's reproductive health has the potential to improve life for generations to come.

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#### **DID YOU KNOW?**



## People with past COVID-19 benefit from immunisation

Some patients with past SARS-CoV-2 infections think they have been "naturally immunised" and would not benefit from COVID-19 vaccination. Two new studies add to the evidence showing that vaccination generates a more vigorous B and T cell response than does natural infection and that vaccination is particularly potent in people with previous SARS-CoV-2 infections.

Researchers evaluated people who were vaccinated (with an mRNA vaccine) after natural infection and people who were vaccinated but had no prior natural infection. In people who were vaccinated after natural infections, neutralising antibodies against the beta variant were 25 times higher than after vaccination alone and 100 times higher than after natural infection alone. This result was remarkable, given that natural infections were almost never with the beta variant and that vaccines did not target the beta-variant spike protein. Memory B cells against SARS-CoV-2 were 5- to 10-fold higher when vaccination followed natural infection than after natural infection or vaccination alone.

After natural infection, immunological memory (both B and T cells) persists for at least 8 months (and probably longer). Natural protection against symptomatic reinfection with the initial strain, as well as the alpha variant, is between 93% and 100%, even after asymptomatic infection. People who have had COVID-19 are well advised to be vaccinated.

## H E A L T H bulletin



### **Experts call for urgent action** to improve physical activity worldwide

## Dealing with the deadliest variant of COVID-19

#### PROF M KARIM KHAN

COVID-19 has already made our life restricted, miserable and created a panic amongst us all. The Delta variant is a newcomer which started its devastating journey from India and by now has spread in more than fifty countries of the world. We know by now that the COVID-19 is highly infectious but the Delta variant is more than fifty times infectious than the alpha variant. It spreads very rapidly in the unvaccinated people and if health hygiene is not maintained.

The symptoms for the Delta variant are a bit different than the other previous variants. There is mild or no fever, malaise, headach body ache, rhinitis and mild or no cough. But the classic symptoms of COVID-19 are fever, cough, sore throat, loss of appetite, diarrhoea and loss of smell, following which there was respiratory distress and fall of oxygen saturation. Initial symptoms of the Delta variant are much milder and often ignored, thus spreads quickly. The Delta variant causes hypoxia earlier, hence the patient needs early hospitalisation but recovers quickly with timely supportive treatment and if not immunocompromised, not having uncontrolled diabetes, hypertension or asthma. Research suggests the Delta variant affects less for those having two doses of vaccine. The encouraging point is that all the recommended vaccines produce some immunity against the Delta variant.

to more deaths, both through the increase in cases and by overwhelming the health system, early research suggests that the Delta variant is possibly more dangerous than the Alpha variant and twice as likely to lead to hospitalisation. Mutations in the Delta variant make it replicate faster and evade the body's immunity mechanism. According to the World Health Organisation (WHO), it is the 'fastest and fittest' variant yet. The Delta variant is 50-60% more transmissible than the Alpha variant. Wearing a face mask properly

does not have any alternative. Along with wearing masks, washing hands often with soap and water gives more protection. Social distancing is also important. Always E-mail: mmukkhan@gmail.com

avoid crowds and crowded places. Vaccinate yourself as and when you get the chance. Nutritious food, a healthy lifestyle & mental strength is important to combat COVID-19 infection as well as to prevent other diseases.

Very recently COVID-19 infection and death is increasing sharply in Bangladesh. We all need to be well alert and cautious to maintain hygiene properly. Community participation is mandatory to combat any infectious disease which is equally applicable for COVID-19. We all have to take the responsibility to combat the situation.

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## Vaccine inequity undermining global economic recovery

COVID-19 vaccine inequity will have a lasting and profound impact on socio-economic recovery in lowand lower-middle income countries without urgent action to boost supply and assure equitable access for every country, including through dose sharing, according to new data released recently by the United Nations Development Programme (UNDP), the World Health Organisation (WHO) and the University of Oxford. A high price per COVID-19 vaccine dose relative to other vaccines and delivery costs - including for the health workforce surge - could put a huge strain on fragile health systems and undermine routine immunisation and essential health services and could cause alarming spikes in measles, pneumonia and diarrhea. There is also a clear risk in terms of foregone opportunities for the expansion of other immunisation services, for example the safe and effective rollout of HPV vaccines. Lower-income countries need timely access to sustainably priced vaccines and timely financial support. These insights come from the Global Dashboard for COVID-19 Vaccine Equity, a joint initiative from UNDP, WHO and the University of Oxford's Blavatnik School of Government, which combines the latest information on COVID-19 vaccination with the most recent socio-economic data to illustrate why accelerating vaccine equity is not only critical to saving lives but also to driving a faster and fairer recovery from the pandemic with benefits for all.

Not enough progress has been made to address physical inactivity worldwide, with adolescents and people living with disabilities (PLWD) among the least likely populations to have the support needed to meet the World Health Organisation (WHO)'s physical activity guidelines. Global efforts to improve physical activity have stalled, with overall deaths caused by physical activity remaining at more than 5 million people per year.

Physical inactivity is linked to an increased risk of noncommunicable diseases (NCDs) such as heart disease, diabetes, and some cancers and costs at least \$54 billion per year in direct health care costs of which \$31 billion is paid by the public sector. The slow progress to improve physical activity worldwide has been exacerbated by the COVID-19 pandemic, with lockdowns likely associated with overall less physical activity worldwide. In addition, inactive people and those with NCDs are far more likely to be hospitalised or die if they develop COVID-19.

These findings come from a new three-paper Series published in The Lancet and launched ahead of the postponed 2020 Olympics in Tokyo, Japan. The authors call for immediate and urgent action to prioritise research and public health measures to improve physical activity worldwide, and ensure physical activity is built into everyday lives.

While an increase in infections alone is troubling and can lead

**Coronavirus: COVID-19** Delta Variant Explained

## **F B** /StarHealthBD

## Hepatitis **Can't Wait**

Every 30 seconds, someone loses their life to hepatitis - don't be one of them





- People living with viral hepatitis unaware can't wait for testing
- People living with hepatitis can't wait for life saving treatments
- Expectant mothers can't wait for hepatitis screening and treatment
- Newborn babies can't wait for birth dose vaccination
- People affected by hepatitis can't wait to end stigma and discrimination

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