

DID YOU KNOW?

Nearly four in ten cancers could have been prevented globally!

Almost four in ten cancer cases worldwide could have been prevented, according to a major new analysis by the World Health Organisation (WHO) and its cancer research arm, the International Agency for Research on Cancer.

Released ahead of World Cancer Day on 4 February, the report estimated that 37% of all new cancer cases in 2022 – around 7.1 million people – were linked to causes that could have been avoided. That meant millions of families might never have faced a diagnosis if stronger prevention measures had been in place.



The study examined 30 risk factors across 185 countries. Smoking remained the single biggest preventable cause, responsible for 15% of new cancer cases globally. Infections came next at 10%, followed by alcohol at 3%.

Lung, stomach and cervical cancers made up nearly half of all preventable cases. Lung cancer was largely tied to smoking and air pollution. Stomach cancer was mainly linked to *Helicobacter pylori* infection, while cervical cancer was overwhelmingly caused by human papillomavirus (HPV).

Men were more affected by preventable cancers than women, with 45% of male cases linked to avoidable risks, compared with 30% in women.

Health experts said the findings showed that practical steps – cutting tobacco and alcohol use, improving air quality, promoting vaccination and encouraging healthier lifestyles – could dramatically reduce the global cancer burden and save millions of lives.

Source: World Health Organisation



STAR HEALTH REPORT

Every year on 15 February, countries around the world mark International Childhood Cancer Day (ICCD) – a global campaign dedicated to raising awareness about cancers affecting children and adolescents. In 2026, the theme “*Demonstrating impact: From challenge to change*” places the spotlight firmly on moving beyond words and turning commitments into concrete improvements in care.

Childhood cancer is rare compared with adult cancers, yet its impact is devastating. An estimated 400,000 children and teenagers worldwide are diagnosed with cancer each year. The most common types include leukaemia, lymphoma and brain tumours. While medical advances have transformed survival in many high-income countries—where more than 80% of children now survive—outcomes remain far poorer in lower-income regions. In some places, survival drops below 30% due to late diagnosis, shortages of medicines and limited specialist services.

Unlike many adult cancers, most childhood cancers cannot be prevented through lifestyle changes alone. However, experts emphasise that early detection can dramatically improve outcomes. Parents and carers

are encouraged to pay attention to warning signs such as persistent fever, unexplained weight loss, unusual swelling, constant fatigue, prolonged bone pain, frequent bruising or a white reflection in a child’s eye in photographs. Seeking medical advice early can make a critical difference.

Prevention also involves reducing known risk factors. Routine hepatitis B vaccination helps prevent liver cancer later in life, while human papillomavirus (HPV) vaccination protects against cervical and other HPV-related cancers. Improving air quality, limiting children’s exposure to harmful chemicals and ensuring safer environments are additional protective measures that benefit overall health.

Health systems themselves play a decisive role. Training frontline health workers to recognise symptoms quickly, establishing efficient referral pathways and ensuring consistent access to affordable cancer medicines are essential steps. Expanding specialised paediatric oncology units and providing psychosocial support for families are equally important, as treatment can be long, emotionally exhausting and financially overwhelming.

International cooperation has also become a key driver of progress. Global partnerships work

to strengthen supply chains for essential medicines, improve cancer registries and share expertise across borders. Such efforts aim to ensure that children in lower-resource settings receive care that meets international standards.

Beyond hospitals and policymakers, communities have a part to play. Schools, local leaders and media outlets can help spread accurate information about childhood cancer, reduce stigma and encourage families to seek care promptly. Public awareness campaigns during ICCD often highlight stories of young survivors, offering hope while reinforcing the message that early treatment saves lives.

Childhood Cancer Day 2026 is not simply about marking a date. It is about recognising that childhood cancer is a global health challenge – and that solutions already exist. With stronger health systems, better awareness and sustained political will, survival rates can continue to rise.

For families everywhere, the message is clear: action – from vaccination and early diagnosis to fair access to treatment – can change the course of a child’s life. And when action is inspired, hope becomes possible.

What your personality says about your sexual fantasies – and why it matters

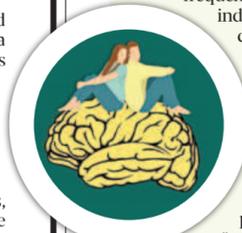
Sexual fantasies are something many people experience but rarely talk about openly. That is precisely why new research exploring the link between personality and fantasising is likely to catch attention – it speaks to quiet, personal questions people often keep to themselves.

