

Be aware of HIV/AIDS to fight against the disease

STAR HEALTH DESK

HIV is a serious worldwide public health concern, having claimed the lives of 36.3 million people to date. According to the World Health Organisation, by the end of 2020, an estimated 37.7 million persons were living with HIV. Furthermore, in 2020, 680 000 people died from HIV-related causes.

World AIDS Day takes place on December 1 each year. It is an opportunity for people worldwide to unite in the fight against HIV, to show support for people living with HIV, and to commemorate those who have died from an AIDS-related illness.

The human immunodeficiency virus (HIV) attacks the immune system, weakening people's defences against various illnesses and cancers that healthy immune systems can combat. Infected people become immunodeficient as the virus kills and inhibits the function of immune cells. The CD4 cell count is often used to assess immune function.

AIDS (Acquired Immunodeficiency Syndrome) is a group of diseases caused by infection with the Human Immunodeficiency Virus (HIV). The most advanced stage of HIV infection is AIDS, which, depending on the person, may take several years to develop if not treated.

Depending on the stage of infection, HIV symptoms differ. Though people living with HIV are most infectious in the first few months following infection, many may not realise they are infected until later. For example, in the first few weeks following infection, people may



have no symptoms or an influenza-like sickness, such as fever, headache, rash, or sore throat.

They may develop additional signs and symptoms when the virus impairs their immune system, including enlarged lymph nodes, weight loss, fever, diarrhoea, and cough. In addition, they might acquire serious diseases, including tuberculosis (TB), cryptococcal meningitis, severe bacterial infections, and malignancies like lymphomas and Kaposi's sarcoma if they don't get treatment.

In the following ways HIV can be transmitted from one person to another:

- Sexual contact, considerable exposure to infected bodily fluids or tissues, and

transmission from mother to child during pregnancy, delivery, or nursing are the three primary methods by which HIV is transmitted (known as vertical transmission).

- If faeces, nasal secretions, saliva, sputum, sweat, tears, urine, or vomit are not contaminated with blood, there is no danger of contracting HIV.

- HIV superinfection occurs when two or more strains of HIV are co-infected in the same person.

It is crucial to remember that regular everyday interactions like kissing, hugging, shaking hands, or sharing personal items, food, or drink cannot infect individuals. Also, HIV-positive patients on

antiretroviral therapy (ART) and are virally suppressed do not transfer the virus to their sexual partners.

To avoid contracting HIV, it is critical to be aware of the risk factors. The possible risk factors of HIV are:

- Individuals are more likely to get HIV if they engage in the following behaviours and conditions
- Having unprotected anal or vaginal sex
- Having sexually transmitted infection (STI) such as Syphilis, Herpes, Chlamydia, Gonorrhoea and Bacterial vaginosis
- When injecting drugs, exchanging infected needles, syringes, and other injecting equipment, as well as drug solutions;
- Receiving potentially dangerous injections, blood transfusions, and tissue transplants, as well as medical procedures involving unsterile cutting or piercing; and having needle stick injuries, notably among health care employees

Limiting exposure to risk factors reduces the chance of HIV infection. Other effective HIV prevention strategies include:

- The use of male and female condoms
- Testing and counselling for HIV, STI, and MTCT (mother-to-child transmission)
- Testing and counselling for TB
- Voluntary medical male circumcision (VMMC)
- Use of antiretroviral medications (ARVs)
- Harm reduction for those who inject and use drugs.

To maintain a healthy lifestyle, one must be aware of the sickness.

COVID IN PREGNANCY

Complications in pregnancy and birth increase with COVID-19

Pregnant women with COVID-19 are more likely to have complications with pregnancy and birth than those without, according to the research journal PLOS Medicine.

The study looked at hospitalisation for births in France during the first six months of the pandemic and suggested that vaccination may be useful to protect women and their babies, particularly for women at a higher risk of developing severe COVID-19 infections. Researchers from the Universite de Paris analysed data for hospitalisations for birth after 22 weeks gestation in France between January and June 2020. Of 244,465 births in hospital, 874 or 0.36% of mothers had been diagnosed with COVID-19.

Women in the COVID-19 group were more likely to be older, have obesity, carry more than one baby, or have a history of high blood pressure than those without. In addition, the women with COVID-19 had a higher frequency of admission to ICU; death; preeclampsia and eclampsia; gestational hypertension; haemorrhage either before or after birth; very premature spontaneous or induced birth; and cesarean section.

The authors concluded that, compared to the non-COVID-19 group, women in the COVID-19 group were associated with an increased frequency of admission to ICU, mortality, preeclampsia/eclampsia, gestational hypertension, postpartum haemorrhage, and spontaneous haemorrhage and induced preterm and very preterm birth, fetal distress and cesarean section.



HEALTH bulletin



Rates of type 2 diabetes are higher in people with one of the various common psychiatric disorders

A new study published in a journal *Diabetologia* finds that type 2 diabetes (T2D) prevalence is elevated in people with a psychiatric disorder compared with the general population.

Psychiatric diseases are widespread, affect the quality of life, and increase mortality. This increased mortality is due to more suicides and accidents and increased risk of physical illnesses associated with mental illness, such as cardiovascular and respiratory disorders. Diabetes is a condition that affects between 6% and 9% of the worldwide population. Rates have risen steadily since 1990 and are forecast to do so for the next 20 years.

