

**100 Health Updates –
(Health Updates I to VI combined)
– News/New Researches**

- Compiled

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100 Health Updates

S. No.	News / New Research	Internet Address
1	Global HIV/AIDS: Statistics	http://www.who.int/hiv/data/2012_epi_core_en.png
2	One World, One Heart	http://thestar.com.my/health/story.asp?file=/2011/9/28/health/9555311&sec=health
3	High Cholesterol Women catch up with Men	http://timesofindia.indiatimes.com/articleshow/10150917.cms
4	Lifestyle Changes to reduce Heart Disease Risk	http://timesofindia.indiatimes.com/life-style/health-fitness/health/Lifestyle-changes-to-reduce-heart-disease-risk/articleshow/10168084.cms
5	Four Major Medical Systems of India – Medicine and Health Care	http://www.everyculture.com/Ge-It/India.html
6	India Major Infectious Diseases	http://www.indexmundi.com/india/major_infectious_diseases.html (Source: CIA, World Facts Book)
7	State-wise Summary of Influenza A H1N1: 2009, 2010 and 2011	http://www.mohfw.nic.in/WriteReadData/1892s/Summary%20table%20for%20Pandemic%20Influenza%20A%20H1N1yearwise-56370979.pdf
8	30 Percent Cancer Deaths in India due to Tobacco Use – 2010	http://indiafacts.in/facts/30-cancer-deaths-in-india-due-to-tobacco-use/
9	Eating Habits of Urban Indians	http://indiafacts.in/health/what-urban-indians-are-eating/
10	Swine Flu Deaths in 2009 Topped Quarter Million	http://www.medicalnewstoday.com/articles/247042.php
11	One Maternal Death Every 10 Minutes in India: UN	http://zeenews.india.com/news/health/exclusive/a-maternal-death-every-10-mins-in-india-un_17710.html
12	U.N.: India likely to miss Millennium Development Goal (MDG) on Maternal Health	http://www.thehindu.com/health/policy-and-issues/article3595095.ece
13	National Institute of Communicable Diseases (NICD)	http://www.nicd.nic.in/index1.asp?linkid=181
14	Malaria Plasmodium falciparum (Pf) Rapid Test	http://www.rapidtest.com/Malaria_172103P-25-web.pdf
15	Medecins Sans Frontieres (MSF) battles Kala Azar in Bihar	http://zeenews.india.com/news/health/exclusive/scared-hiv-ve-women-opting-for-abortion_17912.html
16	Fight against HIV a Success in Poor Countries: UN	http://www.firstpost.com/living/fight-against-hiv-a-success-in-poor-countries-un-382864.html

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17	Cure AIDS with love, says Elton John	http://timesofindia.indiatimes.com/entertainment/music/news-and-interviews/Cure-AIDS-with-love-says-Elton-John/articleshow/15138284.cms
18	As Swine Flu Deaths Rise Worldwide	http://www.medicalnewstoday.com/articles/159820.php
19	Childhood Obesity linked to Bladder, Urinary Cancer	http://timesofindia.indiatimes.com/life-style/health-fitness/health/Childhood-obesity-linked-to-bladder-urinary-cancer/articleshow/15122062.cms
20	Breakthrough in making Malaria Vaccine	http://www.firstpost.com/living/breakthrough-in-making-malaria-vaccine-406586.html
21	Weight Training helps reduce Diabetes Risk	http://timesofindia.indiatimes.com/life-style/health-fitness/health/Weight-training-helps-reduce-diabetes-risk/articleshow/15387269.cms
22	Activists up in Arms against new Proposal on Health Care	http://www.thehindu.com/health/article3742403.ece
23	India Witnesses Sharp decline in HIV Cases	http://news.xinhuanet.com/english/health/2012-08/14/c_131784346.htm
24	Green Tea can improve Brain Function in HIV Patients	http://www.thehindu.com/health/medicine-and-research/article3775394.ece
25	Chemical in Lipsticks can cause Heart Problems	http://www.thehindu.com/health/medicine-and-research/article3771115.ece
26	Obese Youth have higher Risk of Gallstones	http://www.financialexpress.com/news/obese-youth-have-higher-risk-of-gallstones-study/993070/
27	Happiness Gene discovered - but it only works for Women	http://zeenews.india.com/news/health/health-news/happiness-gene-discovered-but-it-only-works-for-women_18492.html
28	New Device removes Clots from Brain	http://zeenews.india.com/news/health/health-news/new-device-removes-clots-from-brain_18507.html
29	Developed World's 'Kissing Disease' goes Viral in Capital	http://www.financialexpress.com/news/developed-worlds-kissing-disease-goes-viral-in-capital/993503/
30	Simple Keyhole Surgery can halve Heart Attack Risk	http://timesofindia.indiatimes.com/life-style/health-fitness/health/Simple-keyhole-surgery-can-halve-heart-attack-risk/articleshow/15816677.cms
31	What is a Stroke? What Causes a Stroke?	http://www.medicalnewstoday.com/articles/7624.php
32	High Blood Pressure: What is High Blood Pressure?	http://timesofindia.indiatimes.com/life-style/health-fitness/health/High-blood-pressure-What-is-high-blood-pressure/articleshow/15160164.cms

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33	New Treatment can permanently cure High Blood Pressure	http://www.financialexpress.com/news/new-treatment-can-permanently-cure-high-blood-pressure/993740/2
34	Why Today's Kids don't get Good Night's Sleep	http://timesofindia.indiatimes.com/life-style/health-fitness/health/Why-todays-kids-dont-get-good-nights-sleep/articleshow/15829818.cms
35	Infants given Anaesthesia may face Learning Difficulties	http://www.indianexpress.com/news/infants-given-anaesthesia-may-face-learning-difficulties/994895/
36	Almond Oil helps Fight Obesity, Diabetes	http://timesofindia.indiatimes.com/life-style/health-fitness/diet/Almond-oil-helps-fight-obesity-diabetes/articleshow/14386172.cms
37	Ten Years to achieve Universal Health Coverage	http://health.india.com/news/ten-years-to-achieve-universal-health-coverage/
38	Now, Once a Day Anti-clot Tablet to treat Diabetes	http://zeenews.india.com/news/health/diseases/now-once-a-day-anti-clot-tablet-to-treat-diabetes_18677.html
39	Chemotherapy could impair Speech in Breast Cancer Patients	http://www.thehindu.com/health/medicine-and-research/article3877422.ece
40	Vitamin A Intake could cure Cancer	http://www.thehindu.com/health/medicine-and-research/article3877427.ece?homepage=true
41	Half of Women may have Sleep Apnoea	http://zeenews.india.com/news/health/diseases/half-of-women-may-have-sleep-apnoea-study_18733.html
42	Blood Pressure Pills could cause Appendicitis	http://zeenews.india.com/news/health/diseases/blood-pressure-pills-could-cause-appendicitis_18736.html
43	Now, a Technique to regularise Abnormal Heartbeats	http://zeenews.india.com/news/health/diseases/now-a-technique-to-regularise-abnormal-heartbeats_18729.html
44	Proteins` Absence causes Diabetes, Rheumatoid Arthritis	http://zeenews.india.com/news/health/diseases/proteins-absence-causes-diabetes-rheumatoid-arthritis_18738.html
45	Pill to `Block` Arthritis comes closer to Reality	http://zeenews.india.com/news/health/diseases/pill-to-block-arthritis-comes-closer-to-reality_18737.html
46	Avoid Early Morning Sports on Empty Stomach	http://www.thehindu.com/health/fitness/article3881222.ece?homepage=true
47	What is Sleep Apnoea?	http://www.britishtsnoring.co.uk/snoring_&_sleep_apnoea/what_is_sleep_apnoea.php
48	Insomnia	http://www.well.com/~mick/insomnia/ http://en.wikipedia.org/wiki/Insomnia

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49	Cut down on the overtime! Working more than eight Hours a Day raises the Risk of Heart Disease by 80%	http://www.dailymail.co.uk/health/article-2201519/Working-hours-day-raises-risk-heart-disease-80.html?ito=feeds-newsxml
50	Smoking may lead to Ovarian Cancer	http://timesofindia.indiatimes.com/life-style/health-fitness/health/Smoking-may-lead-to-ovarian-cancer/articleshow/16364531.cms
51	World Oral Health Day: Don't ignore Oral Health	http://timesofindia.indiatimes.com/life-style/health-fitness/health/World-Oral-Health-Day-Dont-ignore-oral-health/articleshow/16365663.cms
52	Child Deaths around the World below 7 Million in 2011	http://www.telegraph.co.uk/health/children_shealth/9540335/Child-deaths-around-the-world-below-7-million-in-2011.html
53	Exercise helps You Cope with Stress, Anxiety	http://www.dnaindia.com/health/report_exercise-helps-you-cope-with-stress-anxiety_1741057
54	Want to lose Weight? It's all about the Timing	http://health.india.com/news/want-to-lose-weight-its-all-about-the-timing/
55	The Wait for a Donor's Organ	http://www.indianexpress.com/news/the-wait-for-a-donors-organ/1003430/
56	Kids without Siblings More Likely to be Overweight	http://zeenews.india.com/news/health/health-news/kids-without-siblings-more-likely-to-be-overweight_18864.html
57	Early Menopause ups Heart Stroke Risk	http://timesofindia.indiatimes.com/home/science/Early-menopause-ups-heart-stroke-risk-Study/articleshow/16468663.cms?
58	Just One Glass of Wine a Day could trigger Breast Cancer	http://www.business-standard.com/generalnews/news/just-one-glasswineday-could-trigger-breast-cancer/58721/
59	Proteins can kick-start Male Fertility	http://timesofindia.indiatimes.com/life-style/health-fitness/health/Protein-can-kick-start-male-fertility/articleshow/16526759.cms
60	Can you really work up an Appetite?	http://timesofindia.indiatimes.com/life-style/health-fitness/fitness/Can-you-really-work-up-an-appetite/articleshow/16382471.cms
61	Swine Flu killing Doctors Now	http://www.hindustantimes.com/India-news/Bhopal/Swine-flu-killing-doctors-now/Article1-935279.aspx
62	More Indian Youths Suffering from Heart Diseases	http://ibnlive.in.com/news/more-indian-youths-suffering-from-heart-diseases/295702-17.html
63	Snore away; Your Heart is not at Risk from It	http://zeenews.india.com/news/health/diseases/snore-away-your-heart-is-not-at-risk-from-it_18994.html
64	Hormone Linked to Sleep could battle Alzheimer`s	http://zeenews.india.com/news/health/diseases/hormone-linked-to-sleep-could-battle-alzheimer-s_19026.html

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65	Dementia	http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0001748/
66	Alzheimer's disease	http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0001767/
67	A Simple Blood Test to detect Lung and Breast Cancer	http://zeenews.india.com/news/health/diseases/now-a-simple-blood-test-to-detect-lung-and-breast-cancer_18993.html
68	Gut Bacteria can indicate Risk of Developing Diabetes	http://zeenews.india.com/news/health/diseases/gut-bacteria-can-indicate-risk-of-developing-diabetes_18992.html
69	Smoking Linked with Early Pancreatic Cancer	http://zeenews.india.com/news/health/diseases/smoking-linked-with-early-pancreatic-cancer_19027.html
70	Only Two in 100 aware of Aphasia	http://zeenews.india.com/news/health/diseases/only-two-in-100-aware-of-aphasia_19028.html
71	Chronic Diseases haunt Indians over 50	http://timesofindia.indiatimes.com/india/Chronic-diseases-haunt-Indians-over-50/articleshow/16619568.cms
72	Screen-addicted Children may suffer Newest Mental Disorder	http://www.financialexpress.com/news/screenaddicted-children-may-suffer-newest-mental-disorder/1010013/
73	Acid attacks: Now, 100% Medical cover, Rs 5 Lakh to Kin in Case of Death	http://www.financialexpress.com/news/acid-attacks-now-100-medical-cover-rs-5-lakh-to-kin-in-case-of-death/1009124/2
74	Orthopaedic Study Conducted	http://www.financialexpress.com/news/orthopaedic-study-conducted/1011195/1
75	Difficulty in Chewing Food Linked to Dementia Risk	http://zeenews.india.com/news/health/diseases/difficulty-in-chewing-food-linked-to-dementia-risk_19087.html
76	Brain Dead Girl gives New Lease of Life	http://www.thehindu.com/news/cities/Delhi/brain-dead-girl-gives-new-lease-of-life/article3967746.ece
77	Unhygienic Britons are World's Worst Flu-spreaders	http://zeenews.india.com/news/health/diseases/unhygienic-britons-are-world-s-worst-flu-spreaders_19086.html
78	Contrary to Govt Claims, Leprosy on rise in Maharashtra	http://zeenews.india.com/news/health/diseases/contrary-to-govt-claims-leprosy-on-rise-in-maharashtra_19096.html
79	14 Novel Biomarkers for Type 2 Diabetes Identified	http://zeenews.india.com/news/health/diseases/14-novel-biomarkers-for-type-2-diabetes-identified_19085.html
80	Botox offers Effective Treatment for Urinary Urgency Incontinence	http://zeenews.india.com/news/health/diseases/botox-offers-effective-treatment-for-urinary-urgency-incontinence_19083.html

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81	Violent Video Games make Teens More Aggressive towards Other People	http://www.indianexpress.com/news/violent-video-games-make-teens-more-aggressive-towards-other-people/1014070/
82	Depression, a Forced Silence Within	http://www.thehindu.com/health/rx/depression-a-forced-silence-within/article3982210.ece
83	Missing Just Two Hours of Sleep can erase Memories	http://www.indianexpress.com/news/missing-just-two-hours-of-sleep-can-erase-memories-study/1018029/
84	Alzheimer's Disease	http://www.helpguide.org/elder/alzheimers_disease_symptoms_stages.htm
85	Vigorous Exercise can heal Heart	http://health.india.com/news/vigorous-exercise-can-heal-heart-says-study/
86	Donated Stem Cells may work Best for Heart Patients	http://www.reuters.com/article/2012/11/06/us-heart-stemcells-idUSBRE8A501Y20121106
87	Vitamin D Deficiency in Teens a Serious Problem	http://timesofindia.indiatimes.com/life-style/health-fitness/health/Vitamin-D-deficiency-in-teens-a-serious-problem/articleshow/17127849.cms
88	Pregnant Women beware	http://www.indianexpress.com/news/pregnant-women-beware-/1030385/
89	Quarter of World's Pneumonia Child Deaths in India	http://timesofindia.indiatimes.com/city/kanpur/Quarter-of-worlds-pneumonia-child-deaths-in-India/articleshow/17205149.cms
90	Screen Children too for Diabetes	http://timesofindia.indiatimes.com/life-style/health-fitness/health/Screen-children-too-for-diabetes/articleshow/17214751.cms
91	Exercise to Control Diabetes	http://timesofindia.indiatimes.com/life-style/health-fitness/health/Exercise-to-control-diabetes/articleshow/17277411.cms
92	Spurt in Diabetes Cases tied to Obesity, Poor Diet	http://www.hindustantimes.com/India-news/NewDelhi/Spurt-in-diabetes-cases-tied-to-obesity-poor-diet/Article1-959341.aspx
93	Smoking killed 100 Million in 100 Years	http://www.indianexpress.com/news/smoking-killed-100-million-in-100-years/1036155/
94	Infertility rises at Alarming Pace in India	http://news.xinhuanet.com/english2010/world/2010-07/16/c_111963155.htm
95	Eating More Fish may cut Young Women's Heart Disease Risk	http://news.xinhuanet.com/english2010/health/2011-12/06/c_122380118.htm
96	Taking Vitamin D may reduce the Risk of Alzheimer's Disease	http://www.dailymail.co.uk/news/article-2242107/Taking-Vitamin-D-reduce-risk-Alzheimers-disease.html?ito=feeds-newsxml
97	Chlorine in Tap Water Linked to increase in Number of People Developing Food Allergies	http://www.dailymail.co.uk/health/article-2242094/Chlorine-tap-water-linked-increase-number-people-developing-food-allergies.html
98	Fish Oil heals Bed Sores Too	http://timesofindia.indiatimes.com/life-style/health-fitness/health/Fish-oil-heals-bed-sores-too/articleshow/17489866.cms
99	Top 20 Health Benefits of Fish Oil	http://timesofindia.indiatimes.com/life-style/health-fitness/diet/Top-20-health-benefits-of-fish-oil/articleshow/16248086.cms
100	Why Women are more prone to Arthritis	http://timesofindia.indiatimes.com/life-style/health-fitness/health/Why-women-are-more-prone-to-arthritis/articleshow/17243409.cms

1. Global HIV/AIDS: Statistics - 2011

S. No.	Details	Numbers (in millions)
Number of People Living with HIV		
1	Total	34.00
2	Adults	30.70
3	Women	16.70
4	Children (< 15 years)	3.30
People Newly Infected with HIV in 2011		
5	Total	2.50
6	Adults	2.20
7	Children (< 15 years)	0.33
AIDS Deaths in 2011		
8	Total	1.70
9	Adults	1.50
10	Children (< 15 years)	0.23

http://www.who.int/hiv/data/2012_epi_core_en.png

2. One World, One Heart

September 28, 2011

Cardiovascular diseases remain the world's main killers, claiming about 17 to 18 million lives each year. Heart Foundation of Malaysia (Yayasan Jantung Negara) director Datuk Dr Khoo Kah Lin shares his views on the matter on the eve of World Heart Day tomorrow.

IT has been repeatedly said that the heart is an extremely vital organ. Can you put this into perspective?

The human heart is really the most amazing organ in the body. It beats even before you are born into this world, continuing to do so until you take your last breath. For as long as you are alive, your heart is hard at work. There is no other muscle in your body that works in such an astonishing way.

The human heart is tasked with pumping oxygen-rich blood and nutrients to the whole body. The heart's other function is also to "carry away" your body's waste products such as carbon dioxide, from the tissues. The heart is "connected" to every part of the body through blood vessels.

According to Dr Khoo, 65% of people with diabetes die from some form of heart disease or stroke.

Despite the importance of our heart, it is often the most neglected organ in our body, as the rising prevalence of heart disease in the nation illustrates.

Also, after a heart attack, the damage done to your heart is irreparable. As such, it is of utmost importance that we prevent heart disease well before it strikes. This can be done if we eliminate the risk factors of heart disease, and this has to begin from childhood itself.

Isn't heart disease a problem for older people? How do young children fit into the picture?

It's really not accurate to say that heart disease only afflicts the older age group. Heart disease can be caused by multiple factors, called risk factors, which in fact begin building up right from childhood. I have personally heard that even children as young as two can already have developed risk factors for heart disease.

In my opinion, the true problem lies in the fact that the perception of heart disease has not evolved. In Malaysia, heart disease has been the number one killer for the past three decades. Before we can understand heart disease, we need to go to the root of the matter – the risk factors. The key is that heart disease is largely preventable, if only parents cultivate a healthy lifestyle in their children from young.

You said that heart disease is largely preventable, if tackled early on in life. Can you elaborate a bit more?

Yes, prevention of heart disease from childhood is what I wish to stress upon. I term this loosely as the “modifiable risk factor”, which largely co-relates to the diet and lifestyle of the child.

Under the umbrella of modifiable risk factor, we have five separate and equally important issues to deal with: high cholesterol levels, obesity, diabetes, high blood pressure and of course, a sedentary lifestyle.

Salt intake should not exceed 5gm (one teaspoon) a day.

Most people will not contest that fast food consumption, frequent dining outs and being a couch potato profoundly affect the growing child. In fact, the more we move away from consuming a “natural” diet, the worse the outlook is in terms of heart disease.

Well, the notion of change makes people uncomfortable. So, instead of dwelling on change, why not instil the habit of healthy living in the child right from the start?

Healthy living does not mean creating a good food vs bad food list. Neither does it mean adhering to a vegan diet or bland and tasteless foods. That is rather unrealistic to ask for.

I task it upon the parents and caregivers, not to control their children and dictate their life completely, but to be a good role model and provide proper guidance to the young to live and eat healthily.

Of course, to err is human, and I am not saying that as a parent, you should be perfect. Neither am I asking parents to mould a Stepford child. A child will always be a child and it is in fact wrong to deny your child her “childhood” indulgences totally, as suppressing a child's desires too much will result in unhealthy emotional growth.

How exactly can parents influence those modifiable risk factors?

To answer your question, allow me to elaborate on each of the modifiable risk factor in turn, and how parents can actually make a difference to all of it.

High Blood Pressure

Also known as hypertension, it often has no symptoms. You will not know that you are suffering from it unless you check your pressure regularly.

High blood pressure increases your heart's workload, causing the heart muscle to be enlarged as it forces your heart to work harder than necessary. This would increase the risk of a heart attack or heart failure, as in the long run, this causes the heart muscle to weaken and work less effectively.

High blood pressure can be easily controlled by limiting daily salt intake. Try cultivating healthier habits by avoiding foods such as processed food, fast food, or even try to limit eating out. Home-cooked meals are always healthier and more nutritious. According to the Malaysian Dietary Guidelines 2010, salt intake should not exceed 5gm (or one teaspoon) a day.

High Cholesterol

Cholesterol is a waxy substance and is needed by the body to perform its primary functions. In fact, your liver produces almost 75% of your body's cholesterol (also known as endogenous cholesterol) and the balance comes from the food you eat (dietary cholesterol).

It is important to understand the two different types of cholesterol – the good and the bad cholesterol.

> HDL-cholesterol (high-density lipoprotein): The “good” cholesterol is needed by your body to carry cholesterol away from cells back to the liver, where it is then broken down and passed out as waste products. Generally, high HDL-cholesterol levels may protect you from heart disease. Research has shown that regular physical activity can increase your levels of HDL-C.

> LDL-cholesterol (low-density lipoproteins): The “bad” cholesterol causes an accumulation of “deposits” on the artery walls, leading to blockage in the blood vessel (known as atherosclerosis). Progressive atherosclerosis with deposition of the LDL cholesterol in the walls of the arteries causes a build-up known as plaque.

When the plaque ruptures, this causes a formation of blood clot, which then obstructs blood flow to the heart, and this causes a heart attack.

> Triglycerides: This is a form of fat made in the body, brought on by obesity/overweight problems, lack of exercise, smoking and excessive alcohol consumption. High levels of triglycerides, especially in conjunction with low HDL cholesterol levels, also predispose to coronary heart disease.

To control high cholesterol, it is important to note that cholesterol comes mainly from animal products. Limit your children's consumption of cholesterol-rich food or saturated and trans fats, which increase the amount of bad cholesterol in your body. Consume oil sparingly, and always opt for healthier options such as fat-free products or rapeseed oil.

Diabetes

Diabetes is generally known as the mother of all diseases and is often linked to a host of other diseases that fast-tracks individuals to suffer from heart disease. It is reported by the American Heart Association that heart disease and stroke are the main causes of death and disability among people with type 2 diabetes.

In fact, 65% of people with diabetes die from some form of heart disease or stroke.

Contrary to popular belief, diabetes also affects the young. In fact, in Malaysia, children as young as 10 years old have been diagnosed with type 2 diabetes.

Diabetes amongst adults and children can be easily managed by controlling sugar intake from young. It is advised that sugar intake should not exceed 50g daily (Malaysian Dietary Guidelines 2010).

Obesity

Approximately 43% of Malaysians are either overweight or obese, an increase of a staggering 250% over a 10-year period from 1996, according to the National Health and Morbidity Survey III (2006).

Obesity is simply defined as having excess body fat. It is generally caused by consuming more calories than your body can burn up.

Nowadays, kids generally are more prone to obesity as they spend most of their time in front of their computers, being a couch potato or consuming too much unhealthy snacks or foods.

According to a study conducted by Segal and Sanchez (2001), after an obese child reaches six years of age, the probability the obesity will persist into adulthood exceeds 50%, and 70% to 80% of obese adolescents will remain so as adults.

According to the WHO, an estimated 17.6 million children under five are overweight.

Sedentary Lifestyle

Essentially, our children lack much needed exercise. According to a study reported in *Business Week*, children spend almost eight hours daily watching TV, playing video games or surfing the Internet.

How often do we see kids running around in the playground or in the park these days? Parents should try to encourage regular physical activity amongst family members. It is not only good for everyone's heart-health, but encourages bonding among the family members too.

As the saying goes, a family that plays together stays together.

For children with parents who suffer from heart diseases, physical activity is even more crucial. By exercising, you can increase your levels of HDL-C (good cholesterol) and also eliminate other risk factors such as obesity and high blood pressure.

Recent research has argued that genes play a large part too, especially when it comes to heart disease. Any comments on that?

I will answer that question with another question: what is the standard of proof of that statement? Has it been proven beyond reasonable doubt that genes will lead to heart disease, or are we talking about it on the balance of probabilities?

According to the Framingham Heart Study published in the May 2004 issue of the *Journal of the American Medical Association*, it was found that having one parent with premature heart or vascular disease can double or even triple one's risk of premature heart disease.

If both parents had premature heart disease, a daughter would have three times the risk, and a son, twice the risk.

Well, I am not denying that heart disease is a condition that can be passed down from generation to generation. But one word of caution here – even though you may have inherited such genes, that does not mean that it is cast in stone that you WILL suffer from heart disease.

This means that this case is not proven beyond reasonable doubt. Hereditary factors simply predispose you and make you more vulnerable to heart disease.

It is risk factors like these that are beyond our control that should motivate us to get our act together and start instilling heart-healthy habits amongst our children. There are still the modifiable risk factors which play a larger role in preventing heart disease, even if hereditary predisposition is a factor.

That is why I repeatedly tell my patients to take extra care of their children's lifestyle and diet habits, to reduce the likelihood that heart disease will become a vicious cycle. There is a saying that goes: hereditary loads the gun, environment pulls the trigger.

You have emphasised the link between parents and their children. What about the role of families as a whole in collectively reducing their risks of heart disease? How important is that?

There is a Latin quote: *non est vivere sed valere vita est*, which simply means, life is not about being alive, but being well.