A study published in *PLOS One* analysed responses from 5,225 adults in the United States and examined how personality traits relate to how often people experience sexual fantasies. The researchers focused on the widely recognised “Big Five” traits: extraversion, agreeableness, conscientiousness, neuroticism and open-mindedness.

One key finding stood out. People who scored higher in neuroticism – a trait linked to emotional sensitivity, anxiety and mood fluctuations – reported more frequent sexual fantasies. In contrast, individuals who were more conscientious and agreeable tended to report fantasising less often. Traits such as responsibility and respectfulness appeared to be associated with lower fantasy frequency.

Many people quietly wonder whether their private thoughts are “normal”. Research like this reassures readers that variation is common and often connected to broader personality patterns rather than anything unusual or unhealthy. It also challenges stereotypes. Being outgoing or adventurous did not necessarily mean someone fantasised more frequently.

Beyond curiosity, the findings have practical value. For clinicians and therapists, understanding how personality traits relate to sexual imagination can improve conversations about intimacy and wellbeing. For individuals, it offers insight rather than judgement.



POSTPARTUM DEPRESSION

The silent struggle many new mothers face

DR TAREQ SALAHUDDIN

Childbirth is often portrayed as a time of immense joy, celebration, and fulfilment. Yet for many women, the period following delivery can be emotionally overwhelming, confusing, and deeply distressing. Postpartum depression (PPD) is a common but frequently misunderstood mental health condition that affects women after childbirth—and its consequences can be serious if left unrecognised and untreated.

Postpartum depression is not the same as the “baby blues,” which many new mothers experience in the first few days after delivery. While baby blues usually resolve within two weeks, postpartum depression persists longer and is more intense. Women with PPD may experience persistent sadness, anxiety, irritability, excessive crying, feelings of guilt or worthlessness, sleep disturbances, loss of appetite, or difficulty bonding with their baby. In severe cases, thoughts of self-harm or harming the baby may occur.

Globally, it is estimated that one in seven women experiences postpartum depression. Cultural stigma, lack of awareness, and the expectation that motherhood should be purely joyful often prevent women from seeking help. In many societies, including ours, mental health

struggles are still seen as a personal weakness rather than a medical condition—further silencing affected mothers.

The consequences of untreated postpartum depression extend beyond the mother. It can interfere with mother-infant bonding, disrupt breastfeeding, and affect the child’s emotional, behavioural, and



cognitive development. Partners and families may also suffer, as relationships become strained under the weight of unaddressed emotional distress. In extreme cases, untreated PPD can lead to chronic depression, substance misuse, or suicide.

Several factors increase the risk of postpartum depression, including a history of depression or anxiety, lack of social support, marital or financial stress, complications during pregnancy or childbirth, hormonal changes, and sleep deprivation. Importantly, postpartum depression can affect any woman—regardless of age, education, or socioeconomic

status. The good news is that postpartum depression is treatable. Early recognition is crucial. Treatment options may include counselling or psychotherapy, social support, lifestyle adjustments, and, when necessary, medication prescribed by a qualified physician. Support from family members—especially partners—plays a vital role in recovery.

Recognising postpartum depression is the first step towards protecting mothers and their children. By encouraging open conversations, reducing stigma, and ensuring access to mental health care, we can help new mothers navigate this vulnerable phase with dignity, support, and hope.

In a small number of cases, untreated or severe postpartum depression may progress to postpartum psychosis, a rare but extremely dangerous psychiatric condition. This can develop rapidly, often within the first few weeks after childbirth, and may involve hallucinations, delusional thoughts, severe confusion, extreme mood changes, or a loss of contact with reality. When this happens, the consequences can be devastating, placing both the mother and the baby at serious risk.

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Food insecurity linked to rising anxiety and depression

Changes in food insecurity may quickly affect mental health, according to new research published in *PLOS Mental Health*. The study found that when people struggled to access enough food, symptoms of anxiety and depression tended to increase – often within a month.

Researchers led by Melissa Bateson of Newcastle University, alongside colleagues in France and the UK, collected monthly data from nearly 500 adults between September 2022 and August 2023. Participants reported whether they had experienced food insecurity in the previous week and completed two widely used mental health



assessments. The findings revealed that 39.5% of participants experienced food insecurity at least once during the study period. Among those individuals, shifts in food security were closely followed by changes in mental health. When food insecurity worsened, symptoms of anxiety and depression increased the following month. When food security improved, mental health symptoms also eased.