The study found that people with a sleep disorder had the highest rates of T2D, with 40% of subjects having the disease while its prevalence among individuals with other psychiatric disorders was 21% (binge eating disorder), 16% (substance use disorder), 14% (anxiety disorders), 11% (bipolar disorder), and 11% (psychosis). Prevalence of T2D was lowest among people with an intellectual disability, with 8% of individuals having the disease. In each case, these rates are as high or higher than the 6-9% level of T2D found in the general population.

According to the authors, this physical comorbidity likely contributes to the high T2D prevalence estimates in people with sleep issues. The T2D-sleep disorder link is expected to be bidirectional. Diabetes, especially when combined with poor metabolic control, raises the risk of sleep disorders and vice-versa.

Want to get rid of joint pain?

STAR HEALTH DESK

Joint pain is quite common, particularly as people become older. In one nationwide study, almost one-third of individuals said they had had joint discomfort in the previous 30 days. The most prevalent complaint was knee pain, followed by shoulder and hip discomfort. On the other hand, joint pain may strike anywhere on your body, from your ankles and feet to your shoulders and wrists.

A wide range of conditions can lead to painful joints:

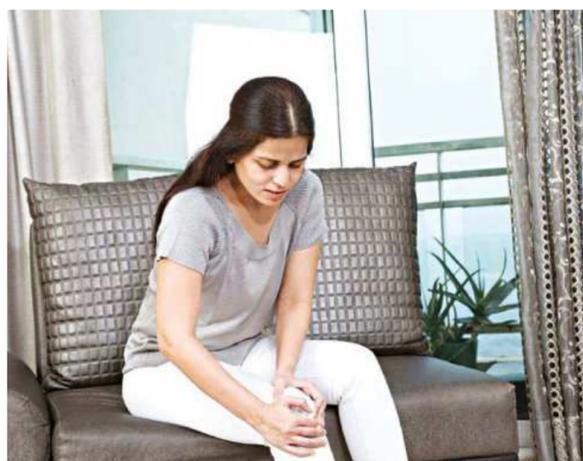
- Osteoarthritis, a "wear and tear" disease, is the most common type of arthritis.
- Rheumatoid arthritis is an autoimmune disorder that happens when your body attacks its tissues.
- Bursitis is when sacs of fluid that help cushion your joints get inflamed.
- Gout is a form of arthritis that most often affects your big toe joint.
- Strains, sprains, and other injuries.

Joint pain can range from mildly irritating to debilitating. It may go away after a few weeks (acute) or last for several weeks or months (chronic). However, even short-term pain and swelling in the joints can affect your quality of life. Whatever the cause of joint pain, you can usually manage it with medication, physical therapy, or alternative treatments.

Your doctor will first try to diagnose and treat the condition causing your joint pain. The goal is to reduce pain and inflammation and preserve joint function.

Treatment options include:

- For moderate-to-severe joint pain with swelling, the doctor prescribed an over-the-counter or prescription nonsteroidal anti-inflammatory drug (NSAID) or



topical medications.

- The doctor may try injections for people who do not find joint pain relief from oral or topical medications.

Steroid injections are most commonly used in patients with arthritis or tendinitis. The procedures are effective, but the effect may be temporary in many situations.

Platelet-rich plasma therapy (PRP) is made from your blood, injected into your painful joint. Your joint contains many platelets and proteins that have anti-inflammatory and immune-modulating effects.

Prolotherapy involves a series of injections of an irritant (often a sugar solution) into joints, ligaments, and tendons. The theory is that the injections stimulate local healing of injured tissues.

- It is possible to strengthen the muscles around the joint, stabilise it, and enhance your range of motion with a physical therapist.

The therapist may utilise ultrasound, heat, cold, electrical nerve stimulation, or manipulation.

Losing weight might help ease sore joints if you are overweight.

Weight loss is achieved by exercise and nutrition, but avoid high-impact workouts that aggravate the joint. One of the most acceptable activities for your joints is swimming or cycling. Swimming lowers joint strain due to water's buoyant properties.

- A few basic home remedies might reduce short-term joint discomfort by resting the joint and avoiding painful activities, icing the joint for 15 minutes every day, wrapping the joint with elastic, elevating the joint.

No matter what treatment you are following, get medical help right away if the pain gets intense, your joint suddenly becomes inflamed or deformed, or you can no longer use the joint at all.

Source: WebMD



Poor quality of sleep associated with poorer control of blood sugar after meals

A new study published in a journal *Diabetologia* finds that later bedtime routines and poor sleep quality are associated with higher blood glucose levels and poorer control of blood sugar following meals. The authors examined whether night-to-night fluctuations in sleep duration, efficiency, or timing affect postprandial (after meal) glucose response to breakfast the following day.

Quality of sleep has a direct causal effect on many life-threatening conditions such as cardiovascular disease, obesity, and type 2 diabetes (T2D); and disturbed sleep caused by conditions such as obstructive sleep apnoea is associated with both the prevalence of T2D and the risk of complications arising from the disease. This and other evidence suggest a strong link between the quality and duration of sleep and the ability of the body to regulate glucose levels properly.

A significant interaction was found between sleep duration and postprandial glycaemic response when the nutritional content of the breakfast meal was also considered. Following a high-carbohydrate, high-fat breakfast, more extended sleep periods were associated with lower blood glucose levels.

A study participant who slept longer than usual had lower postprandial blood glucose after a high-carbohydrate or high-fat breakfast the next day. A later sleep midpoint was linked to higher blood glucose levels. In both comparisons between study participants and individual participant variations in sleep patterns, this effect negatively impacted glycemic control.

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