Think about it this way: we all have our respective roles to play in society. In my family, I am a father and a husband. Of course, I pray for a long life so that I can be with my family, but at the same time, I need to be well to be that loving father and husband.

As I have mentioned earlier, genetically, you can be predisposed to heart disease. It is reported that in Malaysia, children as young as seven years old suffer from high cholesterol.

Heart-healthy initiatives at home aren't as hard as what we may think. Start by having family time together at parks, walking the dog, or even going for a family sporting event.

Show your child that if you can do it, so can they.

The prevalence of overweight children has jumped from 2% (NHMS II, 1996) to 5.4% (NHMS III, 2006). According to the *Journal of the American Heart Association*, studies have confirmed that when children learn and practise heart healthy eating habits, it can significantly reduce their heart disease risk later in life.

Can you tell us what are some of the activities championed by the Heart Foundation towards reducing the prevalence of heart diseases in our country?

The Heart Foundation has been actively involved in conducting road shows all over the country. These road shows, or YJM Heart Weeks, are held in shopping malls and we offer free health checks and advice by experts.

YJM is also actively involved in educating Malaysians on heart diseases; specifically on the major risk factors, through educational press articles in major newspapers or magazines.

YJM also collaborates with the private sector to conduct educational community-based programmes.

The most recent one we undertook was the Quaker Make Malaysia Heart Healthy campaign. – **Lee Mei Chieng**

<http://thestar.com.my/health/story.asp?file=/2011/9/28/health/9555311&sec=health>

3. High Cholesterol Women catch up with Men

Sumitra Deb Roy, TNN | Sep 28, 2011

MUMBAI: City doctors warn that the notion of women being less prone to cardiac problems needs to change fast. Now, a survey by a city-based laboratory has found that the possible underlying cause of rising heart ailments could be alarming cholesterol levels in women.

Metropolis laboratories released data on cholesterol levels of 17,379 men and 15,255 women who had got themselves tested between January 2009 and July this year. Whopping 36% men and 33% women were found to have at least one abnormal cholesterol parameter or undesirable cholesterol and triglycerides presence in their blood stream. But what is most worrisome is that women seem to be fast catching up with men in terms of high cholesterol levels.

Doctors say this calls for a detailed analysis as to how women are showing higher cholesterol levels despite the protection of estrogen (the primary female hormone). The survey revealed how 55.7% women in the 25-45 age brackets had abnormally high cholesterol in comparison to 43.4% men. Also, out of the 3,586 women found to have abnormal cholesterol levels, around 1,225 had very high cholesterol. Further, the numbers reflected how more women had abysmally high level (56.5%) of bad cholesterol, and an equal percentage were on the verge of tipping over.

According to Dr Rajesh Bendre, head of immunochemistry, Metropolis Healthcare, the situation could be grimmer as lipid profile tests are just basic parameters. "The incidence of atherosclerosis and coronary heart disease is increasingly seen in younger age groups. The numbers are surprising given that not many women smoke or drink." Interventional cardiologist Dr Vijay Bang from Lilavati Hospital blamed sedentary lifestyle for the incidence.

However, some doctors believe more research is needed on whether higher cholesterol level is translating into more heart attacks in women. Dr Anand Rao, interventional cardiologist of Holy Family Hospital, said that young women suffering heart attacks have some family history or underlying condition like diabetes. "Seldom do we find high cholesterol as a cause in women unlike in men," said Rao, who blamed smoking for heart attacks in women. "(But) the protection women enjoy from estrogen is quite strong."

WHAT IS PERIPHERAL VASCULAR DISEASE

Arteries that carry blood to arms or legs become narrow due to build-up of cholesterol, causing blood flow to slow down or stop. Ignoring symptoms of pain, tingling or numbness could lead to gangrene and even loss of a limb. Deep vein thrombosis relates to clots deep in the body

EMERGENCY |

A clot from the heart can reach the limbs, cutting blood supply instantly. Prompt action is needed to save the limb

RISK |

It usually occurs in those over 50. More men than women are affected. Smoking, blood pressure, diabetes, cholesterol & obesity are contributory factors

TREATMENT |

Lifestyle changes and, at times, surgery or stenting

"Avoid Angiogram Surgery" - Safer Way to Open Blocked Arterys New Health Fast, Easy, Low Cost :
www.Yourticker.com/Angioprim

Diabetic Diet & Meals - Free Diabetic Recipes > Breakfast, Lunch - Snack - Dinner - Dessert. :
www.diabetesinfocenter.org

<http://timesofindia.indiatimes.com/articleshow/10150917.cms>

4. Lifestyle Changes to reduce Heart Disease Risk

Monami K. Thakur, Health Me Up | Sep 29, 2011, 12.01PM IST

Indisputably, [heart diseases](#) or cardiopathy are two leading causes of premature [mortality](#), claiming over 17.1 million lives globally each year.

However, according to the World Heart Federation, a few basic lifestyle changes can prevent nearly 80 percent of such premature deaths. Besides managing trigger factors like [smoking](#) and [alcohol](#) abuse, it's useful to alter food and exercise habits as well, especially if you lead a sedentary lifestyle. Here are some vital lifestyle changes to help you prevent and overcome the harmful effects of heart diseases.

Physical Activity and Weight Management: One of the best ways to lead a heart-healthy life and avoid ailments is by indulging in a proper weight management program. Obesity is a major risk factor for heart disease, hypertension and stroke. Hence, if you are overweight or obese, now is the right time to plan an effective weight management program. For this, you can either seek help from a fitness trainer or consult your physician. Excessive weight loss may also be a source of concern if you have advanced heart diseases. Apart from this, make your fitness sessions as fun and entertaining as possible - after all, it's all for your heart.

Diet Modifications: To reduce the risk of heart diseases like cardiomyopathy, coronary heart disease and heart failure; it is mandatory to eat a healthy diet. Why not start with eating more fruits and vegetables? Fruits like bananas are packed with high levels of naturally occurring minerals called electrolytes that help to lower the blood pressure level. Lower your dietary intake of saturated fats, Trans fats and incorporate the use of unsaturated fatty acids like omega-3 fatty acids. Moreover, instead of using cooking oil, try grilling, boiling or steaming your foods more often. Even if you do use cooking oil, opt for the healthier varieties like olive oil.

Stress Control and Management: Learn to relax yourself and employ all possible means to lower your stress levels. This can be through breathing techniques, yoga postures or music. Also, try to listen to your body signals and try to adopt a positive attitude towards life.

Avoid Alcohol Abuse: Alcohol abuse is a major triggering agent for heart ailments and moderate consumption is the only way out. Make sure that you consume no more than one or two units per day. Alcohol abuse causes depression of the contractile function of the heart.

Cessation of Smoking: According to the [American Heart Association](#), smoking is the most important preventable cause of premature death. It decreases the level of HDL (good cholesterol) in the body and makes the blood more likely to form dangerous clots. Smoking is also a leading cause for coronary heart disease where the blood vessels carrying oxygen to the heart are narrowed due to a buildup of plaque.

(Source: MedicineNet, World Heart Federation, Heart Failure Online)

Read more Personal Health, Diet & Fitness stories on www.healthmeup.com

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/Lifestyle-changes-to-reduce-heart-disease-risk/articleshow/10168084.cms>

5. Four Major Medical Systems of India – Medicine and Health Care

India has a tradition of medical healing, teaching, and research that goes back more than two thousand years to the two basic medical treatises written by Charaka and Sushruta. Today the country has four major medical systems as well as dozens of localized and tribal ones that depend on herbal treatments. The **oldest of the four** systems is still widely followed under the name of *Ayurveda*, meaning "science of long life". It is highly developed, with its own hospitals, clinics, pharmaceutical factories, and medical textbooks. It depends primarily on non invasive herbal treatments. The diagnosis and treatment emphasize a holistic approach. **Siddha is a distinct tradition that developed in south India** and follows principles of physiology close to those of Ayurveda. Diagnosis depends on a careful reading of the pulse. Treatment is mostly herbal and psychological. **A third medical tradition is called Unani. This system came to India with Muslim travelers and was developed under the patronage of the Mughals.** It emphasizes holistic diagnosis and treatment, but the theory of human physiology is distinct. All three of these systems attribute disease to an imbalance between underlying constituents. **The fourth and most widely favored system is biomedicine, or scientific medicine.** It has been used in the cities for three centuries and is practiced in the best hospitals and training colleges. India has about 140 medical colleges.

Public health is a major concern of every state government because of the continuing incidence of epidemic diseases, high rates of infant mortality, and the need for family planning (usually sterilization) to control the growth of the population.

<http://www.everyculture.com/Ge-It/India.html>

6. India Major Infectious Diseases

Major Infectious Diseases: Degree of risk: High

Food or Waterborne Diseases: Bacterial diarrhea, hepatitis A and E, and typhoid fever

Vector borne Diseases: Chikungunya, dengue fever, Japanese encephalitis, and malaria

Animal Contact Disease: Rabies

Water Contact Disease: Leptospirosis

Note: Highly pathogenic H5N1 avian influenza has been identified in this country; it poses a negligible risk with extremely rare cases possible among US citizens who have close contact with birds (2009)

Definition: This entry lists major infectious diseases likely to be encountered in countries where the risk of such diseases is assessed to be very high as compared to the United States. These infectious diseases represent risks to US government personnel traveling to the specified country for a period of less than three years. The **degree of risk** is assessed by considering the foreign nature of these infectious diseases, their severity, and the probability of being affected by the diseases present. The diseases listed do not necessarily represent the total disease burden experienced by the local population.

The risk to an individual traveler varies considerably by the specific location, visit duration, type of activities, type of accommodations, time of year, and other factors. Consultation with a travel medicine physician is needed to evaluate individual risk and recommend appropriate preventive measures such as vaccines.

Diseases are organized into the following six exposure categories shown in italics *and listed in typical descending order of risk*. Note: The sequence of exposure categories listed in individual country entries may vary according to local conditions.

Food or Waterborne Diseases acquired through eating or drinking on the local economy:

Hepatitis A - viral disease that interferes with the functioning of the liver; spread through consumption of food or water contaminated with fecal matter, principally in areas of poor sanitation; victims exhibit fever, jaundice, and diarrhea; 15% of victims will experience prolonged symptoms over 6-9 months; vaccine available.

Hepatitis E - water-borne viral disease that interferes with the functioning of the liver; most commonly spread through fecal contamination of drinking water; victims exhibit jaundice, fatigue, abdominal pain, and dark colored urine.

Typhoid Fever - bacterial disease spread through contact with food or water contaminated by fecal matter or sewage; victims exhibit sustained high fevers; left untreated, mortality rates can reach 20%.

Vector Borne Diseases acquired through the bite of an infected arthropod:

Malaria - caused by single-cell parasitic protozoa *Plasmodium*; transmitted to humans via the bite of the female Anopheles mosquito; parasites multiply in the liver attacking red blood cells resulting in cycles of fever, chills, and sweats accompanied by anemia; death due to damage to vital organs and interruption of blood supply to the brain; endemic in 100, mostly tropical, countries with 90% of cases and the majority of 1.5-2.5 million estimated annual deaths occurring in sub-Saharan Africa.

Dengue Fever - mosquito-borne (*Aedes aegypti*) viral disease associated with urban environments; manifests as sudden onset of fever and severe headache; occasionally produces shock and hemorrhage leading to death in 5% of cases.

Yellow Fever - mosquito-borne viral disease; severity ranges from influenza-like symptoms to severe hepatitis and hemorrhagic fever; occurs only in tropical South America and sub-Saharan Africa, where most cases are reported; fatality rate is less than 20%.

Japanese Encephalitis - mosquito-borne (*Culex tritaeniorhynchus*) viral disease associated with rural areas in Asia; acute encephalitis can progress to paralysis, coma, and death; fatality rates 30%.

African Trypanosomiasis - caused by the parasitic protozoa *Trypanosoma*; transmitted to humans via the bite of bloodsucking Tsetse flies; infection leads to malaise and irregular fevers and, in advanced cases when the parasites invade the central nervous system, coma and death; endemic in 36 countries of sub-Saharan Africa; cattle and wild animals act as reservoir hosts for the parasites.

Cutaneous Leishmaniasis - caused by the parasitic protozoa *leishmania*; transmitted to humans via the bite of sandflies; results in skin lesions that may become chronic; endemic in 88 countries; 90% of cases occur in Iran, Afghanistan, Syria, Saudi Arabia, Brazil, and Peru; wild and domesticated animals as well as humans can act as reservoirs of infection.

Plague - bacterial disease transmitted by fleas normally associated with rats; person-to-person airborne transmission also possible; recent plague epidemics occurred in areas of Asia, Africa, and South America associated with rural areas or small towns and villages; manifests as fever, headache, and painfully swollen lymph nodes; disease progresses rapidly and without antibiotic treatment leads to pneumonic form with a death rate in excess of 50%.

Crimean-Congo Hemorrhagic Fever - tick-borne viral disease; infection may also result from exposure to infected animal blood or tissue; geographic distribution includes Africa, Asia, the Middle East, and Eastern Europe; sudden onset of fever, headache, and muscle aches followed by hemorrhaging in the bowels, urine, nose, and gums; mortality rate is approximately 30%.

Rift Valley Fever - viral disease affecting domesticated animals and humans; transmission is by mosquito and other biting insects; infection may also occur through handling of infected meat or contact with blood; geographic distribution includes eastern and southern Africa where cattle and sheep are raised; symptoms are generally mild with fever and some liver abnormalities, but the disease may progress to hemorrhagic fever, encephalitis, or ocular disease; fatality rates are low at about 1% of cases.

Chikungunya - mosquito-borne (*Aedes aegypti*) viral disease associated with urban environments, similar to Dengue Fever; characterized by sudden onset of fever, rash, and severe joint pain usually lasting 3-7 days, some cases result in persistent arthritis.

Water contact diseases acquired through swimming or wading in freshwater lakes, streams, and rivers:

Leptospirosis - bacterial disease that affects animals and humans; infection occurs through contact with water, food, or soil contaminated by animal urine; symptoms include high fever, severe headache, vomiting, jaundice, and diarrhea; untreated, the disease can result in kidney damage, liver failure, meningitis, or respiratory distress; fatality rates are low but left untreated recovery can take months.

Schistosomiasis - caused by parasitic trematode flatworm *Schistosoma*; fresh water snails act as intermediate host and release larval form of parasite that penetrates the skin of people exposed to contaminated water; worms mature and reproduce in the blood vessels, liver, kidneys, and intestines releasing eggs, which become trapped in tissues triggering an immune response; may manifest as either

urinary or intestinal disease resulting in decreased work or learning capacity; mortality, while generally low, may occur in advanced cases usually due to bladder cancer; endemic in 74 developing countries with 80% of infected people living in sub-Saharan Africa; humans act as the reservoir for this parasite.

Aerosolized dust or soil contact disease acquired through inhalation of aerosols contaminated with rodent urine:

Lassa Fever - viral disease carried by rats of the genus *Mastomys*; endemic in portions of West Africa; infection occurs through direct contact with or consumption of food contaminated by rodent urine or fecal matter containing virus particles; fatality rate can reach 50% in epidemic outbreaks.

Respiratory Disease acquired through close contact with an infectious person:

Meningococcal Meningitis - bacterial disease causing an inflammation of the lining of the brain and spinal cord; one of the most important bacterial pathogens is *Neisseria meningitidis* because of its potential to cause epidemics; symptoms include stiff neck, high fever, headaches, and vomiting; bacteria are transmitted from person to person by respiratory droplets and facilitated by close and prolonged contact resulting from crowded living conditions, often with a seasonal distribution; death occurs in 5-15% of cases, typically within 24-48 hours of onset of symptoms; highest burden of meningococcal disease occurs in the hyper endemic region of sub-Saharan Africa known as the "Meningitis Belt" which stretches from Senegal east to Ethiopia.

Animal Contact Disease acquired through direct contact with local animals:

Rabies - viral disease of mammals usually transmitted through the bite of an infected animal, most commonly dogs; virus affects the central nervous system causing brain alteration and death; symptoms initially are non-specific fever and headache progressing to neurological symptoms; death occurs within days of the onset of symptoms.

Source: CIA World Factbook - Unless otherwise noted, information in this page is accurate as of January 9, 2012

http://www.indexmundi.com/india/major_infectious_diseases.html

7. State-wise Summary of Influenza A H1N1: 2009, 2010 and 2011

S. No.	State	Cases	Deaths	Cases	Deaths	Cases	Deaths
		May,2009-Dec,2009		Jan,2010-Dec,2010		Jan,2011-Dec,2011	
1	A P	777	52	733	49	11	1
2	Assam	47	1	5	1	0	0
3	Bihar	7	0	0	0	1	0
4	Chandigarh	257	8	75	0	0	0
5	Chhattisgarh	46	2	50	12	0	0
6	Delhi	8439	72	2725	77	25	2
7	Goa	63	5	68	1	7	0
8	Gujarat	697	125	1682	363	7	4
9	Haryana	1888	34	216	16	6	4

10	H P	14	7	10	3	14	3
11	Jammu & Kashmir	93	2	20	2	13	1
12	Jharkhand	1	0	1	0	0	0
13	Karnataka	1872	138	2575	116	100	12
14	Kerala	1579	32	1533	89	210	10
15	M P	20	8	395	110	9	4
16	Maharashtra	4594	270	6814	669	26	5
17	Orissa	26	3	92	29	0	0
18	Puducherry	87	6	50	6	1	0
19	Punjab	114	33	139	14	46	14
20	Rajasthan	3032	150	1710	153	36	11
21	Tamil Nadu	2062	7	1184	13	34	4
22	Uttarakhand	129	10	25	7	0	0
23	Uttar Pradesh	1215	14	376	29	57	0
24	West Bengal	135	0	121	4	0	0
Cumulative Total		27236	981	20604	1763	603	75

Office of the Director, Emergency Medical Relief, Directorate General of Health Services, GoI, New Delhi.

8. 30 Percent Cancer Deaths in India due to Tobacco Use – 2010

Tobacco use one of the major reasons for death in India. Here are some facts about Tobacco use in India and its effect. According to Tobacco Atlas brought out by World lung foundation 390,000 hectares of land is used to grow tobacco.

- Lancet reports 1.2 lakh deaths due to tobacco related cancer deaths in 2010.
- More than one-third of adults (35%) use tobacco in India, or 274.9 million
- 163.7 million use only smokeless tobacco; 68.9 million are only smokers and 42.3 million users of both smoking and smokeless tobacco.
- 14.1% children in the age group of 13-15 years are consuming tobacco in some form
- Bidis, along with smokeless tobacco, account for 81% of the Indian tobacco market.
- India is also the second largest consumer and second largest producer of tobacco in the world, second only to China.
- The prevalence of overall tobacco use among males is 48% and among females is 20%.
- Nearly two in five adults (38%) in rural areas and one in four adults (25%) in urban areas use tobacco in some form

- The extent of use of smokeless tobacco products among males (33%) is higher than among females (18%)
- Globally 6 million people die each year due tobacco consumption-related diseases
- The death toll is estimated to rise to eight million by 2030.
- It is estimated that more than 80% of these deaths occur in the developing countries.
- Tobacco has also been identified as the risk factor for 6 of the 8 leading causes of death.
- Nearly 30% of cancers in males in India, and more than 80% of all oral cancer are related to tobacco use.

Source: timesofindia.com and worldlungfoundation.org.

<http://indiafacts.in/facts/30-cancer-deaths-in-india-due-to-tobacco-use/>

9. Eating Habits of Urban Indians

Do you want to know what Indians eat? A new study has revealed the eating habits of urban Indians. The wellness group of Apollo Hospital Group, under Prof. Adrian Kennedy, has been monitoring the health data of urban Indians over the last decades. The result of this year's health study analysed the eating habits of 40,000 urban Indians across eight cities who came to Apollo for their medical checkups.

These are some of the findings about **what Indians eat and their health conditions:**

- **48% eat oily fried foods**
- **51% do not eat fresh fruits, uncooked vegetables or fresh salad on a daily basis.**
- **49% have low protein intake, eat meat, dal or beans less than 3 days a week.**
- **54% have high sugar intake, gorge on sweets.**
- **47% indulge in untimely snacking.**
- **31% have insufficient calcium intake, consume few dairy products.**
- **72% eat meat, mainly chicken and fish, 2-3 days a week.**
- **36% eat out at Fast food outlets regularly.**
- **As a result**
- **48% are overweight**
- **34% do not exercise**
- **51% are physically unfit**
- **33% are on daily medication**
- **26% have high BP**

- **30% have bad teeth.**
- **17% have diabetes.**
- **31% face digestive disorders.**

Source: India Today Magazine June 4 2012.

<http://indiafacts.in/health/what-urban-indians-are-eating/>

10. Swine Flu Deaths in 2009 Topped Quarter Million

Featured Article

Academic Journal

Main Category: [Swine Flu](#)

Also Included In: [Immune System / Vaccines](#); [Flu / Cold / SARS](#)

Article Date: 26 Jun 2012 - 2:00 PDT

Deaths worldwide from the 2009 influenza H1N1 "swine flu" pandemic are likely to be nearer 280,000, some 15 times more than the 18,500 reported from confirmed lab tests, suggests a new study published in *The Lancet Infectious Diseases* this week.

For the study, led by the US Centers for Disease Control and Prevention, researchers developed a new model using [flu](#) data from 12 low, middle, and high income countries.

The figures they used were based on flu diagnosed from patients' symptoms and not from lab tests.

In their model they assumed that the risk of death from flu is higher in some countries than in others, and they calculated respiratory deaths associated with the 2009 [H1N1](#) virus differently to the cardiovascular deaths linked to the pandemic.

They estimate that globally there were 201,200 respiratory deaths (ranging from 105,700 to 395,000), and 83,300 cardiovascular deaths (46,000 to 179,900) associated with 2009 pandemic H1N1 flu virus.

These figures are some 15 times higher than reported laboratory-confirmed deaths, write the authors.

"80% of the respiratory and cardiovascular deaths were in people younger than 65 years and 59% occurred in south-east Asia and Africa," they note.

The researchers suggest some problems with availability of data in the low income countries may affect the accuracy of these estimates.

However, despite these shortcomings, they conclude that a disproportionate number of estimated pandemic deaths may have occurred in lower income countries, and called for more effort to target vaccine production and supply to them in future pandemics.

In an accompanying editorial, Cecile Viboud of the National Institutes of Health and Lone Simonsen of George Washington University, suggest these estimates highlight the **difficult problem of trying to keep track of a pandemic as it runs its course**.

Lab-confirmed deaths hugely under-estimate the real number of deaths because there is a lack of routine testing and problems with identifying flu-related deaths, they note.

Another study in the same issue of the journal highlights the success of Scotland's vaccination campaign during the H1N1 pandemic.

In that study, researchers estimated vaccine effectiveness in a nationally representative sample of the Scottish population.

In their paper they describe how the pandemic H1N1 vaccination program started in the third week of October 2009, and by the end of January 2010, just over 38,000 people (15%) were vaccinated, leaving 85% unvaccinated.

They calculate that the effectiveness of the vaccine in preventing emergency hospital admissions from flu-related disorders was 19.5%, and the vaccine's effectiveness in preventing lab-confirmed flu was 77%.

In their conclusion they write:

"Pandemic H1N1 2009 [influenza](#) vaccination was associated with protection against pandemic influenza and a reduction in hospital admissions from influenza-related disorders in Scotland during the 2009-10 pandemic.

In August 2010, after it had been reported in over 200 countries, the World Health Organization (WHO) announced that the world is in a "post-pandemic" period with respect to H1N1 [swine flu](#), but the virus is still circulating.

H1N1 was included in the 2011-2012 seasonal flu vaccines in the US, the UK and many other countries.

Seasonal flu kills between 250,000 and 500,000 people worldwide every year, according to WHO.

Written by Catharine Paddock

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Visit our [swine flu](#) section for the latest news on this subject.

"Estimated global mortality associated with the first 12 months of 2009 pandemic influenza A H1N1 virus circulation: a modelling study"; Fatimah S Dawood, A Danielle Iuliano, Carrie Reed, Martin I Meltzer, David K Shay, Po-Yung Cheng, Don Bandaranayake, Robert F Breiman, W Abdullah Brooks, Philippe Buchy, Daniel R Feikin, Karen B Fowler, Aubree Gordon, Nguyen Tran Hien, Peter Horby, Q Sue Huang, Mark A Katz, Anand Krishnan, Renu Lal, Joel M Montgomery, Kåre Mølbak, Richard Pebody, Anne M Presanis, Hugo Razuri, Anneke Steens, Yeny O Tinoco, Jacco Wallinga, Hongjie Yu, Sirenda Vong, Joseph Bresee, Marc-Alain Widdowson; *The Lancet Infectious Diseases*, Early Online Publication, 26 June 2012; DOI:10.1016/S1473-3099(12)70121-4; [Link to Abstract](#)

"Effectiveness of H1N1 vaccine for the prevention of pandemic influenza in Scotland, UK: a retrospective observational cohort study"; Colin R Simpson, Lewis D Ritchie, Chris Robertson, Aziz Sheikh, Jim McMenamin; *The Lancet Infectious Diseases*, Early Online Publication, 26 June 2012; DOI:10.1016/S1473-3099(12)70133-0; [Link to Abstract](#).

Additional source: [WHO](#)

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11. One Maternal Death Every 10 Minutes in India: UN

New Delhi: India is likely to miss the Millennium Development Goal (MDG) related to maternal health as one maternal death is being reported every 10 minutes in the country now.

India recorded around 57,000 maternal deaths in 2010, which translate into a whopping six every hour and one every 10 minutes, UN data in this regard says.

The current Maternal Mortality Rate (MMR) of India is 212 per one lakh live births, whereas the country's MDG in this respect is 109 per one lakh live births by 2015.

The MMR challenge for India was highlighted today at the launch of the Millennium Development Goals Report of the UN Secretary General. The 2012 report, which assesses the regional progress on eight MDGs the world promised to meet, states that although progress has been made on improvements in maternal health, actual targets remain far from sight.