Governments should treat food security as a core part of mental health strategy. Strengthening social safety nets, expanding access to affordable food programmes, and ensuring stable, predictable support for low-income households could reduce not only hunger but also anxiety and depression. Screening for food insecurity in healthcare settings and responding quickly during economic shocks may help prevent rapid declines in mental wellbeing. In short, stabilising access to food is not just social policy – it is preventive mental health policy.



DR NUR-A SAFRINA RAHMAN

Nipah virus is a rare but potentially deadly disease that has caused repeated outbreaks in parts of South and Southeast Asia, including Bangladesh. While cases are not common, the virus has a high fatality rate, which makes awareness and prevention extremely important.

Nipah virus is a zoonotic virus, meaning it spreads from animals to humans. Fruit bats, often called flying foxes, are the natural carriers. People can become infected through direct contact with infected bats or animals such as pigs.

The virus can also spread through contaminated food – especially raw date palm sap or fruits that have been partially eaten or contaminated by bats. In some outbreaks, the virus has spread from person to person, particularly among family members and healthcare workers who were in close contact with infected patients.

Recognising the danger signs: Symptoms usually appear between 4 and 14 days after exposure, though in some cases they may develop later. The illness often begins with general, flu-like symptoms, which can make early recognition difficult.

Early signs may include fever, headache, muscle pain, sore throat, cough, vomiting, difficulty breathing, etc. As the infection progresses, it can affect the brain and nervous system.

More serious symptoms include drowsiness or dizziness, confusion or altered consciousness, seizures, signs of brain inflammation (encephalitis).

In severe cases, patients can rapidly fall into a coma within 24 to 48 hours. The fatality rate during past outbreaks has ranged from 40% to 75%, depending on how quickly patients received supportive care and how effectively outbreaks were controlled.

Anyone who develops a fever along with breathing difficulties or neurological symptoms – especially after exposure to bats,

sick animals, raw date palm sap, or an infected person – should seek medical attention immediately. Early supportive treatment, including hydration and respiratory care, can improve survival chances.

How to prevent nipah virus infection: There is currently no specific antiviral treatment or licensed vaccine for Nipah virus. Prevention is therefore the most effective defence.

- Avoid consuming raw date palm sap. In areas where outbreaks have occurred, raw sap has been a major source of infection. Boiling sap before drinking reduces risk.

- Wash and peel fruits thoroughly. Avoid fruits that show signs of bat bites or contamination.

- Limit contact with bats and sick animals. Do not handle animals that appear ill, and avoid areas where bats are known to roost.

- Practise regular hand hygiene. Wash hands with soap and water, particularly after caring for sick individuals or handling animals.

- Take precautions during outbreaks. Avoid close, unprotected contact with anyone showing symptoms. Carers and healthcare workers should use masks, gloves and protective equipment when dealing with suspected cases.

Why vigilance matters: Nipah virus outbreaks tend to be localised, but their severity demands attention. Quick identification of symptoms, early medical care and community awareness can significantly reduce transmission.

Simple preventive steps – such as avoiding contaminated food, maintaining hygiene and reporting suspected cases promptly – can protect families and communities. Although rare, Nipah virus remains a serious public health concern, and staying informed is one of the strongest tools in preventing its spread.

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Reproductive rights under siege as organised political backlash spreads worldwide

STAR HEALTH REPORT

Hard-won sexual and reproductive rights are facing fresh political threats, according to global advocacy group Women Deliver.

In a media release issued on 2 February 2025, the organisation warned that progress achieved over the past three decades through sustained feminist mobilisation is increasingly being challenged. Access to abortion and emergency contraception is coming under renewed pressure in several countries.

Paola Salwan Daher, Women Deliver’s Senior Director of Collective Action, said some nations are experiencing “significant

retrogression under religious influence”, including the United States, with the impact extending beyond national borders.

Women Deliver pointed to developments in parts of Europe as well. In Slovakia, repeated parliamentary attempts to restrict or ban abortion have intensified, alongside constitutional amendments weakening reproductive rights protections. In Hungary, additional barriers to abortion, contraception and family planning services have been introduced. The organisation also highlighted the growing coordination of anti-rights movements across borders,



supported by well-resourced international networks.

Advocates argue that attacks on reproductive rights often signal broader challenges to democratic principles, including the rights to health, privacy, equality and freedom from discrimination.

These concerns are shaping consultations ahead of the Women Deliver 2026 Conference (WD2026), scheduled to take place in Narm (Melbourne) in April 2026. The event will launch the Feminist Playbook – described as a practical roadmap aimed at strengthening accountability, solidarity and collective action across regions.

Women Deliver says renewed collaboration is essential to safeguard reproductive freedom and reinforce commitments to gender equality worldwide.