"India is moving well on MMR. We have made progress in this regard. The MMR recorded a 38 per cent decline in maternal deaths between 1999 and 2009. There has been progress but we are not there just yet. The Government needs to ensure the availability of Auxiliary Nurses and Midwives closer to the homes of women who are delivering", Frederika Meijer, India Representative for United Nations Population Fund said.

Meijer said almost 150 women were dying daily in India, as per 2010 data on maternal deaths. "This means one woman is dying every minute. The Government must work to address the issue of unmet need for contraception of women. They need to be counseled to space their children better," Meijer said.

Maternal deaths are defined as the number of women who die during pregnancy or within 42 days of the termination of pregnancy.

India has reduced MMR significantly from 437 per one lakh live births in 1999 to 212 now, but needs to hasten the pace under National Rural Health Mission to achieve related MDG.

The MDG Report 2012 points out that an estimated 2,87,000 maternal deaths occurred in 2010 worldwide. This represents a decline of 47 per cent from 1990 when the MDGs were set.

"Of the total maternal death burden worldwide, the sub-Saharan Africa accounts for 56 per cent and South Asia accounts for 29 per cent. Together the two regions made up for 85 per cent of the global

maternal death burden in 2010", states the Report released by noted economist Jayati Ghosh of Jawaharlal Nehru University.

Ghosh flagged another important issue on the health front saying poor child nutrition remained a massive challenge for India where 42 per cent children under five years of age were underweight.

"This is the largest proportion of underweight children anywhere in the world. Nutrition deprivation is a huge issue which the Government must address because it affects a child's ability to study and lead a productive life later, Together with food insecurity and employment insecurity, nutrition deprivation to me is a big problem for India. The situation is alarming", she said.

As many as 237 million Indians are still living in hunger though India has managed to meet the first MDG of reducing people in extreme poverty by half between 1990 and 2015. Poverty has declined in India from 51 per cent in 1990 to 37 per cent now, but hunger remains a challenge, especially when it affects child nutrition.

On infant health, though, India has done much better and is well within reaching the MDG of reducing IMR to 42 per 1000 live births. As per the latest estimates, India's IMR stands at 47. It is a little higher for rural areas.

India's progress on the MDG of combating HIV/AIDS, malaria and TB is also satisfactory, said UN officials.

They said it was heartening that India had managed to do well on the health MDGs despite the fact that food insecurity in the country was growing.

Meijer, however, warned "At the current pace, India is unlikely to meet the MDG on maternal health. It needs to focus on such huge pockets where the mother mortality rate is still high. The states where MMR is still high are Assam, Bihar, Madhya Pradesh, Uttar Pradesh and Rajasthan, besides others".

To achieve this MDG 5 (on maternal health) India needed to reduce maternal mortality (MMR) from 437 deaths per 100,000 live births in 1991 to 109 by 2015. It has only reached the 212 mark just yet.

The UN MDG Report 2012 points out that overall, three important targets on poverty, slums and water have been met three years ahead of the 2015 deadline. The share of people living on less than 1.25 USD a day has reduced to less than half as compared to 1990.

The proportion of people with improved access to drinking water has risen from 76 per cent in 1990 to 89 per cent in 2010.

The world has also achieved parity in primary education between girls and boys. There were 97 girls enrolled per 100 boys in 2010 - up from 91 girls per 100 boys in 1999.

The UN MDG Report warns Governments against allowing the current economic crisis to reverse the progress in reducing poverty.

http://zeenews.india.com/news/health/exclusive/a-maternal-death-every-10-mins-in-india-un_17710.html

12. India likely to miss MDG on Maternal Health: U.N.

With one maternal death reported every 10 minutes, India is likely to miss the Millennium Development Goal (MDG) related to maternal health, a latest United Nations report says. While there is an improvement from maternal death in every six minutes in 2010 to 10 minutes now, the MDG target in this respect is unlikely to be met, the report said.

At present, the Maternal Mortality Rate (MMR) of India is 212 per one lakh live births, whereas the country's target is 109 per one lakh live births by 2015.

The United Nation's Millennium Development Goals Report of the U.N. Secretary-General, 2012, which assesses the regional progress on eight MDGs the world promised to meet, suggests that although progress has been made on improvements in maternal health, actual targets remain far from achieving the desired rate.

Maternal deaths are defined as the number of women who die during pregnancy or within 42 days of the termination of pregnancy. India has reduced MMR significantly from 437 per one lakh live births in 1999 to 212 now, but needs to hasten the pace under the National Rural Health Mission to achieve the related MDG.

The MDG Report 2012 points out that an estimated 2,87,000 maternal deaths occurred in 2010 worldwide. This represents a decline of 47 per cent from 1990 when the MDGs were set.

"Of the total maternal death burden worldwide, sub-Saharan Africa accounts for 56 per cent and South Asia accounts for 29 per cent. Together the two regions made up for 85 per cent of the global maternal death burden in 2010," states the report released by noted economist Jayati Ghosh of Jawaharlal Nehru University.

India has done better on infant health, and is well within reaching the MDG of reducing IMR to 42 per 1000 live births. As per the latest estimates, India's IMR stands at 47. India's progress on the MDG of combating HIV/AIDS, malaria and TB is also satisfactory.

India needs to focus on Assam, Bihar, MP, UP and Rajasthan, where the MMR is still high.

To achieve this, MDG 5 (on maternal health) India needs to reduce maternal mortality (MMR) from 437 deaths per 100,000 live births in 1991 to 109 by 2015. It has only reached the 212 mark.

The UN MDG Report 2012 points out that overall, three important targets on poverty, slums and water have been met three years ahead of the 2015 deadline. The share of people living on less than \$1.25 a day has reduced to less than half as compared to 1990.

The proportion of people with improved access to drinking water has risen from 76 per cent in 1990 to 89 per cent in 2010.

As many as 237 million Indians are still living in hunger though India has managed to meet the first MDG of reducing people in extreme poverty by half between 1990 and 2015.

<http://www.thehindu.com/health/policy-and-issues/article3595095.ece>

13. National Institute of Communicable Diseases (NICD)

The National Institute of Communicable Diseases (NICD) had its origin as Central Malaria Bureau, established at Kasauli (Himachal Pradesh) in 1909 and following expansion was renamed in 1927 as the Malaria Survey of India. The organization was shifted to Delhi in 1938 and called as the Malaria Institute of India (MII). In view of the drastic reduction achieved in the incidence of malaria under National Malaria Eradication Programme (NMEP), Government of India decided to reorganize and expand the activities of the institute to cover other communicable diseases. Thus, on July 30, 1963 the erstwhile MII was renamed as NICD to shoulder these additional responsibilities.

The institute was established to function as a national centre of excellence for control of communicable diseases. The function of the institute also included various areas of training and research using multi-disciplinary integrated approach. The institute was, in addition, expected to provide expertise to the States and Union Territories (UTs) on rapid health assessment and laboratory based diagnostic services. Surveillance of communicable diseases and outbreak investigation also formed an indispensable part of its activities.

The NICD campus at Delhi covers an approximate areas of 15.35 acres which includes the former official residence of Commander in Chief of the Indian Army and now houses the administrative block, library, divisions of epidemiology and parasitic diseases. The Institute is one of its unique kind in the city of Delhi having so much of green area with about 80% as open area. The Institute has got three large sprawling lawns with well maintained plants as well as a number of smaller garden islands. The headquarters of the directorate of National Anti Malaria Programme (NAMP), now named as National Vector Borne Disease Control Programme (NVBDCP) is also located in the NCDC campus. The facilities available in the campus include research laboratories, a large lecture hall, well equipped conference and seminar rooms, animal house, fish hatcheries and two hostels with a total capacity to accommodate about 125 trainees and a well maintained canteen. The campus has the facilities of play grounds for volleyball, badminton etc. as well as for indoor facilities like carom, gymnasium etc.

The Institute is under administrative control of the Director General of Health Services, Ministry of Health and Family Welfare, Govt. of India. The Director, an officer of the Public Health sub-cadre of Central Health Service, is the administrative and technical head of the Institute.

The Institute has its headquarters in Delhi and has 8 out-station branches located at Alwar (Rajasthan), Bengaluru (Karnataka), Kozikode (Kerala), Coonoor (Tamil Nadu), Jagdalpur (Chhattisgarh), Patna (Bihar), Rajahmundry (Andhra Pradesh) and Varanasi (Uttar Pradesh).

There are several technical Divisions at the headquarters of the institute i.e. Centre for Epidemiology and Parasitic Diseases (Dept. of Epidemiology, Dept. Parasitic Disease) Division of Microbiology, Division of Zoonosis, Centre for HIV/AIDS and related diseases, Centre for Medical Entomology and Vector Management, Division of Malariology and Coordination, Division of Biochemistry and Biotechnology.

In each division there are several sections and laboratories dealing with different communicable diseases. The divisions have well equipped laboratories with modern equipments capable of undertaking tests using latest technology. The activities of each division are supervised by an officer in-charge, supported by medical and non-medical scientists, research officers and other technical and paramedical staff. Every Division is equipped with its own independent Seminar Room. The institute has a 24 x 7 Disease Monitoring Cell operating round the clock to respond to enquiries related to disease outbreak along-with video-conferencing facility to interact with the network of disease surveillance centres in the states and districts. The branches are also well equipped and staffed to carry out field studies, training activities and research.

14. Malaria *Plasmodium falciparum* (Pf) Rapid Test

INTENDED USE:

This Malaria *Plasmodium falciparum* (*P.f.*) Rapid Test is a qualitative test for the detection of histidine-rich protein 2 antigen (HRP-2) of *P.f.* in human whole blood. This test is for In-Vitro Diagnostic use only.

INTRODUCTION:

Malaria is one of the world's most prevalent parasitic diseases and ranks third in the world among major infectious diseases in terms of mortality. The protozoal parasites that cause malaria are from the *Plasmodium* genus. Four species of *Plasmodium* protozoa cause malaria: *Plasmodium falciparum*, *Plasmodium vivax*, *Plasmodium malariae* and *Plasmodium ovale*. Transmitted principally by the Anopheles mosquito, malaria infections may also occur from contacting infected blood, such as from blood transfusions.

P. falciparum accounts for the majority of infections and is the most lethal. *P. vivax*, *P. malariae* and *P. ovale* cause a less severe form of malaria with intermittent fever which is usually neither debilitating nor fatal. Classic symptoms of malaria include fever, headaches, chills, vomiting, shivering and convulsions. In some rare forms of falciparum malaria, chills and fever may be absent and the patient may present with delirium or coma. Remission periods can last from a few weeks to several months.

Severe anemia is often attributed to the cause of death from a malaria infection.

Malaria is a curable disease with a host of drugs that can be used in both its treatment and prevention. Two of the best known and most commonly used are chloroquine and quinine. The early detection of *P. falciparum* malaria is of great importance due to rising levels of drug resistance now being associated with this disease.

TEST PRINCIPLE

This *Plasmodium falciparum* (*P.f.*) malaria test is a rapid, *in-vitro* immunodiagnostic test for the detection of circulating *P.f.* antigen in whole blood. The test uses antibodies that are specific for the histidine-rich protein 2 antigen (HRP-2) of *P.f.* Whole blood (5 uL) is applied to the sample pad where the red blood cells are lysed with a specially formulated solution. The label pad that is next to the sample pad on the strip is impregnated with blue latex that has an anti- HRP-2 antibody coupled to it. The label pad is also impregnated with purple latex that is coupled to a control antibody. A second anti-HRP-2 antibody is immobilized on the test strip at the test line region. A control material is immobilized on the strip at the control line region.

When a positive sample is applied to the sample pad, *P.f.* antigen in the sample contacts the latex-labeled antibody and binds to it. A washing reagent is then added to a test vial, and the strip is placed in the vial. As the liquid flows along the length of the strip, any antigen-latex complexes also migrate with the liquid. These complexes are captured by their respective antibodies at the test and control line regions. If a sample contains *P.f.* antigen, a blue line will form in the test region. If no *P.f.* antigen is present, a blue line will not form in the test region. A purple control line will always appear in the control region if the test has been properly performed.

KIT CONTENTS:

Each kit contains the following components in sufficient quantities to perform the number of tests indicated on the package label:

- 25 test devices packaged in individual foil pouches.
- 25 sample collection capillaries
- 1 bottle of Lysing/Wash reagent
- 1 product insert

MATERIALS REQUIRED BUT NOT SUPPLIED:

- Lancets
- Disinfecting, sterile wipe
- Timer capable of timing from 0 to 60 minutes

PRECAUTIONS:

1. Specimens should be handled as being potentially infectious. The Centers for Disease Control (CDC) and the National Institutes of Health (NIH) recommend that all potentially infectious agents be handled at a Biosafety Level 2.
2. Biological decontamination procedures should be followed for all equipment, containers, surfaces, etc. that come in contact with potentially infectious specimens. All disposables that come in contact with these samples should be disposed of as infectious waste.
3. For best results, strict adherence to these instructions is required. Be careful not to touch the tip of the wash bottle to the sample well when adding buffer to the device. This will greatly minimize the likelihood of contaminating the wash reagent.
4. The wash solution contains a low concentration of sodium azide as a preservative (less than 0.1 %). Sodium azide is toxic. Do not drink this buffer. Sodium azide may also react with lead and copper in plumbing to form explosive compounds. If you dispose of this buffer down a drain, flush the drain with excess amounts of water to minimize the accumulation of potentially explosive metal-azide compounds.
5. Do not use the test devices or Lysing/Wash reagent beyond the stated expiration date marked on the package label.
6. Store the test kits and buffer according to temperature and humidity conditions stated on the package label.
7. All test devices, buffers and specimens must be at room temperature (15-30°C) before running the assay.
8. Do not re-use the test devices.

STORAGE AND SHELF LIFE OF REAGENTS:

Store the kit between 2°C and 30°C. Do not store the kit in direct sunlight. Be sure to use the device immediately after re-moving it from its foil pouch. The test kit may be used until its expiration date, which can be found on the package label.

SPECIMEN COLLECTION:

1. Handle all specimens as capable of transmitting infectious diseases. Dispose of all materials that come in contact with the specimen as infectious waste.
2. Specimens should be collected aseptically by fingerstick or venipuncture according to standard methods such as those specified by the National Committee for Clinical Laboratory Standards (NCCLS). The use of grossly lipemic or turbid samples should be avoided.

3. Whole blood samples should be used immediately, if possible. NCCLS provides recommendations for storing blood specimens (Approved Standard - Procedures for the Handling and Processing of Blood Specimens, H1SA. 1990).

4. **Use the collection capillary provided to deliver a 5 uL sample or collect venous blood into EDTA tubes.** To obtain capillary blood, puncture a finger, heel or other appropriate site. First cleanse the area with a disinfecting sterile wipe. Use a lancet to puncture the skin. Allow a blood droplet to form.

Touch the collection capillary to the blood droplet and transfer to the test strip immediately. To collect venous blood, use the standard venipuncture procedure and collect blood into an EDTA tube. If the test cannot be performed immediately, the blood may be stored for up to three days at 2°C to 8°C.

TEST PROCEDURE:

1. Just prior to use, remove a device from its foil pouch. Lay the test device flat on the work surface.
2. Using a sterile lancet and clean sample capillary, collect blood by puncturing an accessible site (e.g., finger or heel). Allow a blood droplet to form at the puncture site and touch the tip of the capillary to the blood droplet. Allow blood to fill about 3/4 of the capillary. Alternatively, 5 uL of EDTA venous blood may be used. Ensure that the blood sample warms to room temperature prior to use.
3. Transfer the blood sample from the capillary tube to the test device by holding the capillary vertically and gently touching the full end against the pad within the sample addition port until all of the blood has been transferred. Discard the capillary properly. If using a micro-pipetter, slowly apply 5 uL of blood to the sample pad
4. Immediately add one drop of the Lysing/ Wash reagent to the sample port on top of the whole blood
5. Add five drops of the Lysing/Wash reagent to the buffer well
6. Using a timer, allow the reaction to proceed for 15 minutes. Do not pick up the device during this time.
7. When the 15-minute period is over, read the results. If there is still a reddish background, lay the device flat on the work surface and wait an additional 15 minutes. The results may be read from 15 to 30 minutes. Do not read results after 60 minutes.

Negative results must be confirmed at 30 minutes

IMPORTANT NOTICE:

This test only detects malaria infections caused by *Plasmodium falciparum*.

Occasionally, residual malaria antigen may be detected for several days following elimination of the parasite by anti-malarial treatment. The diagnosis of Malaria should be made using the results of this test together with the other clinical and laboratory findings.

INTERPRETATION OF THE RESULTS:

A positive result is indicated when any visible line forms in the result window next to the test zone together with a line in the C zone. The test is positive even if the line in the test zone appears lighter or darker than the line in the C zone.

1. The test is not valid if the control line does not appear, regardless of the presence of line in the test line region. Repeat the test with a new device.
2. Positive results may appear as early as 5 minutes. Negative results must be confirmed after at 30 minutes.
3. The background of the strip should be pinkish-white, not red, prior to confirming a negative result.
4. Results should not be read after 60 minutes.

Positive Test Result

A visible blue test line on the strip located in the test zone indicates a positive test result for *Plasmodium falciparum*. The purple control line must also be present.

Negative Test Result

The test is negative if only the control line appears

Invalid Test Result

The test is invalid if a purple line does not appear in the control zone. If this occurs, the test should be repeated using a new test device.

Histidine Rich Protein 2 (HRP-2) is secreted by the *Plasmodium falciparum* species. Its presence usually indicates a malaria *P.f.* infection. Occasionally, residual HRP-2 may be detected for several days following elimination of the parasite by anti-malarial treatment. The diagnosis of *P.f.* Malaria should be made using the results of this test together with the other clinical and laboratory findings.

QUALITY CONTROL:

1. For the assay to be considered valid, the control line must appear. If it does not appear, the test results are not valid and the test must be repeated.
2. In addition to your laboratory's standard quality control procedures, the NCCLS recommends that a positive and negative external control be tested at least once within each 25- test kit and by each operator performing testing within a kit. This will verify that the reagents and test strips are working properly and the operator is able to correctly perform the test procedure. Please refer to this NCCLS publication C24- A for recommendations on appropriate Quality Control practices.

LIMITATIONS OF THE TEST:

1. This HPR-2 based Malaria *P.f.* tests may give positive malaria results for up to 2 weeks following chemotherapy and parasite clearance as confirmed by microscopy.
2. As with all diagnostic tests, the result must be correlated with clinical findings. If the test result is negative and malaria infection suspicion still exists, additional follow-up testing using other clinical methods is recommended.
3. A negative result at any time does not preclude the possibility of an early malaria infection.
4. Strict adherence to the test procedure is required. Do not re-use negative devices. Do not adulterate the Lysing/Wash reagent.
5. This test cannot be used to monitor therapy or to estimate the titer of the infection.
6. A final diagnosis should be based on these test results in conjunction with other clinical and laboratory findings.

SENSITIVITY AND SPECIFICITY:

A clinical study using a total 370 whole blood samples was conducted at various sites in 3 countries. The results of the Merlin

Labs malaria combo test were compared with the blood smear / microscopy method. The sensitivity and specificity of the *Pf* test results are given below:

P.f. Test Results smear (+) Blood smear (-)

Rapid Test (+) 44 8

Rapid Test (-) 0 318

Sensitivity = >99% Specificity = 98%

STABILITY:

This Malaria *P.f.* test has been found to be stable for up to 14 months from the date of manufacture when stored between 2 to 30°C. The expiration date of each test can be found on the Kit box label. No component or reagent of the test should be used beyond its printed expiration date.

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http://www.rapidtest.com/Malaria_172103P-25-web.pdf

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E-mail: onestep@rapidtest.com

Web site: www.rapidtest.com

See external label, $\Sigma=25$ or 50 tests Cat. #172103P-25

2°C-30°C for test card and 2°C-8°C for Sample tube

For the convenience of storage, test cards and sample tubes can be stored separately

15. Medecins Sans Frontieres (MSF) battles Kala Azar in Bihar

July 17, 2012

Patna: Medecins Sans Frontieres (MSF), which provides medical humanitarian aid worldwide, is waging a war against kala azar in Bihar.

Hundreds have benefited since MSF started its project in Vaishali in 2007. In March 2012, the Switzerland-headquartered body formally joined hands with the Bihar government.

A disease transmitted by the sand fly, kala azar has killed in the past few decades many hundreds in Bihar, the state worst hit by it. Over 70 people died last year.

Since 1988, MSF has treated more than 100,000 kala azar patients in Sudan, Ethiopia, Kenya, Somalia, Uganda and Bangladesh besides India. Its doctors provide liposomal amphotericin B, a safe and effective drug.

MSF says that it has treated more than 10,000 patients with an initial cure rate of over 98 percent in the last five years in Vaishali as well as neighbouring districts.

All treatment is free of cost, says MSF project coordinator Delphine Altwegg. It says it cured around 2,000 patients each year in the last five years.

Winner of the Nobel Peace Prize in 1999, MSF has set up a treatment centre in Hajipur Sadar Hospital and in the primary health centres of Vaishali.

"MSF has been providing the best medical services to kala azar patients," Altwegg said.

Jonathan Jennings, country director of MSF in India, said MSF teamed up with the Bihar government this year to launch a campaign to eradicate the disease.

MSF says it has proved that it is possible to diagnose and treat the patients with a high cure rate even in remote settings.

According to C.P. Thakur, a former central minister and chairman of the Kala Azar Task Force, the disease, a recurring epidemic, affects thousands in Bihar each year.

Over 23,000 cases were reported in 31 of Bihar's 38 districts in 2011.

Over 750 people died of kala azar in the past five years. Authorities in Bihar have vowed to stamp it out by 2015.

Kala azar, medically called visceral leishmaniasis, is known as the poor man's disease because it affects the poorest.

The sand fly, which transmits the disease, multiplies in the cow dung that villagers use to plaster their shanties or as cakes for fuel.

The flies survive on the sap in banana and bamboo groves and on decomposed cow dung heaps.

The disease is characterised by fever, weight loss, swelling of the spleen and liver and can lead to cardiovascular complications, resulting in death.

Experts say poor living standards and unhygienic conditions make members of the Mushahar community, who are Dalits, easy prey.

Around 90 percent of the world's kala azar cases are found in India, Bangladesh, Nepal and Sudan.

http://zeenews.india.com/news/health/exclusive/scared-hiv-ve-women-opting-for-abortion_17912.html

16. Fight against HIV a Success in Poor Countries: UN

Washington: A push to get more AIDS treatment to the world's poorest, hardest-hit countries is paying off as deaths inch down — and new infections are dropping a bit, too, the United Nations reported on Wednesday.

“I personally believe it is a new era, new era for treatment, new era for prevention,” said Michel Sidibe, executive director of UNAIDS, the Joint United Nations Program on HIV and AIDS.

Some 34.2 million people worldwide were living with the AIDS virus at the end last year, a slight rise from the previous year as better treatment helps patients live longer.

Most of them live in low- and middle-income countries, where a record 8 million people received life-saving drugs last year, the report found. That’s up from 6.6 million in 2010, and puts the world on track to meet a UN goal of having 15 million people in those hard-hit regions on treatment by 2015.

The report comes days before the world’s largest AIDS conference opens in the nation’s capital with the goal of finally “turning the tide” on the epidemic and stemming the spread of the HIV virus.

Treatment is one of the keys to doing that because it doesn’t just save the lives of people living with HIV. Recent research shows early treatment, so patients stay healthy, also makes them far less likely to infect others.

“We need to get that number up as rapidly as possible,” said Chris Collins of amFAR, the Foundation for AIDS Research, who called the 2011 increase in treatment higher than expected. “If we can get to scale with AIDS treatment, we’re not only saving lives but we’re preventing infection and beginning to end this epidemic.”

UNAIDS report found there were 1.7 million deaths from the virus last year, down from 1.8 million.

Better, the new data show 2.5 million people became infected with HIV last year — 100,000 fewer than in 2010. New infections have fallen by nearly 20 percent worldwide in the past decade.

Perhaps most encouraging is the steady drop in new infections in children, mostly due to treating HIV-infected pregnant women so they don’t pass the virus to their babies. About 330,000 children became infected in 2011, almost half the number that were being infected at the epidemic’s peak in 2003.

The world spent \$16.8 billion battling AIDS in the hard-hit countries last year. Sidibe said an important reason for the progress is that affected countries are paying more of their share — for the first time, totaling a bit more than wealthier donor nations paid — as they see the fruits of the investment.

South Africa alone spent nearly \$2 billion last year.

But, “we are still short \$7 billion” of the yearly total it will take to get to the 2015 treatment goal, Sidibe warned, urging increased spending despite the global financial crisis.

Other Challenges:

—Young people ages 15 to 24 account for 40 percent of new infections — twice as many young women as men, the report found.

—Nearly 60 percent of the 1.5 million pregnant women living with HIV in poor countries received effective anti-AIDS medications. Another international goal is to nearly eliminate infections at birth.

—New infections continue to rise in some parts of the world, including Eastern Europe and central Asia. Even in the United States, they’re holding steady.

—And dozens of countries have laws that fuel HIV spread in such ways as criminalizing same-sex sexual activity, so that populations at high-risk are too scared to be tested or treated.

Some countries are scaling up treatment at a dramatic pace — including Botswana and Namibia that have the majority of their residents who qualify for AIDS drugs now on them, said World Health Organization AIDS director Dr Gottfried Hirnschall. A key is to shift away from providing the drugs only through expensive doctors and clinics, and instead through community programs that also offer peer counseling and other services that encourage people to keep taking the medicine.

A WHO study shows that resistance to the drugs is growing slowly in poor countries despite the rapid increase in medication use.

Now the WHO is urging poor countries to use the medicines in ways that maximize their chances of preventing new infections. While the U.S. advises people with HIV to start treatment as early as possible, that's not financially possible in poor countries, where the WHO advises starting once a person's immune system weakens to a certain degree.

But Hirnschall cited important exceptions. Up to half of HIV-infected people in ongoing relationships have partners who still are free of the virus, and those people need treatment regardless of their immune strength, he said. Rwanda and Zambia have begun implementing that policy, and more than a dozen other countries are considering it.

AP

<http://www.firstpost.com/living/fight-against-hiv-a-success-in-poor-countries-un-382864.html>

17. Cure AIDS with love, says Elton John

IANS | Jul 25, 2012

Singer Elton John believes AIDS can be cured with love as that is what drives research into the potentially fatal disease.

"Maybe you think I am naive. Maybe you think I am off my rocker. Here I am telling an audience of 7,000 global health experts that you can end AIDS with love," he said at the AIDS 2012 international conference, reports femalefirst.co.uk.

"But thanks to all this compassion, all this love, more than 8 million people are on treatment.. Thanks to people who have chosen to act, who have chosen to care, we can see an end to this epidemic..." he said.

"... but it's going to take a lot more compassion to get us there, a hell of a lot more," he added.

The 65-year-old went on to note that "shame and stigma" prevent many people from getting help with the condition and discussed his belief that everyone needs to feel that they matter in the world.

"We have inexpensive and accurate take-home tests for HIV. But we can't convince people to get tested if they think their lives don't count... Millions of people around the world feel ashamed because of who they are. They feel subhuman, worthless, like they don't matter at all," he said.

Referring to his recovery from cocaine addiction, he added: "I felt that shame before and it almost killed me. It's killing people all around the world. We have to replace the stigma with compassion."

<http://timesofindia.indiatimes.com/entertainment/music/news-and-interviews/Cure-AIDS-with-love-says-Elton-John/articleshow/15138284.cms>

18. As Swine Flu Deaths Rise Worldwide, US Schools Brace for "Nasty" Flu Season

05 Aug 2009

Following a recent World Health Organization (WHO) report that over 1,000 of 1,154 people who have died worldwide from the 2009 H1N1 [swine flu](#) pandemic were in the Americas, schools in the US brace themselves for a "nasty" [flu](#) season.

338 (nearly one third) of the deaths were reported in the last week of July, of which more than 300 were in the Americas.

A total of 168 countries and territories have now reported at least one lab confirmed case of pandemic swine flu, bringing the total reported number of cases worldwide to at least 162,380, said the WHO.

However, the global health agency explained that this number is likely to be a gross understatement of the actual number of cases, since countries are no longer required to test and report individual cases.

Since 6 July, nine countries have newly reported their first case of pandemic [H1N1](#) flu: Azerbaijan, Gabon, Grenada, Kazakhstan, Moldova, Monaco, Nauru, Swaziland, Suriname.

In terms of how active the virus is, most countries in North and South America are reporting widespread activity (last update for this was in mid July), while in Europe only the UK and Portugal are seeing widespread activity. The rest of Europe and countries reporting from Asia are experiencing localized activity said the WHO.

They also said there is no evidence that the pandemic swine flu virus is mutating to a more dangerous form, all "viruses analyzed to date are antigenically and genetically similar".

However, six patients have been found to have strains of the virus that is resistant to oseltamivir ([Tamiflu](#)). These cases were in Denmark (1 patient), Hong Kong (1), Japan (3) and Canada (1). Five of the six patients had been given Tamiflu, and they have all recovered well.

The resistant strains all had the same characteristic mutation at position 274/275, associated with oseltamivir resistance, said the WHO.

Meanwhile, US schools are bracing for what could be a "nasty flu season", reports ABC News.

The US government is expected to release guidelines for principals and educators this Friday to help them prevent the spread of H1N1 swine flu.

There is a delicate balance to be struck between stemming the spread of the virus and the disruption that would be caused by closing schools, which is one of the actions that may be considered.

The knock-on effect could be considerable, not only disrupting schools but other workplaces too as parents juggle their work arrangements to look after children at home.

Other challenges for educators are how to make sure students don't fall behind in their studies.

In Georgia, where students have already gone back to school, Cindy Ball, director of community relations for Rockdale County Public Schools, told ABC News, that they were concerned about:

"How do you continue learning for students who are healthy?"

Source: WHO, ABC News.

Written by: Catharine Paddock, PhD

<http://www.medicalnewstoday.com/articles/159820.php>

19. Childhood Obesity linked to Bladder, Urinary Cancer

IANS | Aug 5, 2012

Obesity in childhood has a direct link with bladder and urinary tract (urothelial) and colorectal cancers in adulthood, warn Israeli researchers.

Hence, maintaining a healthy weight has become a dire necessity. Besides extra pounds are tied to the risk of diabetes, heart disease, and joint and muscle pain.

Ari Shamiss and Adi Leiba of Tel Aviv University Sackler Faculty of Medicine and their fellow researchers conducted a longitudinal study of a cohort of 1.1 million males in the Israeli military, who were followed-up for 18 years, the journal *Cancer Epidemiology, Biomarkers and Prevention and Obesity* reports.

When they controlled for factors such as year of birth and education, the researchers discovered a clear link between childhood BMI, a height to weight index and those who were diagnosed with urothelial or colorectal cancers later in life, according to a Tel Aviv statement.

Shamiss believes that further research will reveal connections between childhood obesity and a wide range of other cancers, including pancreatic cancer, which he is currently researching.

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/Childhood-obesity-linked-to-bladder-urinary-cancer/articleshow/15122062.cms>

20. Breakthrough in making Malaria Vaccine

Aug 6, 2012

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Sydney: Australian researchers have made a major breakthrough in the quest for a vaccine against malaria, which snuffs out a million lives every year, particularly of children.

The findings show that people who develop immunity to malaria develop antibodies that primarily target a protein known as PfEMP1, which is produced by Plasmodium falciparum, causing most cases of malaria.

James Beeson, professor and senior study author at the Burnet Institute, Australia's largest virology and communicable disease research centre, said that these findings are a major advance towards developing an effective vaccine, the Journal of Clinical Investigation reports.

These findings unlock the mystery of which malaria proteins, known as variant surface antigens (VSAs), could be targeted by an effective vaccine to achieve immunity to malaria, according to a Burnet statement.

“A vaccine against malaria is urgently needed to reduce this disease globally and currently there is no licensed malaria vaccine available. The new findings support the idea that a vaccine could be developed that stimulates the immune system so that it specifically mounts a strong response (or attack) against the PfEMP1 protein that malaria produces,” said Beeson.

Study co-author, Jo-Anne Chan said the findings also showed that when the immune system attacks other proteins that malaria produces, this is not as effective in protecting people. This emphasises that the immune system has to ‘get it right’ in order to fight malaria infection effectively.

Malaria is caused by a parasite that infects human red blood cells and replicates within them. While inside these cells, malaria parasites produce specific proteins that enable infected cells to stick and clog-up blood vessels in the body.

This clogging can occur in organs such as the brain and lungs, and the placenta in pregnant women, and causes severe illness and death.

IANS

<http://www.firstpost.com/living/breakthrough-in-making-malaria-vaccine-406586.html>

21. Weight Training helps reduce Diabetes Risk

ANI | Aug 7, 2012

Researchers say men who do weight training regularly—for example, for 30 minutes per day, five days per week—may be able to reduce their risk of type 2 diabetes by up to 34 per cent.

And if they combine weight training and aerobic exercise, such as brisk walking or running, they may be able to reduce their risk even further—up to 59 per cent.

The study by Harvard School of Public Health (HSPH) and University of Southern Denmark researchers is the first to examine the role of weight training in the prevention of type 2 diabetes.

The results suggested that, because weight training appears to confer significant benefits independent of aerobic exercise, it could be a valuable alternative for people who have difficulty with the latter.

The researchers, including senior author Frank Hu, professor of nutrition and epidemiology at HSPH, followed 32,002 men from the Health Professionals Follow-up Study from 1990 to 2008.

The findings showed that even a modest amount of weight training may help reduce type 2 diabetes risk.

The researchers categorized the men according to how much weight training they did per week—between 1 and 59 minutes, between 60 and 149 minutes, and at least 150 minutes—and found that the training reduced their type 2 diabetes risk by 12 per cent, 25 per cent, and 34 per cent, respectively, compared with no weight training. Aerobic exercise is associated with significant benefits as well, the researchers found—it reduced the risk of type 2 diabetes by 7 per cent, 31 percent, and 52 per cent, respectively, for the three categories above.

The researchers also found that the combination of weight training and aerobic exercise confers the greatest benefits: Men who did more than 150 minutes of aerobics as well as at least 150 minutes of weight training per week had a 59 per cent reduced risk of type 2 diabetes.

Grontved said that further research is needed to confirm the results of the study as well as to analyze whether or not the findings can be generalized to women.

The study will be published online in *Archives of Internal Medicine*.

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/Weight-training-helps-reduce-diabetes-risk/articleshow/15387269.cms>

22. Activists up in Arms against new Proposal on Health Care

Aarti Dhar

NEW DELHI, August 8, 2012

Health activists are up in arms against the Planning Commission for its proposal in the 12th Five Year Plan documents that seeks to restructure the country's health care system in a way that would effectively hand over health care to the corporate sector.

“It is particularly problematic that the Plan document to be adopted by the panel by the end of this month, invokes the concept of Universal Health Care, while it actually proposes a strategy that is far removed from the basic tenets of universal health care,” Jan Swasthya Abhiyan, a conglomerate of rights-based health activists said here on Wednesday. The activists claimed that the Universal Health Coverage report had been “distorted and misinterpreted” by the Planning Commission.

Taking a serious note of the issue, Srinath Reddy, chairman of the now disbanded High Level Expert Group (HLEG), set up by the Planning Commission to draw a roadmap for universal health coverage for the country, has convened a meeting of the HLEG on Thursday to respond to the proposals.

At a press conference, the Jan Swasthya Abhiyan activists claimed that the Plan document recommends increase in public expenditure on health from the present one per cent to 1.58 per cent which is in sharp contrast to the HLEG recommendations of increasing the expenditure by at least 2.5 per cent of the gross domestic product. Secondly, it proposes that the Centre's share in the additional health expenditure would be less than half of what the States would contribute.

“What is of greater concern is the strategy proposed for re-structuring of the country's health system in the document that proposes a transition from the present system which is a mix of public sector service provision plus insurance, to a system of health care delivered by a managed network. There, is thus, a road map envisaged where the government would abandon its central role of providing health care and become primarily just a manager of the new system,” Amit Sengupta of Jan Swasthya Abhiyan said.

He pointed out that the documents vision of ‘universal provision of public health care’ through preventive interventions which the government would be both funding and universally providing (like vaccination, neo-natal care and other non-profit services) and clinical services at different levels, defined in an essential health package, which the government would finance but not necessarily directly provide.

“This would mean that the government would over time confine itself to providing a small package services and would be primarily just a purchaser of virtually all clinical services from the corporatized private sector. The government would, thus, finance (with public money), strengthen and bolster an already resurgent corporate sector providing medical services,” Jashodhara Dasgupta of Sahyog and member of HLEG said adding that it would also decisively halt and eventually reverse the moderate achievements of the National Rural Health Mission in expanding public health infrastructure and services.

Also, the public health system will now be asked to compete with the private sector to attract patients. A system is envisaged where each citizen family would be entitled to an essential health package in the network of their choice. Besides, public facility networks organised, private and NGO providers would also be empanelled to give a choice to the families by strengthening the Rashtriya Swasthya Bima Yojana. Whereas, the HLEG in its report had recommended against any kind of insurance as these often resulted in inferior health outcomes and high health care cost inflation.

Reacting to the draft Plan documents, Dr Reddy told *The Hindu* that the public sector should remain as the main provider of universal health coverage and it is necessary to strengthen the public health infrastructure from the sub-centre to district level. The private health care providers may be contracted in to supplement the services if needed through a well defined regulatory process, he added.

<http://www.thehindu.com/health/article3742403.ece>

23. India Witnesses Sharp decline in HIV Cases

English.news.cn 2012-08-14

NEW DELHI, Aug. 14 (Xinhua) -- India Tuesday announced that the country had witnessed a sharp decline in the number of new HIV cases -- a 56 percent drop -- in the past 10 years.

"HIV infections have declined by 56 percent during the last decade from 2.7 lakh in 2000 to 1.2 lakh in 2009 in our country," Indian Health and Family Welfare Minister Ghulam Nabi Azad said in the national capital.

"This has been possible due to political support at the highest levels to the various interventions under National AIDS Control Programme, including Parliamentarians and elected leaders at the state and local levels and cooperation received from NGOs, civil society, etc." the minister said while addressing an international HIV vaccine symposium.

Expressing similar sentiments, Minister of Science and Technology and Earth Sciences Ashwani Kumar said that the government believes that the new HIV infections could be significantly reduced if effective prevention programs are expanded and reach those at greatest risk of HIV infection.

In fact, HIV -- which causes AIDS -- was detected in India nearly 25 years back.

Though more than 2 million people are affected by the virus, India is said to be one of the few countries which has actually made significant reductions in HIV infections. The country's HIV- AIDS prevention model has been even lauded by United Nations Secretary General Ban-Ki Moon.

http://news.xinhuanet.com/english/health/2012-08/14/c_131784346.htm

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http://news.xinhuanet.com/english/health/2012-08/14/c_131784346.htm

25. Chemical in Lipsticks can cause Heart Problems

PTI

A chemical commonly used in lipsticks, handwashes and other personal care products may cause heart problems and muscle impairment, a new study has claimed.

Scientists at the University of California have found that triclosan, which is used in hundreds of household products, can hinder the process by which muscles, including the heart, receive signals from the brain.

In tests on mice, they noted a ‘dramatic’ 25 per cent reduction in heart function within 20 minutes of exposure, and warned there is ‘strong evidence’ it could affect human health.

However regulators and other experts insist triclosan levels in products are safe, and that the doses injected into the mice were higher than those to which humans would ever be exposed.

Previous studies have found that triclosan may have links to thyroid and fertility problems, this is the first time its effects have been tested on muscles.

Scientists had thought that the chemical — which was devised to prevent bacterial infections in hospitals — was metabolised quickly by the body without harmful effects.

However, the researchers at the University of California say it may remain active and be transported to organs, causing damage.

“Triclosan is found in virtually everyone’s home and is pervasive in the environment,” said Professor Isaac Pessah, who led the study, published in the *Proceedings of the National Academy of Sciences*.

“These findings provide strong evidence that it is of concern to both human and environmental health,”

“For someone who is healthy a 10 per cent drop in heart function may not have an effect, but if you have heart disease it could make a big difference,” Pessah said.

His team injected a group of mice with triclosan. They saw a ‘significantly reduced’ function in the heart’s left ventricle within 20 minutes.

“The effects of triclosan on cardiac function were really dramatic,” said Nipavan Chiamvimonvat, Professor of cardiovascular medicine at UC Davis and a study co-author.

<http://www.thehindu.com/health/medicine-and-research/article3771115.ece>

26. Obese Youth have higher Risk of Gallstones: Study

Aug 25, 2012

Washington: Overweight children have significantly increased risk for gallstones, a new study has claimed.

According to a study by leading American health care provider Kaiser Permanente, children and adolescents who were overweight were twice as likely to have gallstone disease, compared to children and adolescents who have a normal body mass index.

“Although gallstones are relatively common in obese adults, gallstones in children and adolescents have been historically rare,” study lead author Corinna Koebnick said.

“These findings add to an alarming trend -- youth who are obese or extremely obese are more likely to have diseases we normally think of as adult conditions,” Koebnick added.

The study was based on information in the electronic health records of more than 5,10,000 children ages 10 to 19, from 2007 through 2009, who were members of Kaiser Permanente Southern California.

The researchers found that those who were moderately obese were four times as likely to have gallstones and those who were extremely obese were six times as likely to have gallstones.

The size and diversity of this population-based study allowed researchers to explore racial and ethnic disparities. Hispanic youth were more likely to have gallstones than youth of other races and ethnicities.

Girls who were obese and extremely obese were six and eight times more likely, respectively, to have gallstones than girls who were underweight or of normal weight, while obese and severely obese boys were more than twice and three times as likely to have gallstones as their normal or underweight counterparts.

Gallstone disease is a major health problem in the United States, affecting an estimated 20 million adults.

The study found that 7.3 per cent of boys and 5.5 per cent of girls under the age of 20 years are extremely obese.

The study was published in the Journal of Paediatric Gastroenterology & Nutrition.

<http://www.financialexpress.com/news/obese-youth-have-higher-risk-of-gallstones-study/993070/>

27. Happiness Gene discovered - but it only works for Women

August 25, 2012

London: Scientists have discovered a gene that makes people happy, but it is said to work only in women.

The findings could help explain why women are often happier than men, the predominantly female team of US researchers said.

The study focused on a gene called MAOA that affects the levels of feel-good chemicals in the brain.

Almost 350 men and women were asked how happy they were and gave a saliva sample that was tested for their DNA.

The MAOA gene comes in two versions, a highly active and a less active type.

Women with the less active type were happier than others, the researchers found – and those with two copies of the “happy” type of MAOA had the sunniest dispositions of all.

Some 59 percent of the women studied had one copy and a lucky 17 percent had two – leaving only around one in four women lacking the happiness gene.

Many of the men in the study carried the gene but were no happier than others.

University of South Florida researcher Dr Henian Chen said this could be because its effects are cancelled out by testosterone – but boys may benefit.

“Maybe men are happier before adolescence because their testosterone level is lower,” the Daily Mail quoted him as saying.

The link was true even when other factors affecting wellbeing – from age to income – were taken into account.

But there was a downside – the happy version of the gene has been linked to alcoholism and anti-social behaviour.

“You may be more likely to get into trouble but still be happier than the next person,” Dr Chen said.

The findings are published in the journal *Progress in Neuro-Psychopharmacology and Biological Psychiatry*.

ANI

http://zeenews.india.com/news/health/health-news/happiness-gene-discovered-but-it-only-works-for-women_18492.html

28. New Device removes Clots from Brain

August 27, 2012

Washington: A new device that removes clots from the brain could be a game changer in the treatment of strokes, say researchers.

In a recent clinical trial, the SOLITAIRE Flow Restoration Device, approved by the US Food and Drug Administration this March, outperformed the standard treatment. SOLITAIRE is among an entirely new generation of devices designed to remove blood clots from blocked brain arteries.

It has a self-expanding, stent-like design, and once inserted into a blocked artery using a thin catheter tube, it compresses and traps the clot. The clot is then removed by withdrawing the device, reopening the blocked blood vessel, the British journal *The Lancet* reports.

"This new device is significantly changing the way we can treat ischemic stroke (caused by blockage of an artery to the brain)," said Jeffrey L. Saver, director of the University of California Los Angeles Stroke Centre and a professor of neurology at the David Geffen School of Medicine.

"We are going from our first generation of clot-removing procedures, which were only moderately good in reopening target arteries, to now having a highly effective tool," added Saver, who led the study, according to a California statement.

Results of the study showed that the device opened blocked vessels without causing symptomatic bleeding in or around the brain in 61 percent of patients.

The standard FDA-approved mechanical device, a corkscrew-type clot remover called the MERCI Retriever, was effective in 24 percent of cases. The use of SOLITAIRE also led to better survival three months after a stroke.

There was a 17.2 percent mortality rate with the new device, compared with a 38.2 percent rate with the older one.

About 87 percent of all strokes are caused by blood clots blocking a blood vessel supplying the brain.

The stroke treatment that has received the most study is an FDA-approved clot-busting drug known as tissue plasminogen activator, but this drug must be given within four-and-a-half hours of the onset of stroke symptoms, and even more quickly in older patients.

When clot-busting drugs cannot be used or are ineffective, the clot can sometimes be mechanically removed during, or beyond, the four-and-a-half-hour window.

The current study, however, did not compare mechanical clot removal to drug treatment.

IAN S

http://zeenews.india.com/news/health/health-news/new-device-removes-clots-from-brain_18507.html

29. Developed World's 'Kissing Disease' goes Viral in Capital

New Delhi: The city is literally under the weather of late and hospitals have reported a spurt in viral infections, especially the highly-infectious mononucleosis — also known as the “kissing disease” which is commonly found in the developed world.

Intermittent rains over the past fortnight have triggered a rise in cases of regular viral influenza and viral hepatitis, but doctors were surprised to witness mononucleosis — relatively uncommon in developing countries.

Mononucleosis often spreads through saliva and close contact, such as kissing, and hence the colloquial name.

Several hospitals said they detected cases of mononucleosis, caused by the Epstein-Barr virus, during laboratory tests of patients' blood and mucus samples.

“We have admitted four patients diagnosed with mononucleosis. It is considered that in developing countries, people are exposed to the virus at a young age and, hence, become immune to it. But we have discovered several cases during this season of viral outbreaks,”

Dr Rommel Tickoo, consultant of internal medicine in Max Hospital in Saket, said.

“It shares common symptoms with other viral diseases... fever, sore throat, loss of appetite, fall in platelets, fatigue and inflammation of the lymph nodes. Like other viral infections, it is self-limiting and symptomatic treatment cures a patient,” he said.

Dr Tickoo said at least two patients developed meningitis or brain fever — a complication of routine viral infections.

Doctors in Apollo Hospital said there have been suspected cases, but none of their patients have confirmed mononucleosis. “We have tested blood samples and fluid from lymph nodes of suspected patients. But no case has been confirmed. Since cases of viral diseases rise during the monsoon, it is not uncommon,” Dr S Chatterjee of Apollo Hospital said.

In Sir Ganga Ram Hospital, doctors said about five cases of mononucleosis have been confirmed. “Mononucleosis is not entirely linked to rain.

But seasonal changes do trigger a spurt in viral diseases,” Dr Atul Gogia said.

“In most people, the virus may be present in a mild form or may even be asymptomatic. Thus, it can go undetected unless proper screening tests are done,” he said.

Other monsoon-related diseases such as dengue and malaria have been less virulent this year. “The numbers are down. Unlike the usual complications expected from falciparum malaria, the vivax form has lost its mild strains and shows several complications,” Dr Gogia said.

The most common affliction this year has been viral fever — with flu-like symptoms, respiratory tract infections and dry cough.

“We have been getting a lot of cases of bronchial infections. Asthmatic people are the worst sufferers because lungs are the first to get affected by these viral strains,” Dr Tickoo said.

These apart, hospitals have also reported eye infections, especially conjunctivitis, and viral gastrointestinal diseases such as typhoid and hepatitis A and E. The last two are intrinsically linked to water and food.

<http://www.financialexpress.com/news/developed-worlds-kissing-disease-goes-viral-in-capital/993503/>

30. Simple Keyhole Surgery can halve Heart Attack Risk

ANI | Aug 27, 2012

Doctors have said that a one-hour operation that could halve the risk of heart attacks in patients with high blood pressure could be available from next year.

In trials patients undergoing the keyhole procedure saw their blood pressure drop by a fifth within six months — enough to halve the risk of a heart attack or stroke.

A follow-up after 18-months showed no reversal of the condition. The trials proved so successful that some clinics have already made it available privately, and researchers expect the treatment to be made available to tens of thousands of British patients on the NHS.

The procedure severed the nerves, which connect the kidneys to the brain and carry signals to control blood pressure.

Doctors say the operation, which costs just 6,000 pounds, could offer a lasting solution for tens of thousands of British patients whose high blood pressure cannot be controlled by conventional drugs. Although people who undergo the procedure still have to take medication to keep their condition in check, it brings about a drop in blood pressure, which drugs alone have failed to provide.

Further trials will establish whether the technique, known as renal denervation, could also help patients whose bodies will not tolerate conventional blood pressure drugs.

In a study, which involved more than 100 patients across 11 countries, researchers found that the 20 per cent reduction in patients' blood pressure was still maintained a year and a half after the procedure, with no major side effects reported.

"We are encouraged to see that renal denervation shows substantial and sustained blood pressure reduction in treatment resistant patients," the Telegraph quoted Dr Murray Esler of Saarland University Hospital in Germany as saying.

"We know the renal nerves play a crucial role in blood pressure elevation and this study shows those nerves can be targeted with renal denervation without major side effects," Dr Esler added.

The new procedure, first trialled at Barts and the London NHS trust in 2009, involves severing malfunctioning nerves around the kidneys.

The nerves send signals to the brain that tell it that blood pressure is too low, causing the brain to increase it to dangerously high levels.

Doctors correct the fault by threading a wire through the renal artery until it reaches the kidneys, where it lets off a burst of heat to burn the nerves and disable them.

Although the operation is moderately painful, it does not require a general anaesthetic and patients can generally leave hospital on the same day.

Charities have so far funded a small number of procedures for patients in severe need, but doctors involved in the trial said they will lobby NHS commissioning boards to make it available to a limited number of treatment-resistant patients next year.

Findings from the study were presented at the European Society of Cardiology congress in Munich.

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/Simple-keyhole-surgery-can-halve-heart-attack-risk/articleshow/15816677.cms>

31. What is a Stroke? What Causes a Stroke?

17 Aug 2009

Stroke

A stroke is a condition where a blood clot or ruptured artery or blood vessel interrupts blood flow to an area of the brain.

A **stroke** is a condition where a blood clot or ruptured artery or blood vessel interrupts blood flow to an area of the brain. A lack of oxygen and glucose (sugar) flowing to the brain leads to the death of brain cells and brain damage, often resulting in impairment in speech, movement, and memory.

The two main types of stroke include **ischemic stroke** and **hemorrhagic stroke**. Ischemic stroke accounts for about 75% of all strokes and occurs when a blood clot, or thrombus, forms that blocks blood flow to part of the brain. If a blood clot forms somewhere in the body and breaks off to become free-floating, it is called an embolus. This wandering clot may be carried through the bloodstream to the brain where it can cause ischemic stroke. A hemorrhagic stroke occurs when a blood vessel on the brain's surface ruptures and fills the space between the brain and skull with blood (subarachnoid hemorrhage) or when a defective artery in the brain bursts and fills the surrounding tissue with blood (cerebral hemorrhage). Both result in a lack of blood flow to the brain and a buildup of blood that puts too much pressure on the brain.

The outcome after a stroke depends on where the stroke occurs and how much of the brain is affected. Smaller strokes may result in minor problems, such as weakness in an arm or leg. Larger strokes may lead to paralysis or death. Many stroke patients are left with weakness on one side of the body, difficulty speaking, [incontinence](#), and bladder problems.

Who gets stroke?

Anyone can suffer from stroke. Although many risk factors for stroke are out of our control, several can be kept in line through proper [nutrition](#) and medical care. Risk factors for stroke include the following:

- Over age 55
- Male
- African American, Hispanic or Asian/Pacific Islander
- A family history of stroke
- [High blood pressure](#)
- High [cholesterol](#)
- Smoking cigarettes
- [Diabetes](#)
- [Obesity](#) and overweight
- Cardiovascular disease
- A previous stroke or [transient ischemic attack](#) (TIA)
- High levels of homocysteine (an amino acid in blood)
- [Birth control](#) use or other hormone therapy
- Cocaine use
- Heavy use of alcohol

What causes stroke?

Ischemic strokes are ultimately caused by a thrombus or embolus that blocks blood flow to the brain. Blood clots (thrombus clots) usually occur in areas of the arteries that have been damaged by [atherosclerosis](#) from a buildup of plaques. Embolus type blood clots are often caused by [atrial fibrillation](#) - an irregular pattern of heart beat that leads to blood clot formation and poor blood flow.

Hemorrhage strokes can be caused by uncontrolled high blood pressure, a head injury, or [aneurysms](#).

High blood pressure is the most common cause of cerebral hemorrhage, as it causes small arteries inside the brain to burst. This deprives brain cells of blood and dangerously increases pressure on the brain.

Aneurysms - abnormal blood-filled pouches that balloon out from weak spots in the wall of an artery - are the most common cause of subarachnoid hemorrhage. If an aneurysm ruptures, blood spills into the space between the surfaces of the brain and skull, and blood vessels in the brain may spasm. Aneurysms are often caused or made worse by high blood pressure.

[A study found](#) that a Single Gene Defect Can Lead To Stroke and Deadly Diseases of the Aorta and Coronary Arteries.

A less common form of hemorrhage stroke is when an arteriovenous malformation (AVM) ruptures. AVM is an abnormal tangle of thin-walled blood vessels that is present at birth.

[A study found](#) that [migraines](#) increase stroke risk during pregnancy.

What are the symptoms of stroke?

Within a few minutes of having a stroke, brain cells begin to die and symptoms can become present. It is important to recognize symptoms, as prompt treatment is crucial to recovery. Common symptoms include:

- Dizziness, trouble walking, loss of balance and coordination
- Speech problems
- Numbness, weakness, or paralysis on one side of the body
- Blurred, blackened, or [double vision](#)
- Sudden severe [headache](#)

Smaller strokes (or silent strokes), however, may not cause any symptoms, but can still damage brain tissue.

A possible sign that a stroke is about to occur is called a transient ischemic attack (TIA) - a temporary interruption in blood flow to part of the brain. Symptoms of TIA are similar to stroke but last for a shorter time period and do not leave noticeable permanent damage.

[A study found](#) that women are more likely to experience non-traditional stroke symptoms.

How is stroke diagnosed?

A stroke is a medical emergency, and anyone suspected of having a stroke should be taken to a hospital immediately so that tests can be run and the correct treatment can be provided as quickly as possible.

Physicians have several tools available to screen for stroke risk and diagnose an active stroke. These include:

- Physical assessment - blood pressure tests and blood tests to see cholesterol levels, blood sugar levels, and amino acid levels
- [Ultrasound](#) - a wand waved over the carotid arteries in the neck can provide a picture that indicates any narrowing or clotting
- Arteriography - a catheter is inserted into the arteries to inject a dye that can be picked up by X-rays
- Computerized tomography (CT) scan - a scanning device that creates a 3-D image that can show aneurysms, bleeding, or abnormal vessels within the brain

- Magnetic resonance imaging (MRI) - a magnetic field generates a 3-D view of the brain to see tissue damaged by stroke
- CT and MRI with angiography - scans that are aided by a dye that is injected into the blood vessels in order to provide clearer and more detailed images
- Echocardiography - an ultrasound that makes images of the heart to check for embolus

How is stroke treated?

The primary goal in treating ischemic stroke is to restore blood flow to the brain. This will be attempted using blood clot-busting drugs such as [aspirin](#), heparin, or tissue plasminogen activators that must be administered within three hours of the stroke. In addition, surgical procedures may be performed that can open up or widen arteries. These include carotid endarterectomy (removal of plaque and widening of the carotid artery) and angioplasty (a balloon that widens the carotid artery and is held open with a metallic mesh tube called a stent).

[A study found](#) that cholesterol lowering drugs can prevent stroke recurrence.

Hemorrhagic stroke is treated differently than ischemic stroke. Surgical methods used to treat this stroke variant include aneurysm clipping, aneurysm embolisation, and arteriovenous malformation (AVM) removal. Aneurysm clipping consists of a small clamp placed at the base of the aneurysm that isolates it from the circulation of its attached artery and keeps the aneurysm from bursting or re-bleeding. Aneurysm embolisation (coiling) uses a catheter inserted into the aneurysm to deposit a tiny coil that fills the aneurysm, causing clotting and sealing off the aneurysm from arteries. AVM removal is a surgical procedure to remove usually smaller AVMs or AMVs that are in more accessible portions of the brain in order to eliminate the risk of rupture.

US researchers found that patients who had experienced strokes as long as six months earlier were able to regain brain function through the help of a [novel robotic device that they squeezed with their hand](#).

Most stroke victims will require rehabilitation after the event. A person's condition is generally dependent on the area of the brain and the amount of tissue that was damaged. It is common for the rehabilitation process to include speech therapy, occupational therapy, [physical therapy](#), and family education.

[A study carried out by researchers at the University of Illinois, Chicago](#) found that Tai Chi helped stroke victims regain balance.

[A new study has found](#) that the short window of time to treat stroke patients can be expanded.

[A stroke patient was intravenously injected with his own bone marrow stem cells](#) as part of a research trial at The University of Texas Medical School at Houston.

How can stroke be prevented?

One way to prevent a stroke is to notice a **transient ischemic attack (TIA)** - or **mini stroke** - that provides symptoms similar to stroke. Knowing the symptoms of stroke can lead to earlier treatment and better recovery.

Much of stroke prevention is based on living a healthy lifestyle. This includes:

- Knowing and controlling blood pressure
- Finding out if you have atrial fibrillation
- Not smoking
- Lowering cholesterol, sodium, and fat intake

- Following a healthy diet
- Drinking alcohol only in moderation
- Treating diabetes properly
- Exercising regularly. Moderate aerobic fitness can reduce stroke risk, [a study found](#).
- Managing [stress](#)
- Not using drugs
- [A study found that](#) drinking three cups of tea per day reduces the risk of stroke
- Taking preventive medications such as anti-platelet and anticoagulant drugs to prevent blood clots
- [Cholesterol lowering drugs can prevent stroke recurrence](#)

Written by Peter Crosta M.A.

<http://www.medicalnewstoday.com/articles/7624.php>

32. High Blood Pressure: What is High Blood Pressure?

The writer has posted comments on this article Trina Remedios, Health Me Up | Aug 4, 2012

Stress, erratic meals, over-consumption of 'outside food,' and unhealthy social commitments can all contribute to high blood pressure.

While, globally, the number of high blood pressure (HBP) cases has fallen, in India this number is on a steady incline. A recent study revealed that, till the end of 2008, 139 million Indians suffered from HBP. Did you know this staggering number is also susceptible to stroke, heart and kidney failure? To help you understand this condition better, we collate some interesting facts about high blood pressure and its prevention.

What is high blood pressure?

Are you tired, dizzy and often faint? Those are a few signs that are linked to HBP. But it is not the case with everyone; HBP is not easily diagnosed only through a check up.

Scientifically HBP is defined as follows: "Hypertension (HTN) or high blood pressure, sometimes called arterial hypertension, is a chronic medical condition in which the blood pressure in the arteries is elevated. This requires the heart to work harder than normal to circulate blood through the blood vessels."

What is the normal blood pressure range?

There are two parts in monitoring and measuring your blood pressure:

Systolic: The blood pressure while your heart is beating.

Diastolic: The blood pressure when your heart is at rest.

On the blood pressure monitor, systolic is written on top and diastolic below it. But what is the average normal blood pressure? Systolic should be below 120 and diastolic should be below 80.

High blood pressure and serious health problems:

Hypertension is only a precursor to other major and deadly health problems. A slight increase in blood pressure may potentially shorten your life. Most of us may not be aware but HBP shouldn't be taken lightly. It can catapult into larger health issues like kidney failure, stroke, heart failure and heart attacks.

We take a closer look at these health problems and how high blood pressure is linked to them.

High blood pressure and kidney problems

The function of the kidney is to filter and separate the good and the bad. Your kidney also has arteries. When blood is pumped uncontrollably through these arteries for a long period of time, these arteries weaken and harden. Hence, they cannot provide sufficient blood to the kidney, damaging the kidney.

An interesting fact: Kidney produces a hormone that regulates blood pressure, this process fails when the kidney is damaged.

High blood pressure and stroke

You suffer a stroke when your arteries are clogged (ischemic strokes) or they burst (hemorrhagic strokes). Clogged arteries will reduce oxygen supply in the body causing a stroke which in turn causes paralysis, speech impairment and affects vision and memory. If you have HBP it will weaken your arteries; you may suffer a brain stroke if the arteries are weak in the brain.

Interesting fact: Ischemic strokes account for 87 percent of all stroke cases.

High blood pressure and heart failure

When blood is pumped in more than regulated amounts, your arteries face the brunt of this lifestyle disease. That's not all; your heart also works harder, which causes the blood to thicken and reduces the flow of blood in the body.

Some of the symptoms of high blood pressure and heart failure: A sense of tiredness, fatigue, breathlessness, swollen ankles, feet and legs. Immediate treatment is necessary.

High blood pressure and heart attack

HBP is closely related to atherosclerosis, a coronary heart disease. The artery walls are blocked and harden with fatty substances making it difficult for the blood to flow. When you have HBP, the arteries face a lot more pressure when the blood is pumped. This makes the arteries weak resulting in lack of oxygen supply to the brain and the rest of the body, over time. Hence HBP could increase your chances of suffering from a heart attack.

How to prevent high blood pressure or hypertension

Hypertension is a controllable disease. You can avert and prevent HBP and hypertension if you incorporate a healthy diet along with exercise and medication.

Population-wide decrease in Blood Pressure can prevent 1,51,000 stroke and 1,53,000 coronary heart disease deaths in India each year.

95% of patients with high blood pressure have 'Primary Hypertension' that is - hypertension without any obvious medical cause. Many contributing factors may be present in these patients like obesity, alcohol or tobacco intake, high salt intake, low potassium or calcium intake, psychosocial stress, sedentary lifestyle, socioeconomic status or genetic factors.

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/High-blood-pressure-What-is-high-blood-pressure/articleshow/15160164.cms>

33. New Treatment can permanently cure High Blood Pressure

Posted: Aug 27, 2012

London: Scientists have developed a radical therapy that could provide a permanent cure for high blood pressure by zapping the kidneys with radio waves.

The breakthrough by researchers from Baker IDI Heart and Diabetes Institute of Melbourne, Australia could bring hope to thousands of patients who do not respond to drugs.

The procedure known as renal denervation may be available on UK's National Health Service as early as next year after trials showed it produced dramatic improvements in the condition, the Daily Mail reported.

High blood pressure is a risk factor in heart disease, stroke, and kidney failure.

Changes in lifestyle, such as cutting back on salt and alcohol and exercising, can control blood pressure and there are a number of drug treatments available.

Many who are on medication, as many as five different types, still have difficulty with it. It is this group who can be helped.

The technique uses a burst of radiofrequency energy delivered through a catheter to knock out a number of tiny nerves that run in the lining of the arteries of the kidney.

High blood pressure is sometimes caused by faulty signals from the brain to these nerves.

Latest findings from a trial showed reductions in blood pressure persist for at least 18 months after treatment.

A high blood pressure reading is one that exceeds 140/90 millimetres of mercury.

The latest trial involved more than 100 patients who had blood pressure readings of at least 178/97, despite taking three or more different drugs.

After 18 months, those having the procedure maintained a reduction of between 28/11 to 32/12.

"We are encouraged to see renal denervation shows substantial and sustained reduction in treatment-resistant patients," Dr Murray Esler from the institute was quoted as saying by the paper.

Although blood pressure does not sink to normal levels after treatment, it cuts the health risks of very high pressure.

The findings were presented at the European Cardiology Congress in Munich.

<http://www.financialexpress.com/news/new-treatment-can-permanently-cure-high-blood-pressure/993740/2>

34. Why Today's Kids don't get Good Night's Sleep

ANI - Aug 27, 2012

Too many fizzy drinks and not enough bedtime stories are reasons why younger generation does not sleep as well as their grandparents, according to a new study.

Research by the Sleep Council found that today's seven to 14-year-old children go to bed almost 40 minutes later than their grandparents.

They are also much more likely to snack on crisps and fizzy drinks before bedtime while their grandparents enjoyed cocoa or hot milky drinks such as Horlicks.

Around 54 per cent of the older generation either had a story read to them or had a quiet time to read independently - whereas only 27 per cent of today's youngsters read before bedtime and 58 per cent watch television.

If parents ditched the bad habits, bedtime would be less stressful and their offspring would sleep better, experts claimed.

According to the survey - which asked 1,006 grandparents with grandchildren aged seven to 14, to compare their early lifestyle with that of their grandchildren - 21 per cent spent more than three hours each day playing outside.

That compares to the 28 per cent who said their grandchildren now spend less than 30 minutes playing outside on a school day.

Seventy per cent of grandparents ate dinner before 6pm but only 38 per cent of youngsters do so now. Just over half, 51 per cent, eat between 6pm and 7.30pm.

For 95 per cent of the older generation, the evening meal was home cooked but now a quarter of children eat ready-made meals.

"Seven to 14-year-olds still need a good nine or 10 hours sleep a night," the *Daily Express* quoted Jessica Alexander, of The Sleep Council, as saying.

"Not eating too close to bedtime and avoiding caffeine-fuelled fizzy pop is also important, as is a well balanced diet with plenty of fresh fruit and vegetables," she suggested.

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/Why-todays-kids-dont-get-good-nights-sleep/articleshow/15829818.cms>

35. Infants given Anaesthesia may face Learning Difficulties

Aug 29, 2012

Children who are given anaesthetic before the age of three are at a higher risk of developing learning difficulties, according to a new study.

Researchers led by the University of Western Australia found that children exposed to anaesthesia before the age of three were twice as likely to develop language impairment and three times more likely to have problems with abstract reasoning in childhood.

The study analysed long-term effects of anaesthesia on young children - using the Western Australian Pregnancy Cohort (Raine) Study, which is studying 2868 children born in Western Australia between 1989 and 1992.

"We looked at 321 children from the Raine study who were exposed to anaesthesia for surgery and diagnostic testing before the age of three and found they were about twice as likely to develop a significant language impairment and three times more likely to have problems with abstract reasoning by the age of 10, when compared to children who were not exposed to anaesthesia and surgery," Professor Regli-von

Ungern-Sternberg from the university said.

"But the study does not allow us to determine if the cause of these increased impairments were due to anaesthesia, surgery or the medical condition that required the intervention," she added.

"Parents should consult their surgeon to see if the procedure is necessary. Any concerns regarding anaesthesia and potential anaesthetic implications for their child should be discussed with their anaesthetist before surgery," she said in a statement.

The study was published in the US journal Paediatrics.

<http://www.indianexpress.com/news/infants-given-anaesthesia-may-face-learning-difficulties/994895/>

36. Almond Oil helps Fight Obesity, Diabetes

ANI | Aug 30, 2012

Researchers, including one of Indian origin, have found that a future weapon in the battle against obesity and diabetes could come in the form of oil derived from the seeds of wild almond trees.

According to researchers at Missouri University of Science and Technology, the key to the oil's potential lies in its ability to affect certain microorganisms living in our bellies.

In the study, the researchers reported that adding sterculic oil to the diets of obese laboratory mice increased their sensitivity to insulin. This was due to the oil's effect on three types of microorganisms that live in the guts of the mice.

As a result, the researchers saw a "statistically significant improvement in glucose tolerance and insulin sensitivity in the obese mice," Shreya Ghosh, a Ph.D. student in environmental engineering at Missouri S and T, said.

The sterculic oil had no adverse affects on lean mice fed the same diet.

Sterculic oil is extracted from the seeds of the wild almond tree known as *Sterculia foetida*.

The research by Ghosh and her advisor, Dr. Daniel Oerther, builds upon previous studies conducted at the University of Missouri-Columbia. In those studies, sterculic oil was found to suppress the bodily enzyme Stearoyl-CoA Desaturase 1 (SCD1).

SCD1 is associated with insulin resistance, a condition that can lead to diabetes and obesity.

Other studies have shown that obese mice deficient in the hormone leptin have a different composition of "gut microbiota" than lean mice do.

Leptin helps regulate metabolism, and a deficiency of the hormone can contribute to obesity, says Oerther, the John and Susan Mathes Chair of Environmental Engineering at Missouri S and T.

In the Missouri S and T study, a diet supplemented by sterculic oil also correlated with lower levels of three types of gut microbiota - Actinobacteria, Bacilli and Erysipelotrichia - in the obese mice.

It isn't clear, however, whether the lower levels of that microbiota led to the improvement of glucose tolerance and insulin sensitivity among the obese mice, Oerther says.

To perform her experiments, Ghosh studied 28 male mice - 14 of them obese and 14 normal, and each of them five weeks old at the beginning of the study.

She separated the mice into four groups and for nine weeks, fed a standard diet to one group of obese mice and one group of non-obese mice.

Over the same period, she fed the same diet, supplemented with 0.5 per cent of sterculic oil, to one group of obese mice and one group of non-obese mice. Ghosh recorded the weights, food consumption and glucose levels of the mice during the nine-week period.

After the nine weeks, researchers conducted a DNA analysis of the gut microbiota at King Abdullah Institute of Science and Technology in Saudi Arabia.

The results confirmed correlations between the diet, improved glucose tolerance and groups of microbes. Even though the mice fed a diet with sterculic oil did not experience weight loss, both Ghosh and Oerther believe their findings could lead to new insights into controlling diabetes and weight gain.

The study was presented at the American Society for Microbiology's general meeting in San Francisco.

<http://timesofindia.indiatimes.com/life-style/health-fitness/diet/Almond-oil-helps-fight-obesity-diabetes/articleshow/14386172.cms>

37. Ten Years to achieve Universal Health Coverage

Sep 3, 2012

According to consulting firm Ernst and Young (E and Y) the government of India needs to spend at least 4% of its GDP on basic healthcare requirement if it wants its universal health coverage programme to work. Right now the government spends only 1% on healthcare services, which forces an estimated 39 million people into poverty.

According to the report, 80% urban households and 90% rural ones spend half their annual household expenditure on healthcare facilities resulting in financial hardships. The E and Y study was produced in collaboration with the Federation of Indian Chambers of Commerce and Industry (FICCI).

The scale of healthcare spending of country is a measure of its progress and lack of public healthcare services is one of the reasons for widespread poverty even while the masses struggle or fail to access quality care.

Healthcare spends forces 3% below poverty line annually

“It is estimated that 3% of India’s population slips below poverty line each year because of health-related expenses,” the report said, referring to a study that Ernst and Young had conducted in 2008.

“Drawing a framework for implementation and financing requirements for universal health coverage for the country, where the government guarantees equitable access to key preventive, curative and rehabilitative healthcare at affordable costs for all its citizens, was the mandate before us for the study,” Muralidharan M. Nair, a partner Ernst and Young Pvt. Ltd, and a member of the UHC project, said on Friday.

Implementing universal health coverage will increase the total expenditure to 4% and given the scale of implementation and infrastructure constraints it might take up to 10 years to achieve the healthcare-for-all goal.

It’s estimated that 3.7% to 4.5% of GDP by 2022 would be required to implement the UHC programme. This will contain out-patient services like consultation, drugs, diagnostic tests and also in-patient services currently covered under schemes like Rashtriya Swasthya Bima Yojana (RSBY) and Aarogyashree, which together covers 95% of the country’s most common ailments.

Govt. to play Financier

“This programme envisages the framework of tight central-state coordination and the central government will be the key financier. The funding resource will be direct taxes, which is contributed by the central and state governments,” Nair said. The cost structure of the programme is based on the healthcare rates that are arrived by analysing the most reasonable costs on which the best quality care can be provided factoring almost all medical interventions and preventive care, which is still lower than the prevailing market rates, he said.

“Currently, the bigger problem faced by the government is the absence of a comprehensive implementation framework as far as the healthcare programmes are concerned and not the funding,” said a senior health ministry official, who didn’t want to be identified.

The UHC programme looks to abolish healthcare inequality, particularly between the rural and urban areas. Due to lack of a central policy healthcare evolved as a private service which are mostly available in major urban hubs. The World Health Assembly had in 2005 urged all its member countries to work towards such a programme after considering the particular macro-economic, socio-cultural and political context of each country.

Remarkably, China the only country which faces similar healthcare issues due to its huge population has in the last couple of years managed to cover 84% of its population and currently spends over 5% of its GDP on healthcare services.

<http://health.india.com/news/ten-years-to-achieve-universal-health-coverage/>

38. Now, Once a Day Anti-clot Tablet to treat Diabetes

September 05, 2012

London: A once-a-day drug that could revolutionise treatment for patients with Type 2 diabetes has been discovered by scientists.

The tablet can dramatically slash the chances of sufferers developing heart disease, one of the main fatal effects of diabetes.

It could even replace aspirin as the blood-thinning drug of choice for diabetics, the `Daily Express` reported.

Researchers at the University of the Highlands and Islands say the clot-busting drug is currently licensed for use in reversing the harmful effects of a paracetamol overdose.

Heart disease is the major cause of reduced life expectancy in patients with diabetes who have about twice the risk of developing a range of cardiovascular diseases.

The discovery found that a daily treatment of patients with the drug, which is called N-acetylcysteine, reduces clot formation in the blood and is more effective than aspirin.

The study is published in the journal `Diabetologia`.

PTI

http://zeenews.india.com/news/health/diseases/now-once-a-day-anti-clot-tablet-to-treat-diabetes_18677.html

39. Chemotherapy could impair Speech in Breast Cancer Patients

PTI

Washington, September 9, 2012

Breast cancer patients who undertake chemotherapy are at risk of mild cognitive deficits like speech impairment after the treatment, researchers say.

Scientists at Moffitt Cancer Centre found that the study participants on average had mild impairments in verbal abilities such as difficulty choosing words and visuospatial abilities like getting lost more easily.

The study noted that cognitive functioning varies across survivors, with some reporting no impairments and others reporting more severe or pervasive deficits.

“The objective of our analysis was to clarify existing research on cognitive functioning in patients who had received standard dose chemotherapy for breast cancer at least six months previously,” said study lead author Heather S L Jim.

“Earlier studies had reported conflicting evidence on the severity of cognitive deficits, especially over the long term,” Jim said in a statement.

Although this is an active area of research, an overall analysis of the studies had not been performed since 2006, explained the researchers.

“Our analysis indicated that patients previously treated with chemotherapy performed significantly worse on tests of verbal ability than individuals without cancer,” said co-author Paul B Jacobsen.

“In addition, patients treated with chemotherapy performed significantly worse on tests of visuospatial ability than patients who had not had chemotherapy,” he said.

Jim suggested that breast cancer patients treated with chemotherapy who have subsequent cognitive deficits should be referred to a neuropsychologist for evaluation and management of the deficits.

“Management usually involves developing an awareness of the situations in which their cognitive difficulties are likely to arise so that they can come up with strategies to compensate. Research shows that such strategies can make a big difference in daily life when cognitive difficulties do arise,” he added.

The study was published in the Journal ‘Clinical Oncology’

<http://www.thehindu.com/health/medicine-and-research/article3877422.ece>

40. Vitamin A Intake could cure Cancer: Study

PTI

London, September 9, 2012

Intake of vitamin A in diet could help treat several forms of cancer due to its ability to control the malignant cells, a new study has found.

Scientists have hailed the discovery as a “new dawn” in cancer treatment after finding a link between malignant cells and lack of vitamin A.

Experts at the University of York found that cancer cells are under control of a derivative of the vitamin, known as retinoic acid, the ‘Daily Express’ reported.

They believe that vitamin A can be used as new anti-cancer treatment and advised people to ensure they include adequate levels of the nutrient in their diets.

The study was carried out on prostate cancer cells but Professor Norman Maitland of Yorkshire Cancer Research believes the treatment could apply to other cancers as well.

“This may apply to a number of other cancers,” said Maitland.

Maitland, however, warned people not to rush out to buy vitamin A supplements, which could be toxic and even cancerous in high doses.

Instead he advised people to take vitamin A in their daily diet, including oily fish, carrots, liver, red pepper and dark leafy vegetables.

“We hope vitamin A will be used to prevent prostate cancer and we also believe that a derivative of vitamin A could help destroy prostate cancer cells or make them more treatable once they have started to spread. Clinical trials based on this research could herald a new dawn in treatment for prostate cancer patients,” he said.

He said that retinoic acid is already used to treat a blood cancer and has been extremely successful in improving survival rates to 80 per cent.

“It has been known for years that low vitamin A in samples of blood is associated with prostate cancer, but nobody knew the mechanisms involved. We have for the first time revealed a biological link,” Maitland said.

The study is published in the journal ‘Nucleic Acids’

<http://www.thehindu.com/health/medicine-and-research/article3877427.ece?homepage=true>

41. Half of Women may have Sleep Apnoea: Study

September 09, 2012

London: Nearly half of women may have mild-to-severe sleep apnoea, according to a new Swedish study.

As many as 50 per cent of 400 adult women who were given overnight sleep tests turned out to have the sleep disorder characterised by abnormal pauses in breathing or instances of abnormally low breathing, during sleep.

Scientists monitored sleep patterns of the women overnight and found that half experienced at least five episodes an hour when they stopped breathing for longer than 10 seconds - the minimum definition of sleep apnoea.

Among women with hypertension or who were obese, the numbers were even higher, reaching 80 to 84 per cent of women.

Many of the women in the study represented mild cases of sleep apnoea.

"How important is the mild sleep apnoea, we don't know," said Dr Karl Franklin, the lead author of the study and a professor at Umea University in Sweden.

Terry Young, professor in the School of Medicine and Public Health at the University of Wisconsin, said mild sleep apnoea is important to pay attention to.

"We see that it doesn't go away and it gets worse," she said.

One recent study also found that women who have sleep apnoea are more likely to develop memory problems and dementia.

Researchers selected 400 women between the ages of 20 and 70 from a larger population sample of 10,000, and asked them to sleep overnight at home with sensors attached to their bodies.

The study found that apnoea became more common in the older age groups and among women aged 20-44, one quarter had the disorder, compared to 56 per cent of women aged 45-54 and 75 per cent of women aged 55-70.

Severe sleep apnoea, which involves more than 30 breathing disruptions per hour, was far less common. Just 4.6 per cent of women 45-54 and 14 per cent of women 55-70 had severe cases.

Among women of all ages with hypertension, 14 per cent had severe sleep apnoea, and among women who were obese, 19 per cent had severe apnoea.

PTI

http://zeenews.india.com/news/health/diseases/half-of-women-may-have-sleep-apnoea-study_18733.html

42. Blood Pressure Pills could cause Appendicitis

Last Updated: Sunday, September 09, 2012

London: Intake of blood pressure pills could increase the risk of potentially deadly appendicitis by up to 63 percent, a new study has found.

Types of blood pressure pill like ACE inhibitors and ARBs raised the risk considerably in millions of people.

The two types can cause swelling in the bowel which inflames the appendix a vestigial finger-like pouch connected to the large intestine, `The Sun` reported.

When this occurs, it must be removed within hours or a deadly infection can set in. Around 300,000 men and women were studied at the Beth Deaconess Hospital, Boston, US.

Researchers discovered ACEs and ARBs appeared to increase the chance of appendix trouble by 36 to 63 per cent. Generic drug names for ACEs include ramipril, lisinopril and perindopril. ARBs include telmisartan, losartan and candesartan, the paper reported.

None of the other blood pressure tablets, like beta-blockers or calcium-channel blockers, had the same effect.

The National Health Service (NHS) in UK issues more than 50 million prescriptions for the pills each year. The drugs work by keeping the arteries open, boosting blood flow.

"It's vital people continue to take their medication and discuss their individual risk, if any, with their doctor," the British Heart Foundation said.

PTI

http://zeenews.india.com/news/health/diseases/blood-pressure-pills-could-cause-appendicitis_18736.html

43. Now, a Technique to regularise Abnormal Heartbeats

September 09, 2012

Washington: Scientists have now discovered a technique to regularise abnormal heartbeats.

A new freezing technology, called cryoablation, has shown promising results in normalising heartbeats after being tried out at Baylor Jack and Jane Hamilton Heart and Vascular Hospital.

Some 2.5 million Americans alone suffer from abnormal heartbeats or atrial fibrillation, which causes deadly strokes.

"It appears the major complication rate is lower with cryoablation, and patients seem to tolerate it better," said Manish Assar, cardiac electrophysiologist at the Baylor Hospital who conducted the procedure.

Currently, one of the several methods to regularise heartbeats is catheter ablation, a minimally invasive surgical option, which uses heat technology to treat the problem at the source, according to a Baylor statement.

A catheter is a long, thin, plastic-coated wire with several metal contacts on it - is guided into the heart after the physician has determined the type of arrhythmia (abnormal heart rate and rhythm).

Its most common side effects are those encountered with any IV insertion, including bleeding at the site when the catheter is removed, infection, blood clot formation within the vessel, and bleeding under the skin with formation of a hematoma (collection of blood).

Irregular beats involving the heart often obscure the threat to the brain. Their symptoms are shortness of breath, fatigue, chest pain, and dizziness or light-headedness. Irregular beats could be instrumental in the formation of blood clots in the heart, which break off and travel to the brain, blocking major vessels, resulting in a stroke.

"Atrial fibrillation is responsible for 15 to 20 percent of strokes," said Assar.

"The strokes that are a result of atrial fibrillation are large and have higher mortality than other strokes and higher rates of serious disability than other strokes."

"One of the biggest misconceptions about atrial fibrillation that I hear from patients is that if they can't feel it, they don't have it," said Assar.

"But the diagnosis is made through an EKG (ECG), and if the EKG says they have atrial fibrillation, they have it."

While many patients exhibit no symptoms that was not the case for Doug Gerber.

"Over time my heartbeat had become irregular. It would race to over 150 or slow down to under 50," he explained.

"It would pound so hard that I could see it beating through my shirt."

After attempting to control his erratic beats through medication, Gerber sought a more permanent solution, which he received at Baylor.

"My electrophysiologist understood exactly what was happening and recommended cryoablation," he said. Since the procedure, Gerber and his family have been able to look to the future without worrying about his heart.

Atrial fibrillation can strike at any age, but it is most prevalent in the elderly. No matter how old a patient is or whether or not they exhibit any symptoms, atrial fibrillation can lead to other serious health problems.

IANS

http://zeenews.india.com/news/health/diseases/now-a-technique-to-regularise-abnormal-heartbeats_18729.html

44. Proteins` Absence causes Diabetes, Rheumatoid Arthritis

September 10, 2012

Sydney: The absence of related protein molecules, Puma and Bin, prompts immune cells to turn against human organs they are meant to protect and cause type-1 diabetes and reumatoid arthiritis, known as autoimmune diseases.

Daniel Gray and colleagues from the Walter and Eliza Hall Institute`s Molecular Genetics of Cancer division and the University of Ballarat, have discovered that these pair of protein molecules work together to kill so-called `self-reactive` immune cells that are programmed to attack the body`s own organs.

Autoimmune diseases, such as type-1 diabetes, rheumatoid arthritis, inflammatory bowel disease and multiple sclerosis, develop when immune cells launch an attack on the body`s own cells, destroying important body organs or structures, the journal "Immunity" reports.

Puma and Bim are so-called `BH3-only` proteins that make cells die by a process called apoptosis or self death. Defects in apoptosis proteins have been linked to many human diseases, including cancer and neurodegenerative disorders, according to an Eliza Hall statement.

Gray said one way the body protects itself against autoimmune disease is by forcing most self-reactive immune cells to die during their development. "If any self-reactive cells manage to reach maturity, the body normally has a second safeguard of switching these potentially dangerous cells into an inactive state, preventing them from causing autoimmune disease," he said.

Gray is now collaborating with researchers who have identified human gene defects linked to the development of autoimmune conditions.

"We now know that self-reactive cell death is an important protection against autoimmunity," Gray said. "The next stage of our work is to discover whether defects in the cell death process cooperate with other factors to cause human autoimmune disease."

IANS

http://zeenews.india.com/news/health/diseases/proteins-absence-causes-diabetes-rheumatoid-arthritis_18738.html

45. Pill to `Block` Arthritis comes closer to Reality

September 10, 2012

London: Scientists have come closer to developing a potent pain-busting pill that could revolutionise treatment for arthritis with the discovery of a “master molecule” that acts as a messenger, helping fuel cells at the site of inflammation.

The protein GM-CSF is unique to arthritis and plays a role in the defective immune system response that leads to the disorder.

Now, experts believe that blocking the action of the vital protein could lead to a new treatment for the painful inflammatory disease.

Professor John Hamilton who led the research at the University of Melbourne in Australia, said that not only can blocking GM-CSF, which is also known as Leukine, suppress the actual disease, it can also reduce pain in sufferers.

ANI

http://zeenews.india.com/news/health/diseases/pill-to-block-arthritis-comes-closer-to-reality_18737.html

46. Avoid Early Morning Sports on Empty Stomach

DPA

Cologne, September 10, 2012

Those who wake up to do early morning sports should also prepare their bodies so that the morning sweat is also effective. About 20 minutes before starting, individuals should drink a large glass of lukewarm water.

Professor Ingo Froboese from the Centre for Health Germany Sport University in Cologne also said a banana helps the body as it does not strain the body much and supplies energy.

Early morning activity can be effective in losing weight but only if carbohydrates are present. “Many believe early morning sports goes right at the local fat deposits because the sugar reserves are used overnight and the replenishment is not there,” said Froboese.

“Fats are only burned in the presence of carbohydrates. In addition, untrained beginners cannot immediately burn off their fats.

The fat burning process has to build up.” Froboese added. That’s why it’s important to have enough carbohydrates in your body before you run.

The experts said you should never run on an empty stomach. Not only could the energy supply be too low but the inner organs could also become irritated through the unusual strain, which is only intensified with the lack of nourishment. Dizziness and perception disorders are also possible. That mainly happens when the fluid reserves are empty.

Froboese said it’s best to plan two to two-and-a-half hours for the morning sports and subsequent rest and breakfast.

<http://www.thehindu.com/health/fitness/article3881222.ece?homepage=true>

47. What is Sleep Apnoea? (Sleep Apnea)

Obstructive Sleep Apnoea (OSA) is defined as the cessation of airflow during sleep preventing air from entering the lungs caused by an obstruction. These periods of 'stopping breathing' only become clinically significant if the cessation lasts for more than 10 seconds each time and occur more than 10 times every hour. OSA only happens during sleep, as it is a lack of muscle tone in your upper airway that causes the airway to collapse. During the day we have sufficient muscle tone to keep the airway open allowing for normal breathing. When you experience an episode of apnoea during sleep your brain will automatically wake you up, usually with a very loud snore or snort, in order to breathe again. People with OSA will experience these waking episodes many times during the night and consequently feel very sleepy during the day: they have an airway that is more likely to collapse than normal.

How Do I Know I Have Sleep Apnoea?

People with sleep apnoea may complain of excessive daytime sleepiness often with irritability or restlessness. But it is normally the bed partner, family or friends who notice the symptoms first. Sufferers may experience some of the following:

- Extremely loud heavy snoring, often interrupted by pauses and gasps
- Excessive daytime sleepiness, e.g., falling asleep at work, whilst driving, during conversation or when watching TV. (This should not be confused with excessive tiredness with which we all suffer from time to time)
- Irritability, short temper
- Morning headaches
- Forgetfulness
- Changes in mood or behaviour
- Anxiety or depression
- Decreased interest in sex

Remember, not everyone who has these symptoms will necessarily have sleep apnoea. We possibly all suffer from these symptoms from time to time but people with sleep apnoea demonstrate some or all of these symptoms all the time.

Diagnosing Sleep Apnoea

OSA can range from very mild to very severe. The severity is often established using the apnoea/hypopnoea index (AHI), which is the number of apnoeas plus the number of hypopnoeas per hour of sleep - (hypopnoea being reduction in airflow). An AHI of less than 10 is not likely to be associated with clinical problems. To determine whether you are suffering from sleep apnoea you must first undergo a specialist 'sleep study'. This will usually involve a night in hospital where equipment will be used to monitor the quality of your sleep. The results will enable a specialist to decide on your best course of treatment. The ultimate investigation is polysomnography, which will include:

- Electro-encephalography (EEG) - brain wave monitoring
- Electromyography (EMG) - muscle tone monitoring
- Recording thoracic-abdominal movements - chest and abdomen movements
- Recording oro-nasal airflow - mouth and nose airflow
- Pulse oximetry - heart rate and blood oxygen level monitoring
- Electrocardiography (ECG) - heart monitoring
- Sound and video recording

This is a very expensive investigation, with few centres able to offer it routinely for all suspected sleep apnoea patients. A 'mini' sleep study is more usual, consisting of pulse oximetry and nursing observation. [Home sleep study](#) is becoming more popular.

Treating Sleep Apnoea

There are several forms of treatment for sleep apnoea. In mild and moderate cases weight loss and the use of [mandibular advancement devices](#) can be wholly successful. In moderate and severe cases mandibular advancement device or nasal [continuous positive airway pressure](#) (CPAP) are normally prescribed. CPAP is the gold standard treatment for OSA.

Central & Mixed Sleep Apnoea

OSA is the commonest form of sleep apnoea, (about 4% of men and 2% of women) but there is also a condition called [Central Sleep Apnoea](#) (CSA). This is a condition when the brain does not send the right signals to tell you to breathe when you are asleep. In other words the brain 'forgets' to make you breathe. It can also be associated with weakness of the breathing muscles. The assessment for CSA is often more complicated than for OSA and the treatment has to be carefully matched to the patient's requirements. There is also a condition called Mixed Sleep Apnoea that is a combination of both obstructive and central sleep apnoea.

http://www.britishsnoring.co.uk/snoring_&_sleep_apnoea/what_is_sleep_apnoea.php

48. Insomnia?

Insomnia is trouble falling asleep or staying asleep through the night.

Insomnia, or **sleeplessness**, is an individual's reported sleeping difficulties. "Insomnia" is derived from the Latin word "Somnus", the name of the Roman god of sleep, with the incorporation of the prefix "in-" to add contradiction. While the term is sometimes used in sleep literature to describe a disorder demonstrated by polysomnographic evidence of disturbed sleep, insomnia is often defined as a positive response to either of two questions: "Do you experience difficulty sleeping?" or "Do you have difficulty falling or staying asleep?"

Some New Suggestions from Readers who have found these Remedies Useful for their Own Insomnia:

South, Not North

"I suggest you amend the tip on "sleeping with the head pointing North". It has long been known in India that sleeping this way is damaging to mind and body, and that burying the dead with the head pointing northward makes the body decay more quickly. The premise is that the body can be seen as a large magnet, with the head as the North Pole and the feet as the South Pole. Since unlike poles attract, it is best to have the feet (South Pole) facing North. This results in minimal blood circulation and low activity in the brain, and therefore more restful sleep."- Ron

Short Walk before Bed

Reader R.G. suggests taking a short walk before bed—assuming you live in an area where that's perfectly safe. He finds the light exercise often helps him get to sleep.

Get Up Earlier in the Morning

At least try this when you're trying to set up your new regular bedtime routine. As much as you may hate getting up one-half hour earlier (or even more) than you really have to, you'll be that much more tired at night and more apt to get to sleep. Once you and your body have the confidence that you can get to sleep when you want at night, you can go back to your preferred wake-up-in-the-morning time.

<http://www.well.com/~mick/insomnia/>

<http://en.wikipedia.org/wiki/Insomnia>

<http://www.well.com/~mick/insomnia/insomnia.31.html>

<http://www.well.com/~mick/insomnia/insomnia.20.html>

49. Cut down on the overtime! Working more than eight Hours a Day raises the Risk of Heart Disease by 80%

- Researchers found spending too long in the workplace resulted in up to 80% greater chance of heart disease
- Britain has some of the longest working hours in Europe, averaging out at 42.7 hours a week. Only Austria and Greece have longer

By [Pat Hagan](#)

PUBLISHED: 11 September 2012| **UPDATED:** 12 September 2012

Doing overtime increases the risk of heart disease by up to 80 per cent, a major study has claimed.

Researchers say long working hours could be condemning thousands of employees to heart attacks and strokes.

The warning follows analysis of 12 studies dating back as far as 1958, involving a total of 22,000 people from around the world.

Time for a holiday: Research shows that employees who frequently put in overtime significantly increase their risk of heart attacks and strokes

The analysis, by scientists at the Finnish Institute of Occupational Health, found that those whose working days that were longer than the traditional eight hours had a 40 to 80 per cent greater chance of heart disease.

The size of the increase varied depending on how each study was carried out.

The effects were more pronounced when participants were asked how long they worked for – but when researchers closely monitored working hours, the increased risk of heart disease was closer to 40 per cent.

- [Don't count calories, it'll just make you FATTER! Which foods really make us fat?](#)
- [NHS hospitals sending your confidential notes to India to be typed up](#)

Lead researcher Dr Marianna Virtanen said the effects could be due to 'prolonged exposure to stress'. Other triggers could be poor eating habits and lack of exercise due to restricted leisure time.

In 2009, the same team discovered that long working hours increased the risk of dementia later in life. The effect was similar in magnitude to that of smoking.

In 2009, the same team discovered that long working hours increased the risk of dementia later in life. The effect was similar in magnitude to that of smoking.

Calm down: Prolonged exposure to psychological stress, which can occur at work, may be one reason for the link between longer hours and heart disease

Middle-aged workers putting in 55 hours or more a week had poorer brain function than those clocking up no more than 40 hours, with lower scores on tests to measure intelligence, short-term memory and word recall.

Britons work some of the longest hours in Europe, with full-time employees averaging 42.7 a week. Those in Germany typically work for 42, while Danes do 39.1.

It estimated that more than five million people a year in Britain work unpaid extra hours to hang on to their jobs.

But the long-term toll on workers' health could be devastating, the new research suggests.

In a report on the findings Dr Virtanen said: 'There are several potential mechanisms that may underlie the association between long working hours and heart disease.

In addition to prolonged exposure to psychological stress she said other triggers could be raised levels of the stress hormone cortisol, poor eating habits and lack of physical activity due to restricted leisure time.

<http://www.dailymail.co.uk/health/article-2201519/Working-hours-day-raises-risk-heart-disease-80.html?ito=feeds-newsxml>

50. Smoking may lead to Ovarian Cancer

IANS | Sep 12, 2012

Scientists have for the first time linked [smoking](#) with [ovarian cancer](#) - the second most commonly diagnosed gynaecological cancer in Australia with a five-year survival rate of only 40 per cent.

[Andy Lee](#) and Colin Binns, both professors from the Curtin University's School of Public Health, took part as members of the Collaborative Group on Epidemiological Studies of Ovarian Cancer based at [Oxford University](#) and funded by UK Cancer research.

Their work involved the completion of two studies in China, which were fed into a pool of data totalling 28,114 [women](#) with, and 94,942 women without, ovarian cancer, the journal *Lancet Oncology* reported.

"Previously there was only a weak link between smoking and ovarian cancer, coming from a paper in 2009. This new analysis firmly establishes that relationship for one particular type of ovarian cancer, mucinoid tumours, which account for about 15 percent of the total of all ovarian cancers," Binns said, according to a university statement.

Outcomes were consistent along 13 socio-demographic and personal characteristics which were taken into account, including body-mass index, use of alcohol, use of oral contraceptives and menopausal hormone therapy.

Binns said more research was needed to understand how smoking stimulated the creation of mucinoid tumours, but stressed the first step in prevention was for women to quit cigarettes.

"While giving up smoking is the best advice, we did find evidence that drinking green tea, breastfeeding, eating fruit and vegetables, getting regular exercise and avoiding [obesity](#) were also beneficial," he said.

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/Smoking-may-lead-to-ovarian-cancer/articleshow/16364531.cms>

51. World Oral Health Day: Don't ignore Oral Health

IANS | Sep 12, 2012

Dental health is an indicator of overall health. There are simple ways to maintain oral hygiene. Chewing sugar-free gum after a meal, for instance, can help prevent oral cavities.

Experts say that ignorance is a huge cause for the wide prevalence of practices that are detrimental to oral health in India.

A consumer attitudes survey conducted recently by the Indian Market Research Bureau (IMRB) revealed that only 47 per cent of total treatments received are by dentists. More than half those with dental problems prefer to take advice from chemists and general practitioners, or use home remedies.

The survey also reveals that nearly half of Indians do not use toothbrush and toothpaste. Only 51 per cent of people in the survey brushed their teeth with toothpaste and a toothbrush. Only 28 per cent brushed their teeth twice a day. Nearly 34 per cent believed that brushing once a day was more than enough.

Moreover, 65 per cent of the respondents had no clue that eating habits could cause dental problems.

"Only a handful of people across the country take oral healthcare seriously. For the most part, Indians only approach a dentist when faced with a crisis, and usually only after they turn 40. Then, they blame dentists for expensive and prolonged sessions," says Ajay Sharma, senior consultant, Department of Dentistry, Max Health Care.

"Lack of awareness on dental care is a serious issue in India. The government should set up primary health care centres in rural areas to promote oral hygiene," Sharma said.

Dentists also pointed out that many in rural areas still use their fingers, brick powder or neem sticks for brushing teeth. Some of these things could actually be harmful.

"Oral care is important, but many take it for granted. It is important because the mouth is where the digestive system begins. People fail to understand the intimate connection between oral health and overall health. The mouth is the starting place for keeping bacteria out, and it should be properly maintained. The use brick powder and neem sticks just won't serve the purpose," says Anupama Dhawan, a consultant dentist who works at a clinic in Preet Vihar, east Delhi.

Dentists reiterate that problems in the mouth could easily affect the rest of the body.

Ashok Dhoble, honorary secretary general of the Indian Dental Association (IDA) said, "Oral health is very important and critical for one's overall health. Yet it is often neglected. Gum disease is a bacterial infection. If not treated in time, it is capable of affecting other body organs through the blood stream."

An unhealthy mouth often also means an unhealthy heart.

"People suffering from periodontitis (a gum disease) are at higher risk of coronary artery disease. The bacteria might enter the bloodstream while chewing or brushing and this would contribute to the formation of clots in the arteries, which can cause heart attack," said Alka Yadav, consultant dentist, B.L. Kapur Memorial Hospital.

"Gum disease could also be a sign of diabetes. Diabetics are prone to have periodontal disease, if their condition is not under control," Yadav added.

Offering a simple solution, Dhoble said: "As many people eat food away from their home, it may not be easy to floss or use a mouthwash to gargle. But it is easy enough to chew a sugar-free gum immediately after eating. This is something that could be carried around easily, and could supplement the oral care routine. It could easily help reduce the risk of cavities."

"Research has shown that chewing sugar-free gum for 20 minutes after eating or drinking can help reduce tooth decay risk by up to 40 percent," Dhoble said.

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/World-Oral-Health-Day-Dont-ignore-oral-health/articleshow/16365663.cms>

52. Child Deaths around the World below 7 Million in 2011

BST 13 Sep 2012

The number of children under the age of five who die annually fell to less than 7 million in 2011, but around 19,000 boys and girls around the world are still dying every day from largely preventable causes, the UN said.

A report by the United Nations Children's Fund said that four-fifths of under-five deaths last year occurred in sub-Saharan Africa and South Asia. More than half the pneumonia and diarrhoea deaths – which together account for almost 30 per cent of under-five deaths worldwide – occur in just four countries: Congo, India, Nigeria and Pakistan, it said.

"Given the prospect that these regions, especially sub-Saharan Africa, will account for the bulk of the world's births in the next years, we must give new impetus to the global momentum to reduce under-five deaths," UNICEF Executive Director Anthony Lake said in the report.

He said children from disadvantaged and marginalised families in poor and fragile nations are the most likely to die before their fifth birthday, but their lives can be saved with vaccines, adequate nutrition and basic medical and maternal care.

"The world has the technology and know-how to do so," Lake said. "The challenge is to make these available to every child."

UNICEF said the rate of decline in under-five deaths has drastically accelerated in the last decade, from 1.8 per cent per year during the 1990s to 3.2 per cent per year between 2000 and 2011.

"There is much to celebrate," Lake said. "More children now survive their fifth birthday than ever before – the global number of under-five deaths has fallen from around 12 million in 1990 to an estimated 6.9 million in 2011." In 2010, there were 7.6 million under-5 deaths.

The report underscores that a country's location and economic status need not be a barrier to reducing child deaths.

Low income countries such as Bangladesh, Liberia and Rwanda, middle income countries including Brazil, Mongolia and Turkey, and high income countries such as Oman and Portugal have all made dramatic gains, lowering their under-five mortality rates by more than two-thirds between 1990 and 2011, the report said.

But UNICEF Deputy Executive Director Geeta Rao Gupta stressed that there is "unfinished business" and it is not just about the number of child deaths.

"Behind every statistic is an unseen child, and a grieving mother and father," she said. "A child's death is all the more tragic when caused by a disease that can easily be prevented. That's why we have this global movement to recommit to child survival and renew the promise to end child deaths. This decline shows we can make this happen."

http://www.telegraph.co.uk/health/children_shealth/9540335/Child-deaths-around-the-world-below-7-million-in-2011.html

53. Exercise helps You Cope with Stress, Anxiety

IANS, Sep 14, 2012

Moderate exercise not only keeps one fit and healthy but also helps him or her to cope with anxiety and stress, suggests a new study.

"While it is well-known that exercise improves mood, not as much is known about the potency of exercise's impact on the emotional state," explains J. Carson Smith, assistant professor of kinesiology, University of Maryland School of Public Health, who led the study.

"We found that exercise helps to buffer the effects of emotional exposure. If you exercise, you'll not only reduce your anxiety, but you'll be better able to maintain that reduced anxiety when confronted with emotional events," said Smith, the journal *Medicine and Science in Sports and Exercise* reports.

Smith, whose research explores how exercise and physical activity affect brain function, aging and mental health, compared how moderate intensity cycling versus a period of quiet rest (both for 30 minutes) affected anxiety levels in a group of healthy college students, according to a Maryland statement.

He assessed their anxiety state before the period of activity (or rest), shortly afterward (15 minutes after) and finally after exposing them to a variety of highly arousing pleasant and unpleasant photographs, as well as neutral images.

Smith found that exercise and quiet rest were equally effective at reducing anxiety levels initially. However, once they were emotionally stimulated (by being shown 90 photographs from the International Affective Picture System, used in emotion research) for 20 minutes, the anxiety levels of those who had simply rested went back up to their initial levels, whereas those who had exercised maintained their reduced anxiety levels.

The study findings suggest that exercise may play an important role in helping people to better endure life's daily anxieties and stressors.

http://www.dnaindia.com/health/report_exercise-helps-you-cope-with-stress-anxiety_1741057

54. Want to lose Weight? It's all about the Timing

Sep 15, 2012

On a diet, but still want those crisp fries and a shake? It could be possible to include those yummy treats into your menu, if eaten at the right time! A new study has found that people who snack on healthy food may consume only small amounts of fat. However, a haphazard eating pattern could mean that you put on weight. The study says that sticking to a strict eating pattern means a good rate of metabolism, which helps to burn off fat, allowing you to include your favourite foods into the menu. The finding claim that having a fixed timetable for meals could be a more effective means of dieting than curbing your cravings. This finding is very important in the world's fight against obesity.

Previous studies have shown that both a high-fat diet and eating patterns that disrupt the natural body clock can interfere with our metabolism and raise the risk of obesity. Scientists from the Hebrew University of Jerusalem tested the effects of timing and fat intake on four groups of mice over an 18-week period to determine whether careful scheduling of meals could lower the effects of a high-fat diet.

Half were given a high-fat diet that would normally be expected to make them obese. Of these, a quarter was fed at the same time each day and another quarter could eat as much as they liked, whenever they liked. The other half were fed a diet that was lower in fat. Again, one quarter had a fixed feeding time, the other had not. All four of the groups gained weight over the course of the trial, with the group that ate a high-fat diet at irregular intervals unsurprisingly gaining the most weight, while those on a low-fat, scheduled diet gained the least. But more surprisingly, the mice that had been fed a high-fat diet at regular intervals finished the trial in a better condition than those that ate low-fat foods whenever they wanted, despite both groups consuming the same number of calories overall.

The mice in the scheduled, high-fat group had 12 per cent lower body weight, 21 per cent lower cholesterol and 1.4 times higher sensitivity to insulin than the unscheduled, low-fat group. The diet also changed their metabolism so that they burnt off the fats they ingested to produce energy in between meal times, rather than storing the fat in their bodies.

The study was published in the Journal of the Federation of American Societies for Experimental Biology. Experts said that the timing of the food took precedence over the amount of fat consumed, leading to improved metabolism and helping in prevent obesity. They also said, Improving metabolism through the careful scheduling of meals, without limiting the content of the daily menu, could be used as a therapeutic tool to prevent obesity in humans.

<http://health.india.com/news/want-to-lose-weight-its-all-about-the-timing/>

55. The Wait for a Donor's Organ

[Ananya Banerjee](#) : Mumbai, Sep 17 2012

After being bedridden for almost all of last year, 41-year-old Jayashree Mehta finally underwent a successful lung transplant a couple of months ago at Mumbai's P D Hinduja Hospital. Diagnosed with

pulmonary fibrosis eight years ago, she had been living on an external oxygen supply for almost two years. The surgery in July marked a milestone event as it was Mumbai's first ever lung transplant and the sixth in the country, the previous five having been performed at various hospitals in South India since 1999.

It took a wait of six months to find a match for Jayashree. Even when they did get a call about a potential donor, it did not work out. "A week before the actual surgery, we got a call from the hospital saying they had found a match. However, the family of the donor backed out at the last minute," said Parag Mehta, her husband. "Luckily, a week later we got news of another donor and the surgery was performed."

There are thousands in the country who die waiting for a suitable organ to come. The dearth of usable organs, bureaucratic procedures and sheer lack of general awareness mark the organ transplantation scene in the country.

As per data collated from 48 top hospitals in the country by the Indian Society of Organ Transplantation, the total kidney transplants performed between 1971 and 2011 was 20,952 and the total liver transplant surgeries done between 1995 and 2011 was only 329. Experts say there is a need for 1,50,000 kidneys, 2,00,000 livers and 1,50,000 heart cadavers for transplants every year in the country.

In 1994, The Transplantation of Human Organs Act was framed for the regulation of removal, storage and transplantation of human organs for therapeutic purposes and also for the prevention of commercial dealings in organs. The Act, first introduced in Goa, Maharashtra, Himachal Pradesh and the UTs, was later extended to all other states. Amendments were made in 2008 to specifically address concerns about an organ trading racket. While the Act did put in place a mechanism for transplantation, medical consultations continue for further streamlining of its implementation.

"There is ambiguity regarding a brain-dead patient who will eventually be the organ donor. There are two types of transplants that are done. While the liver and kidney can be transplanted from a live donor, the heart can be transplanted only after the person is declared brain-dead. However, hospitals themselves cannot declare a patient brain-dead," said Dr Kishore Adyanthaya, professor & head of the surgery department at Bombay Hospital. As per the Act, a team of four medical authorities needs to declare the patient brain-dead twice in six hours. Procedural rules and bureaucratic interferences also often hinder the harvest process.

"There are certain rules and norms such as paperwork, permissions etc that come into play at the time of transplantation. While these can be the reason for several patients dying waiting for the organs, these rules are crucial to check the illegal organ trade. It is important to strike a balance when it comes to such rules," said Dr Mohammed Rela, who was supervising the treatment of former Maharashtra chief minister Vilasrao Deshmukh at Global Hospitals in Chennai.

Setting an example for the entire country is the Tamil Nadu model for organ transplantation. Since the first lung transplant in the country, performed in Chennai in the late 1990s, Tamil Nadu has seen around 1.3 million cadaveric donations. Support from the Tamil Nadu government and mass awareness has largely contributed to the success of organ transplantation in that state.

“The Tamil Nadu government has helped in pushing the cause of organ donation . There is a transplant coordinator in every hospital,” said Dr T Sunder, senior consulting cardio-thoracic surgeon at Apollo Hospital, Chennai. “But most importantly it is public awareness that has helped the most. People are now more willing to come forward to help the cause.”

“Awareness among the masses about transplants is high in the south. NGOs and governmental organisations conduct various campaigns and activities that help spread the word,” Dr Rela said.

In other states, misconceptions, superstition and sheer lack of awareness prevail even among the “educated” masses. “Relatives fear mutilation of the donor’s body and are not willing to come forward. Awareness levels even among the educated people are low. This is something that must change if we are to save the millions who are dying just waiting for a suitable donor,” said Dr Sunil Keswani of the National Institute of Burns, Airoli.

<http://www.indianexpress.com/news/the-wait-for-a-donors-organ/1003430/>

56. Kids without Siblings More Likely to be Overweight

Last Updated: Tuesday, September 18, 2012

Washington: Children who grow up without siblings have a more than 50 percent higher risk of being overweight or obese than children with siblings, according to a new study.

This finding is based on the study of 12,700 children in eight European countries, including Sweden.

The University of Gothenburg, Sweden, was one of the participating universities in the study.

The study was conducted under the framework of the European research project Identification and prevention of Dietary and lifestyle-induced health Effects In Children and Infants (IDEFICS), where researchers from various parts of Europe study diet, lifestyle and obesity and their health effects on children aged 2 to 9 years.

The study shows that only children have a more than 50 percent higher risk of obesity compared to their peers with siblings. The results were controlled for other influential factors, such as gender, birth weight and parental weight.

In the study, the children’s measured BMI was linked to a parental questionnaire that included questions relating to the children’s eating habits, television viewing habits and amount of outdoor playtime.

“Our study shows that only children play outside less often, live in households with lower levels of education more often, and are more likely to have televisions in their bedroom,” said Monica Hunsberger, a researcher at the Sahlgrenska Academy, University of Gothenburg, who contributed to the study.

“But even when we take these factors into account, the correlation between singleton status and overweight is strong. Being an only child appears to be a risk factor for overweight independent of the factors we thought might explain the difference,” she added.

Lauren Lissner, a researcher at the Sahlgrenska Academy, University of Gothenburg continued, “The fact that only children are more susceptible to obesity may be due to differences in individual family environment and family structure that we were not able to measure in sufficient detail. To better understand the causality, a follow-up study of these families will start next year.”

Over 22 million children in Europe are estimated to be overweight. The study shows that obesity among children in general is three times more common in southern countries such as Italy, Spain and Cyprus than in Sweden and other northern countries.

The study was published in Nutrition and Diabetes in July.

ANI

http://zeenews.india.com/news/health/health-news/kids-without-siblings-more-likely-to-be-overweight_18864.html

57. Early Menopause ups Heart Stroke Risk: Study

[Kounteya Sinha](#), TNN | Sep 20, 2012

NEW DELHI: Early [menopause](#) — a rising trend among Indian [women](#) — has now been associated with increased risk of [heart](#) condition and stroke.

An Indian doctor at [the Johns Hopkins University School of Medicine](#) in the US has found that women who go into early menopause are twice as likely to suffer from coronary heart disease and stroke.

In an interview to TOI from the US, Dr Dhananjay Vaidya, an assistant professor in the department of general internal medicine at the [Johns Hopkins University School of Medicine](#), said, "If physicians know a patient has entered menopause before her 46th birthday, they should be extra vigilant in making recommendations and providing treatments to help prevent [heart attacks](#) and stroke."

Research has shown that smokers reach menopause, on average, two years earlier than non-smokers do, so quitting [smoking](#) may delay it.

Worryingly, an average Indian female smoker puffs more cigarettes a day (7) than males (6.1). An average Indian woman is taking to smoking at 17.5 years as against 18.8 years among men.

Dr Vaidya said the association holds true in patients from a variety of different ethnic backgrounds and is independent of traditional cardiovascular disease risk factors.

The study has been published in the October issue of the journal, Menopause.

"Our results suggest it is also important to avoid early menopause if at all possible," he said.

Notably, the researchers said, their findings about the negative impact of early menopause were similar whether the women reached it naturally or surgically like removal of reproductive organs.

Often, Vaidya said, women who undergo hysterectomies have their ovaries removed and that precipitates rapid menopause. "Perhaps ovary removal can be avoided in more instances," he said.

Vaidya examined data from 2,509 women aged between 45 and 84 — all enrolled between 2000 and 2002 and followed until 2008. The survey revealed 28% reported early menopause, or menopause that occurs before the age of 46. Vaidya emphasizes that although the risk of heart attack and [stroke](#) was doubled in these groups, the actual number of cardiac and stroke events recorded among study participants was small. Only 50 women in the study suffered heart events, while 37 had strokes.

Menopause is a process during which a woman's reproductive and hormonal cycles slow down, her

periods (menstruation) eventually stop, ovaries stop releasing eggs for fertilization and produce less estrogens and progesterone, and the possibility of pregnancy ends.

A natural event, which takes place in most women in the 45-55 age group, of menopausal onsets and rates are influenced by a combination of factors, including heredity, smoking, diet and exercise.

"Cardiovascular disease processes and risks start very early in life, even though the heart attacks and strokes happen later. Unfortunately, young women are often not targeted for prevention because cardiovascular disease is thought to be only attacking women in old age. What our study reaffirms is that managing risk factors when women are young will likely prevent or postpone heart attacks and strokes when they age," he said.

Dr Vaidya said, "I found a survey of women visiting gynecology specialists in India published by Dr M Singh of Tanvir Hospital, Hyderabad. Approximately half of the women in their approx 1000 survey may have had menopause before 46 years."

According to him, the main preventable reason for early menopause (in some countries and in some parts of the Indian population) is smoking. However, for the vast majority of women in developing countries, the reason for early menopause is poor nutrition during early life and young adulthood. Poor social/economic status women have early menopause.

"If a woman is young (or parents of girls should pay attention), good nutrition is key because the women will have a longer reproductive life and also lesser heart disease and stroke in old age. For women who smoke: quitting will do both, give a longer reproductive life and also lesser heart disease and stroke in old age. For women who are already older, if they have had early menopause, they should be extra vigilant in improving their lifestyle, exercise before heart disease happens. Greater care should be taken in controlling [high blood pressure](#) and [high cholesterol](#) — so that those do not increase risk even more," he added.

<http://timesofindia.indiatimes.com/home/science/Early-menopause-ups-heart-stroke-risk-Study/articleshow/16468663.cms?>

58. Just One Glass of Wine a Day could trigger Breast Cancer

Press Trust of India / London September 20, 2012

A single glass of wine everyday for a year could trigger breast cancer and other tumours, a new study by an international team of researchers has claimed.

Researchers compared the effects between those who consumed up to one typical drink of alcohol a day with 'non-drinkers' in terms of relative risks for a number of types of cancer.

The study concluded there were detectable increases in cancer cases involving the mouth, throat, gullet and breast.

The team, from the University of Milan and other centres in the US, Canada, Iran, France and Sweden, estimated that in just one year, light drinking caused 24,000 deaths from oesophageal cancer, 5,000 from oral and 5,000 from breast cancer worldwide, the Daily Mail reported.

The latest research pooled data from a number of previous studies, involving more than 150,000 people.

The International Scientific Forum on Alcohol Research who reviewed the findings said they were concerned about a number of aspects of the study.

These included the fact the investigators included both ex-drinkers and never drinkers in their reference group and that they had no data on the duration of alcohol consumption at different levels.

The researchers also did not adjust their estimates for other lifestyle habits, including smoking. All of these factors tend to weaken the implications of their results, they said.

The study was published in the Annals of Oncology.

<http://www.business-standard.com/generalnews/news/just-one-glasswineday-could-trigger-breast-cancer/58721/>

59. Proteins can kick-start Male Fertility

IANS | Sep 24, 2012

Adding a protein could activate infertile human sperm into fertilising an egg, improving chances of a successful pregnancy, says a new study.

The team from Cardiff University's School of Medicine first found that sperm transfers a vital protein, known as PLC-zeta (PLCz), to the egg upon fertilisation. Then it initiates a process called 'egg activation,' which switches on all the biological processes necessary for development of an embryo.

The team has found that eggs that don't fertilise because of a defective PLCz, as in some forms of male infertility, can be treated with the active protein to produce egg activation.

The added PLCz kick-starts the fertilisation process and significantly improves the chance of a successful pregnancy, the journal Fertility and Sterility reports.

"We know that some men are infertile because their sperm fail to activate eggs. Even though their sperm fuses with the egg, nothing happens," said Tony Lai, professor at Cardiff, who with Professor Karl Swann, led the team at Cardiff University's Institute of Molecular and Experimental Medicine and funded by the Wellcome Trust, according to a Cardiff statement.

"These sperm may lack a proper functioning version of PLCz, which is essential to trigger the next stage in becoming pregnant," Lai added.

"What's important from our research is that we have used human sperm PLCz to obtain the positive results that we had previously observed only in experiments with mice," Lai said.

"In the lab we have been able to prepare human PLCz protein that is active. If this protein is inactive or missing from sperm, it fails to trigger the process necessary for egg activation - the next crucial stage of embryo development," Lai said.

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/Protein-can-kick-start-male-fertility/articleshow/16526759.cms>

60. Can you really work up an Appetite?

ANI | Sep 24, 2012

US scientists are challenging the popular notion that we can "work up an appetite" with vigorous exercise, saying it actually reduces a person's [motivation](#) for food.

James LeCheminant and [Michael Larson](#), both [Brigham Young University](#) professors, measured the neural (brain cell) activity of 35 [women](#) while they viewed [food](#) images, both following a [morning of exercise](#) and a morning without exercise.

The research shows that 45 minutes of moderate-to-vigorous exercise in the morning actually reduces a person's motivation for food.

They found their attentional response to the food pictures decreased after the brisk workout, the journal *Medicine & Science in [Sports](#) & Exercise* reports.

"This study provides evidence that exercise not only affects energy output, but it also may affect how people respond to food cues," LeCheminant said, according to a Brigham statement.

The study measured the food motivation of 18 normal-weight women and 17 clinically obese women over two separate days. On the first day, each woman briskly walked on a treadmill for 45 minutes and then, within the hour, had their brain waves measured.

Electrodes were attached to each participant's scalp and an EEG machine then measured their neural activity while they looked at 240 images - 120 of food meals on plates and 120 of flowers.

The same experiment was conducted one week later on the same day of the week and at the same time of the morning, but omitted the exercise. Individuals also recorded their food consumption and physical activity on the experiment days.

The 45-minute exercise bout not only produced lower brain responses to the food images, but also resulted in an increase in total physical activity that day, regardless of body mass index.

"We wanted to see if [obesity](#) influenced food motivation, but it didn't," LeCheminant said. "However, it was clear that the exercise bout was playing a role in their neural responses to the pictures of food."

Interestingly, the women in the experiment did not eat more food on the exercise day to "make up" for the extra calories they burned in exercise. In fact, they ate approximately the same amount of food on the non-exercise day.

"The subject of food motivation and [weight loss](#) is so complex," Larson said. "There are many things that influence eating and exercise is just one element."

<http://timesofindia.indiatimes.com/life-style/health-fitness/fitness/Can-you-really-work-up-an-appetite/articleshow/16382471.cms>

61. Swine Flu killing Doctors Now

M. Poornima, PTI

Bhopal, September 25, 2012

Despite attempts by the state health department to downplay the incidence of swine flu in Madhya Pradesh, the high mortality rate among those afflicted by it is actually alarming. Bhopal tops the death toll with seven out of 28 patients testing positive for H1N1 virus succumbing during treatment.

Indore is not far behind, where five of as many patients have died of the dreaded virus.

In fact, the in-charge of swine flu cell at the directorate of health, Dr KK Thassu, issued a circular some days ago asking people not to be scared of swine flu as it is no more an epidemic but only an endemic disease which could be cured through medication. At that time, swine flu scare seemed to be receding as most of the suspected swine flu patients were testing negative and those admitted for treatment were responding well at both government and private hospitals. But in the past few days, the situation has changed dramatically.

On Saturday, nine out of 11 samples sent for confirmation of swine flu tested positive, giving a clear indication that the infection was on the rise and facilities for its treatment grossly inadequate.

Another remarkable aspect of swine flu scare this season is the fact that a number of doctors are also catching the infection. Two doctors of LBS Hospital in Bhopal tested positive for swine flu on Monday. In Jabalpur, two doctors including the dean of Netaji Subhash Chandra Bose Medical College are being treated for swine flu. Another doctor in the city, who had tested positive for the disease, has since been discharged. But to their credit, doctors in Jabalpur have not allowed any swine flu patient to die though number of persons testing positive in the confirmation test is more or less the same as Bhopal and Indore -- 26 to be precise.

In the wake of a growing number of doctors catching the infection, the directorate of health has made it mandatory for all the doctors and paramedical staff coming in direct contact with swine flu patients to get themselves vaccinated.

"We are calling it focal outbreak as the disease is prevalent more in specific pockets while not so in other areas. In Maharashtra, the situation is worse. Over 1,100 people have tested positive and 68 deaths reported due to swine flu and there it has been declared an epidemic. In MP too, the situation is worsening. Climate is also conducive for growth of H1N1 virus but to say that we are ill-prepared won't be correct. Had it been so, there would have been more patients and more casualties," Dr Thassu told.

The chief medical and health officer (CMHO), Dr Pankaj Shukla, said the situation was not so bad in Bhopal as it appeared because patients from all over the state were coming here for treatment. "This season is conducive for spread of infectious diseases but we are keeping a tight leash over the situation and constant monitoring is being carried out," he added.

<http://www.hindustantimes.com/India-news/Bhopal/Swine-flu-killing-doctors-now/Article1-935279.aspx>

62. More Indian Youths Suffering from Heart Diseases

IBNLive, Sept 27, 2012

New Delhi: With an ever-increasing number of Indians suffering from heart diseases, a drastic change in lifestyle and eating habits is the need of the hour to tackle the alarming situation with a special focus on youths, say doctors. Cardiovascular diseases would be the largest cause of death and disability in India by 2020 as per a World Health Organisation (WHO) report.

"The average age of people with heart ailments is coming down. We are getting patients as young as 20 years," Neeraj Bhalla, senior consultant and director of the heart centre at BLK Super Specialty Hospital, told IANS ahead of World Heart Day that is observed on Sep 29. "In the next five to 10 years around 20 percent of the Indian population would be affected," he added.

Atul Mathur, director of Invasive Cardiology at Fortis Escorts Heart institute, said that patients under the age of 40 have increased from 10 percent a decade ago to 30 percent today. "This is a perturbing development... A drastic change in lifestyle and food habits is needed," Mathur told IANS.

According to doctors, many of the young professionals today have odd working hours that lead to stress, and not many of them have the privilege of savouring home cooked meals. On top of it, the indulgence in smoking and drinking to "reduce the stress" worsens the situation. Such a lifestyle results in high blood pressure, obesity, diabetes, etc. leading to heart ailments.

"Smoking, eating junk food and less physical exercise are the evils that are severely affecting our youth today. On top of it the pressure at work which in many cases leads to drinking and smoking also complicates the situation," Kamaldeep Singh, consultant cardiologist at Gurgaon-based Columbia Asia Hospital, told IANS. According to Singh, the focus should be on how to educate youngsters to lead a healthy lifestyle.

The doctors said that efforts should be made to stop leading an unhealthy lifestyle which may lead to a cardiovascular disease later. The education and guidance should begin early. Physical exercise, avoiding junk and oily food and not smoking are some of the steps that must be adopted by people, say the doctors. "Stress is a part of life today and you can't avoid it, but half an hour of walk or exercise at home or office, five days a week can do wonders," Rishi Gupta, director, Cardiology, Asian Institute of Medical Sciences, told IANS.

World Heart Day was created in 2000 to inform people around the globe that heart disease and stroke are the world's leading cause of death, claiming 17.3 million lives each year and the numbers are rising. By 2030, it is expected that 23 million people will die from CVDs annually. Together with its members, the World Heart Federation spreads the news that at least 80 percent of premature deaths from heart disease and stroke could be avoided if the main risk factors, tobacco, unhealthy diet and physical inactivity, are controlled.

<http://ibnlive.in.com/news/more-indian-youths-suffering-from-heart-diseases/295702-17.html>

63. Snore away; Your Heart is not at Risk from It

September 27, 2012

Sydney: Researchers have ruled out snoring as a factor in mortality or cardiovascular disease risks, especially for those who don't suffer from sleep apnoea.

Previous work by the same group from the Woolcock Institute of Medical Research had found that apnoea (dangerous pauses in breathing during sleep) ups mortality risk, but until now it was not known whether snoring by itself might increase heart risks.

Researchers found that those who snored most of the night had no greater risk of death over the next 17 years than people who snored only 12 percent or less of the night or not at all, the journal "Sleep" reports.

"Because we snore only when we are asleep, we are not really aware of it. So we rely on other people to tell us we snore," says Nathaniel Marshall, from the Woolcock Institute and the University of Sydney Nursing School, who led the study.

"So in some cases, people may be unaware that they snore. Or they may believe, when told that they snore, that it was a one-off event, and not their normal type of sleep," adds Marshall, according to a Woolcock statement.

"We do know already from this study that sleep apnoea increases cardiovascular disease risk. Some of our colleagues are also looking closely to see whether snoring by itself might increase stroke risk in people who are highly susceptible," adds Marshall.

"However the good news at the moment seems to be that snoring, by itself, does not seem to appreciably increase cardiovascular disease or death rates," he adds.

The community-based sample of 380 people comprised men and women from the highly influential Busselton Health Study from Western Australia who underwent investigation with a home sleep apnoea and snoring monitoring device in 1990.

The study helps clarify long-term risks after some clinic or hospital-based studies that suggested that snoring alone might increase stroke risk. Many previous studies had assessed snoring based on self-reports.

Ron Grunstein, senior study author and professor at Woolcock Institute, said, "Obstructive sleep apnoea is a disease that medical practitioners as well as the general public need to take seriously. Snoring is certainly an acoustic problem to bed partners, but not a condition that is likely of itself to cause cardiovascular harm.

IANS

http://zeenews.india.com/news/health/diseases/snore-away-your-heart-is-not-at-risk-from-it_18994.html

64. Hormone Linked to Sleep could battle Alzheimer`s

September 30, 2012

London: In a breakthrough, scientists have discovered that a hormone linked to sleep cycle can be a new weapon against Alzheimer`s disease.

A new study has shown that a combination of exercise and a daily intake of melatonin, the natural hormone which causes drowsiness at night, had a positive effect on rodents suffering from the illness.

The research was conducted by the Barcelona Biomedical Research Institute (IIBB), in collaboration with the University of Granada and the Autonomous University of Barcelona, the Daily Mail reported.

"For years we have known that the combination of different anti-ageing therapies such as physical exercise, a Mediterranean diet, and not smoking adds years to one's life," said Dr Coral Sanfeliu, from the IIBB.

In the experiment, mice that had the disease were divided into one control group and three other groups which underwent the treatments of exercising on a running wheel, a dose of melatonin and a combination of the two.

In addition, a reference group of mice were included which presented no mutations of the disease.

"After six months, the state of the mice undergoing treatment was closer to that of the mice with no mutations than to their own initial pathological state. From this we can say that the disease has significantly regressed," Sanfeliu said.

According to the Natural Medicines Comprehensive Database, the molecule is probably effective in sleeping disorders in children with autism and mental retardation and in blind people, and possibly effective in case of jet-lag, sunburns and preoperative anxiety.

"Even though many more studies and clinical tests are still required to assess the doses of melatonin which will be effective for a wide range of diseases, the antioxidant and anti-inflammatory properties of melatonin mean that its use is highly recommended for diseases which feature oxidative stress and inflammation (such as Parkinson's disease and Alzheimer's disease)," Darío Acuña-Castroviejo, who has been studying melatonin for several years at the University of Granada, said.

The study was published in the journal *Neurobiology of Ageing*.

PTI

http://zeenews.india.com/news/health/diseases/hormone-linked-to-sleep-could-battle-alzheimer-s_19026.html

65. Dementia

Chronic brain syndrome; Lewy body dementia; DLB; Vascular dementia; Mild cognitive impairment; MCI

A.D.A.M. Medical Encyclopedia

Last reviewed: September 26, 2011

Dementia is a loss of brain function that occurs with certain diseases. It affects memory, thinking, language, judgment, and behavior.

See also: [Alzheimer's disease](#)

Causes, incidence, and risk factors

Most types of dementia are nonreversible (degenerative). Nonreversible means the changes in the brain that are causing the dementia cannot be stopped or turned back. Alzheimer's disease is the most common type of dementia.

Lewy body disease is a leading cause of dementia in elderly adults. People with this condition have abnormal protein structures in certain areas of the brain.

Dementia also can be due to many small strokes. This is called vascular dementia.

The following medical conditions also can lead to dementia:

- [Huntington's disease](#)
- [Multiple sclerosis](#)
- Infections that can affect the brain, such as [HIV /AIDS](#) and [Lyme disease](#)
- [Parkinson's disease](#)
- [Pick's disease](#)
- [Progressive supranuclear palsy](#)

Some causes of dementia may be stopped or reversed if they are found soon enough, including:

- Brain injury
- Brain tumors
- Chronic alcohol abuse
- Changes in blood sugar, sodium, and calcium levels (see: [Dementia due to metabolic causes](#))
- Low [vitamin B12](#) levels
- [Normal pressure hydrocephalus](#)
- Use of certain medications, including cimetidine and some cholesterol-lowering medications

Dementia usually occurs in older age. It is rare in people under age 60. The risk for dementia increases as a person gets older.

Symptoms

Dementia symptoms include difficulty with many areas of mental function, including:

- Language
- Memory
- Perception
- Emotional behavior or personality
- Cognitive skills (such as calculation, abstract thinking, or judgment)

Dementia usually first appears as forgetfulness.

Mild cognitive impairment is the stage between normal forgetfulness due to aging and the development of dementia. People with MCI have mild problems with thinking and memory that do not interfere with everyday activities. They are often aware of the forgetfulness. Not everyone with MCI develops dementia.

Symptoms of MCI include:

- Difficulty performing more than one task at a time
- Difficulty solving problems or making decisions
- Forgetting recent events or conversations
- Taking longer to perform more difficult mental activities

The early symptoms of dementia can include:

- Difficulty performing tasks that take some thought, but that used to come easily, such as balancing a checkbook, playing games (such as bridge), and learning new information or routines
- Getting lost on familiar routes
- Language problems, such as trouble finding the name of familiar objects
- Losing interest in things you previously enjoyed, flat mood
- Misplacing items
- Personality changes and loss of social skills, which can lead to inappropriate behaviors

As the dementia becomes worse, symptoms are more obvious and interfere with the ability to take care of yourself. The symptoms may include:

- Change in sleep patterns, often waking up at night
- Difficulty doing basic tasks, such as preparing meals, choosing proper clothing, or driving
- Forgetting details about current events
- Forgetting events in your own life history, losing awareness of who you are
- Having [hallucinations](#), arguments, striking out, and violent behavior
- Having delusions, depression, agitation
- More difficulty reading or writing
- Poor judgment and loss of ability to recognize danger
- Using the wrong word, not pronouncing words correctly, speaking in confusing sentences
- Withdrawing from social contact

People with severe dementia can no longer:

- Perform basic activities of daily living, such as eating, dressing, and bathing
- Recognize family members
- Understand language

Other symptoms that may occur with dementia:

- [Incontinence](#)
- Swallowing problems

Signs and tests

A skilled health care provider can often diagnose dementia by performing a physical exam and asking questions about the person's medical history.

The physical exam will include a neurological exam. Tests to check mental function will be done. This is called a mental status examination.

Other tests may be ordered to determine whether other problems could be causing dementia or making it worse. These conditions include:

- [Anemia](#)
- [Brain tumor](#)
- Chronic infection
- Intoxication from medications
- Severe depression
- [Thyroid disease](#)
- Vitamin deficiency

The following tests and procedures may be done:

- [B12 level](#)
- Blood [ammonia](#) levels
- Blood chemistry ([chem-20](#))
- [Blood gas analysis](#)
- [Cerebrospinal fluid \(CSF\) analysis](#)
- Drug or alcohol levels ([toxicology screen](#))
- [Electroencephalograph](#) (EEG)
- [Head CT](#)
- Mental status test
- [MRI of head](#)
- [Thyroid function tests](#)
- [Thyroid stimulating hormone](#) level
- [Urinalysis](#)

Treatment

Treatment depends on the condition causing the dementia. Some people may need to stay in the hospital for a short time.

Stopping or changing medications that make confusion worse may improve brain function.

There is growing evidence that some kinds of mental exercises can help dementia.

Treating conditions that can lead to confusion often greatly improve mental functioning. Such conditions include:

- Anemia
- Congestive heart failure
- Decreased blood oxygen ([hypoxia](#))
- Depression
- [Heart failure](#)
- Infections
- Nutritional disorders
- [Thyroid](#) disorders

Medications may be needed to control behavior problems caused by a loss of judgment, increased impulsivity, and confusion. Possible medications include:

- Antipsychotics ([haloperidol](#), [risperidone](#), [olanzapine](#))
- Mood stabilizers ([fluoxetine](#), [imipramine](#), [citalopram](#))
- Stimulants ([methylphenidate](#))

Certain drugs may be used to slow the rate at which symptoms worsen. The benefit from these drugs is often small, and patients and their families may not always notice much of a change.

- [Donepezil](#) (Aricept), [rivastigmine](#) (Exelon), [galantamine](#) (Razadyne, formerly called Reminyl)
- [Memantine](#) (Namenda)

A person's eyes and ears should be checked regularly. Hearing aids, glasses, or [cataract surgery](#) may be needed.

Psychotherapy or group therapy usually does not help because it may cause more confusion.

For information on how to take care of a loved one with dementia, see: [Dementia - home care](#)

Expectations (prognosis)

People with mild cognitive impairment do not always develop dementia. However, when dementia does occur, it usually gets worse and often decreases quality of life and lifespan.

Complications

Complications depend on the cause of the dementia, but may include the following:

- Abuse by an overstressed caregiver
- Increased infections anywhere in the body
- Loss of ability to function or care for self
- Loss of ability to interact
- Reduced lifespan
- Side effects of medications used to treat the disorder

Calling your health care provider

Call your health care provider if:

- Dementia develops or a sudden [change in mental status](#) occurs
- The condition of a person with dementia gets worse
- You are unable to care for a person with dementia at home

Prevention

Most causes of dementia are not preventable.

Quitting smoking and controlling high blood pressure and diabetes can help you reduce your risk of vascular dementia. This is dementia caused by a series of small strokes. Eating a low-fat diet and exercising regularly may also reduce the risk of vascular dementia.

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<http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0001748/>

66. Alzheimer's disease

Senile dementia - Alzheimer's type (SDAT); SDAT

Last reviewed: September 26, 2011

Dementia is a loss of brain function that occurs with certain diseases. Alzheimer's disease (AD) is one form of dementia that gradually gets worse over time. It affects memory, thinking, and behavior.

Causes, incidence, and risk factors

You are more likely to get Alzheimer's disease (AD) if you:

- Are older. However, developing AD is not a part of normal aging.
- Have a close blood relative, such as a brother, sister, or parent with AD.
- Have certain genes linked to AD, such as APOE epsilon4 allele

The following may also increase your risk, although this is not well proven:

- Being female
- Having high blood pressure for a long time
- History of head trauma

There are two types of AD:

- Early onset AD: Symptoms appear before age 60. This type is much less common than late onset. However, it tends to get worse quickly. Early onset disease can run in families. Several genes have been identified.
- Late onset AD: This is the most common type. It occurs in people age 60 and older. It may run in some families, but the role of genes is less clear.

The cause of AD is not clear. Your genes and environmental factors seem to play a role. Aluminum, lead, and mercury in the brain is no longer believed to be a cause of AD.

Symptoms

Dementia symptoms include difficulty with many areas of mental function, including:

- Emotional behavior or personality
- Language
- Memory
- Perception
- Thinking and judgment (cognitive skills)

Dementia usually first appears as forgetfulness.

Mild cognitive impairment is the stage between normal forgetfulness due to aging, and the development of AD. People with MCI have mild problems with thinking and memory that do not interfere with everyday activities. They are often aware of the forgetfulness. Not everyone with MCI develops AD.

Symptoms of MCI include:

- Difficulty performing more than one task at a time
- Difficulty solving problems
- Forgetting recent events or conversations
- Taking longer to perform more difficult activities

The early symptoms of AD can include:

- Difficulty performing tasks that take some thought, but used to come easily, such as balancing a checkbook, playing complex games (such as bridge), and learning new information or routines
- Getting lost on familiar routes
- Language problems, such as trouble finding the name of familiar objects
- Losing interest in things previously enjoyed, flat mood
- Misplacing items
- Personality changes and loss of social skills

As the AD becomes worse, symptoms are more obvious and interfere with your ability to take care of yourself. Symptoms can include:

- Change in sleep patterns, often waking up at night
- Delusions, depression, agitation
- Difficulty doing basic tasks, such as preparing meals, choosing proper clothing, and driving
- Difficulty reading or writing
- Forgetting details about current events
- Forgetting events in your own life history, losing awareness of who you are
- [Hallucinations](#), arguments, striking out, and violent behavior
- Poor judgment and loss of ability to recognize danger
- Using the wrong word, mispronouncing words, speaking in confusing sentences
- Withdrawing from social contact

People with severe AD can no longer:

- Understand language
- Recognize family members
- Perform basic activities of daily living, such as eating, dressing, and bathing

Other symptoms that may occur with AD:

- [Incontinence](#)
- Swallowing problems

Signs and tests

A skilled health care provider can often diagnose AD disease with the following steps:

- Complete physical exam, including neurological exam
- Asking questions about your medical history and symptoms
- A mental status examination

A diagnosis of AD is made when certain symptoms are present, and by making sure other causes of dementia are not present.

Tests may be done to rule out other possible causes of dementia, including:

- [Anemia](#)
- [Brain tumor](#)
- Chronic infection
- Intoxication from medication
- Severe depression
- [Stroke](#)
- [Thyroid disease](#)
- Vitamin deficiency

[Computed tomography](#) (CT) or [magnetic resonance imaging](#) (MRI) of the brain may be done to look for other causes of dementia, such as a brain tumor or stroke.

- In the early stages of dementia, brain image scans may be normal. In later stages, an MRI may show a decrease in the size of different areas of the brain.
- While the scans do not confirm the diagnosis of AD, they do exclude other causes of dementia (such as stroke and tumor).

However, the only way to know for certain that someone has AD is to examine a sample of their brain tissue after death. The following changes are more common in the brain tissue of people with AD:

- "Neurofibrillary tangles" (twisted fragments of protein within nerve cells that clog up the cell)
- "Neuritic plaques" (abnormal clusters of dead and dying nerve cells, other brain cells, and protein)
- "Senile plaques" (areas where products of dying nerve cells have accumulated around protein).

Treatment

There is no cure for AD. The goals of treatment are:

- Slow the progression of the disease (although this is difficult to do)
- Manage symptoms, such as behavior problems, confusion, and sleep problems
- Change your home environment so you can better perform daily activities
- Support family members and other caregivers

DRUG TREATMENT

Medicines are used to help slow down the rate at which symptoms become worse. The benefit from these drugs is usually small. You and your family may not notice much of a change.

Before using these medicines, ask the doctor or nurse:

- What are the potential side effects? Is the medicine worth the risk?
- When is the best time, if any, to use these medicines?

Medicines for AD include:

- [Donepezil](#) (Aricept), [rivastigmine](#) (Exelon), and [galantamine](#) (Razadyne, formerly called Reminyl). Side effects include stomach upset, diarrhea, vomiting, muscle cramps, and fatigue.
- [Memantine](#) (Namenda). Possible side effects include agitation or anxiety.

Other medicines may be needed to control aggressive, agitated, or dangerous behaviors. Examples include [haloperidol](#), [risperidone](#), and [quetiapine](#). These are usually given in very low doses due to the risk of side effects including an increased risk of death.

It may be necessary to stop any medications that make confusion worse. Such medicines may include painkillers, [cimetidine](#), central nervous system depressants, antihistamines, sleeping pills, and others. Never change or stop taking any medicines without first talking to your doctor.

SUPPLEMENTS

Some people believe certain vitamins and herbs may help prevent or slowdown AD.

- There is no strong evidence that Folate (vitamin B6), vitamin B12, and vitamin E prevent AD or slows the disease once it occurs.
- High-quality studies have not shown that ginkgo biloba lowers the chance of developing dementia. DO NOT use ginkgo if you take blood-thinning medications like [warfarin](#) (Coumadin) or a class of antidepressants called monoamine oxidase inhibitors (MAOIs).

If you are considering any drugs or supplements, you should talk to your doctor first. Remember that herbs and supplements available over the counter are NOT regulated by the FDA.

Support Groups

For additional information and resources for people with Alzheimer's disease and their caregivers, see [Alzheimer's disease support groups](#).

Expectations (prognosis)

How quickly AD gets worse is different for each person. If AD develops quickly, it is more likely to worsen quickly.

Patients with AD often die earlier than normal, although a patient may live anywhere from 3 - 20 years after diagnosis.

The final phase of the disease may last from a few months to several years. During that time, the patient becomes totally disabled. Death usually occurs from an infection or organ failure.

Complications

- Abuse by an over-stressed caregiver
- Bedsores
- Loss of muscle function that makes you unable to move your joints
- Infection, such as urinary tract infection and pneumonia
- Other complications related to immobility
- Falls and broken bones
- Harmful or violent behavior toward self or others
- Loss of ability to function or care for self
- Loss of ability to interact
- Malnutrition and dehydration

Calling your health care provider

Call your health care provider if someone close to you has symptoms of dementia.

Call your health care provider if a person with AD has sudden change in mental status. A rapid change may be a sign of another illness.

Talk to your health care provider if you are caring for a person with AD and you can no longer care for the person in your home.

Prevention

Although there is no proven way to prevent AD, there are some practices that may be worth incorporating into your daily routine, particularly if you have a family history of dementia. Talk to your doctor about any of these approaches, especially those that involve taking a medication or supplement.

- Consume a low-fat diet.
- Eat cold-water fish (like tuna, salmon, and mackerel) rich in omega-3 fatty acids, at least 2 to 3 times per week.
- Reduce your intake of linoleic acid found in margarine, butter, and dairy products.
- Increase antioxidants like carotenoids, vitamin E, and vitamin C by eating plenty of darkly colored fruits and vegetables.
- Maintain a normal blood pressure.
- Stay mentally and socially active throughout your life.
- Consider taking nonsteroidal anti-inflammatory drugs (NSAIDs) like [ibuprofen](#) (Advil, Motrin), [sulindac](#) (Clinoril), or [indomethacin](#) (Indocin). Statin drugs, a class of medications normally used for high cholesterol, may help lower your risk of AD. Talk to your doctor about the pros and cons of using these medications for prevention.

In addition, early testing of a vaccine against AD is underway.

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<http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0001767/>

67. Now, a Simple Blood Test to detect Lung and Breast Cancer

Last Updated: Thursday, September 27, 2012

Washington: Scientists claimed to have developed a simple blood test that can accurately detect the beginning stages of breast and lung cancer in just an hour.

Researchers from the Kansas State University developed the test that can detect cancer even before symptoms like coughing and weight loss start.

The test works by detecting increased enzyme activity in the body. Iron nanoparticles coated with amino acids and a dye are introduced to small amounts of blood or urine from a patient.

The amino acids and dye interact with enzymes in the patient's urine or blood sample. Each type of cancer produces a specific enzyme pattern, or signature, that can be identified by doctors.

"These enzyme patterns can also help distinguish between cancer and an infection or other diseases that commonly occur in the human body," researcher Stefan Bossmann said.

"For example, a person who smokes a lot of cigars may develop an inflammation in their lungs. That will drive up some of the markers in the test but not all of them. Doctors will be able to see whether there was too much smoke inhalation or if there is something more serious going on," he said in a statement.

Once the test is administered, comprehensive results - which include enzyme patterns - are produced in roughly 60 minutes.

The researchers have designed a second testing method that is anticipated to produce the same results in about five minutes.

In addition to early detection, the team said the test can be tweaked to monitor cancer. For example, patients being treated with drugs can be observed for drug effectiveness.

Similarly, doctors can use the dye in the test to determine if the entirety of a tumour has been

successfully removed from a patient after surgery.

Researchers evaluated the test's accuracy on 32 separate participants in various stages of breast or lung cancer. Data was collected from 20 people with breast cancer - ranging in age from 36 to 81 years old - and 12 people with lung cancer - ranging in age from 27 to 63 years old.

Twelve people without cancer were also tested as a control group. This group ranged in age from 26 to 62 years old.

A blood sample from each participant was tested three times. Analysis of the data showed a 95 per cent success rate in detecting cancer in participants, including those with breast cancer in stages 0 and 1 and those with lung cancer in stages 1 and 2.

PTI

http://zeenews.india.com/news/health/diseases/now-a-simple-blood-test-to-detect-lung-and-breast-cancer_18993.html

68. Gut Bacteria can indicate Risk of Developing Diabetes

Last Updated: Thursday, September 27, 2012

London: A new research has shown that the composition of a person's intestinal bacteria could play an important role in the development of type 2 diabetes.

The 1.5 kilograms of bacteria that we each carry in our intestines have an enormous impact on our health and well being. The bacteria normally live in a sensitive equilibrium but if this equilibrium is disrupted our health could suffer, researchers said.

"We have demonstrated that people with type 2 diabetes have a high level of pathogens in their intestines," said professor Jun Wang from the University of Copenhagen's Department of Biology and Novo Nordisk Foundation Center for Basic Metabolic Research.

In the new study, scientists examined the intestinal bacteria of 345 people from China, of which 171 had type 2 diabetes.

The team managed to identify clear biological indicators that someday could be used in methods that provide faster and earlier diagnosis of type 2 diabetes.

The research also demonstrated that people with type 2 diabetes have a more hostile bacterial environment in their intestines, which can increase resistance to different medicines.

Similar studies carried out on sufferers of type 2 diabetes in Denmark also discovered a significant imbalance in the function of their intestinal bacteria and composition. Future Danish studies will examine whether intestinal bacteria is already abnormal in people that are deemed to be at risk of developing diabetes.

"We are going to transplant gut bacteria from people that suffer from type 2 diabetes into mice and examine whether the mice then develop diabetes," said another of the lead scientists behind the project, Professor Oluf Borbye Pedersen from the University of Copenhagen and centre director at LuCamp, the Lundbeck Foundation Centre for Applied Medical Genomics in Personalised Disease Prediction, Prevention and Care.

By working together, a team of scientists from the University of Copenhagen and the Beijing Genomics

Institute (BGI) was able to make to several breakthroughs in the field of ‘metagenomics’.

Scientists working on the EU research project MetaHIT have uncovered more than 3.3 million genes from gut bacteria found in people from Spain and Denmark. These genes could play a key role in understanding and treating a range of serious illnesses.

According to Professor Karsten Kristiansen from the University of Copenhagen’s Department of Biology, the recent discovery is an important step in the comprehensive international research that is currently underway to investigate the interplay between intestinal bacteria and health.

“The European and Chinese working on the MetaHIT project were able to make important new discoveries about the relationship between intestinal bacteria and health. The new discovery indicates a possible connection between type 2 diabetes and the intestinal bacteria in Chinese people,” Kristiansen said.

“It is important to point out that our discovery demonstrates a correlation. The big question now is whether the changes in gut bacteria can affect the development of type 2 diabetes or whether the changes simply reflect that the person is suffering from type 2 diabetes,” the researcher added.

Wang’s research was recently published in the scientific journal Nature.

ANI

http://zeenews.india.com/news/health/diseases/gut-bacteria-can-indicate-risk-of-developing-diabetes_18992.html

69. Smoking Linked with Early Pancreatic Cancer

Last Updated: Monday, October 01, 2012

Washington: Those who smoke and drink heavily may develop pancreatic cancer at an earlier age than those who don’t, according to a new US study.

Researchers from the University of Michigan Health System found that heavy smokers with pancreatic cancer were diagnosed around 62 years and heavy drinkers at age 61 - almost a decade earlier than the average age of 72.

Smoking is a strong risk factor for pancreatic cancer and alcohol has been shown to cause oxidative damage to the pancreas, which sets the stage for the inflammatory pathways that can lead to cancer, the American Journal of Gastroenterology reports.

The finding is based on study of 811 pancreatic cancer patients only indicate these habits can lead to developing pancreatic cancer earlier in life. The study does make a step toward understanding at what age screening for pancreatic cancer should begin - once widespread screening is available, according to a Michigan statement.

"As screening programmes are developed, an understanding of how personal features influence the age of presentation will be important to optimize the timing of those screenings," says gastroenterologist Michelle Anderson, assistant professor of internal medicine at Michigan who led the study.

Detecting pancreatic cancer early is difficult and contributes to the poor survival rates. By the time

pancreatic cancer is diagnosed, it is frequently at an advanced stage and has spread to other organs.

Currently there are no tests available to easily find it in people who do not have symptoms. In the study, heavy smokers were defined as those who had more than a pack per day, and heavy drinking was measured at more than 39 grams a day, or about three average drinks per day.

IANS

http://zeenews.india.com/news/health/diseases/smoking-linked-with-early-pancreatic-cancer_19027.html

70. Only two in 100 aware of Aphasia

Last Updated: Monday, October 01, 2012

Toronto: Only two of 100 people are aware of aphasia - a condition characterised either by partial or total loss of speech or the capacity to write. It affects a third of stroke victims, a Canadian study says.

Aphasia occurs when there is stroke damage to language and communication centres in the brain. It does not affect intelligence but can leave people unable to express themselves, find their words and respond when spoken to.

Thirty community volunteers trained by the York-Durham Aphasia Centre, a March of Dimes Canada programme, collaborated with researchers from two Ontario universities in a survey of 832 adults in southern Ontario.

They found that only two percent of respondents could correctly identify aphasia as a communication disorder affecting the ability to speak, understand, read or write, according to a statement of York-Durham Aphasia Centre.

"Aphasia is poorly understood," says neurologist Michael Hill, co-chairman of the Canadian Stroke Congress. "The sudden loss of language after a stroke creates huge challenges for individuals and their families." As many as 100,000 Canadians are living with chronic aphasia.

"About one third of all people who have strokes experience some degree of aphasia but despite this high prevalence, it just doesn't get much attention," says Rick Berry, project coordinator, who worked with clinical coordinator and speech-language pathologist Ruth Patterson on the survey.

"We wanted to gather some Canadian data to compare with surveys that have been done in other countries," adds Berry.

These findings were presented at the Canadian Stroke Congress.

IANS

http://zeenews.india.com/news/health/diseases/only-two-in-100-aware-of-aphasia_19028.html

71. Chronic Diseases haunt Indians over 50

TNN | Oct 01, 2012,

NEW DELHI: This should serve as a wake-up call for India's 50 plus club, [who](#) face a serious risk for chronic diseases. A prevalence of risk factors study by the [World Health Organization](#) (WHO) conducted this year among males and females aged 50 or older across six countries, including India, has some worrying findings for Indians.

According to the [Study on Global Ageing an Adult Health](#) (SAGE), 87.9% men and 93.5% women in this age group have insufficient nutrition intake, while 24% men and 26% women have low physical activity.

Around one in four men and equal number of women suffer from high blood pressure. Nearly 63% men and 30% women are daily smokers.

Almost three in four men aged 50 and above and over four in five women have high risk waist hip ratio or abdominal obesity that greatly increases cardiovascular disease risk.

Nearly 1.3% males in the age group above 50 are obese. The case is worse for Indian women since 3% of them obese, according to United Nations Population Fund's (UNFPA) report on "Ageing in the 21st century" to be released on Monday.

"Risk factors for chronic diseases (such as smoking) vary by country. For example, 63% of men over 50 in India smoke, compared with only 11% in Ghana. In China, 51% of women over 50 have high blood pressure, compared with 27% in India. The biggest underlying risk factor for chronic disease in older people is high blood pressure, which can explain 12 to 19% of the total burden of disease in developing countries," says the UN report. India has around 90 million elderly and the figure is expected to increase to 315 million constituting 20% of the total population by 2050.

What should further wake up the Indian 50 plus age group club is a separate Indian study that confirms a steep out-of-pocket expenditure to pay health bills.

The study has been conducted jointly by [UNFPA](#), Institute for Social and Economic Change (Bangalore), the Institute for Economic Growth (New Delhi) and the Tata Institute of Social Sciences (Mumbai) in seven states having a higher proportion of elderly population — Kerala, Tamil Nadu, Maharashtra, Orissa, West Bengal, Punjab and Himachal Pradesh.

Among those who were hospitalized (9%) in India, they spent 10 days of hospital admission on an average per episode and spent over Rs 8,800 on consultation, medicines and diagnostics.

In the case of out-patient treatment, the average expenditure was about Rs 1,230.

An elderly also spends Rs 500 every month towards medicines. Only 24% of the elderly go for general health check-ups spending about Rs 600 for each check-up.

Around 75% of the elderly live in rural areas of which over 48% are women and of this, 55% are widows. Nearly three out of five single older women are very poor and two out of three rural elderly are fully dependent. Additionally, there is an increasing proportion of elderly at 80+ ages and is more pronounced among women.

The report says, "The overwhelming burden of disease in older persons is from non-communicable diseases (NCDs). Ischaemic heart disease, stroke and chronic lung disease are the biggest killers. Visual

and hearing impairment, dementia and osteoarthritis are the main causes of disability. These diseases affect older persons in developing countries far more than in the developed world."

It adds, "Older people in developing countries lose five times as many years from chronic lung disease and twice as many from stroke as in developed countries. This disparity is even greater for the poorest countries compared with the richest. Older people in developing countries also carry almost three times the burden of visual impairment as those in the developed world."The study also found that about 65% of elderly suffer from a chronic ailment of which arthritis/rheumatism, hypertension, cataract and diabetes are most prevalent, in that order. About one-third of the elderly suffer from two or more chronic ailments simultaneously.

Morbidity levels tend to be higher among females across all age groups of elderly.

Babatunde Osotimehin, executive director of UNFPA, says, "With one in nine persons in the world aged 60 years or over, projected to increase to one in five by 2050, population ageing is a phenomenon that we can no longer ignore. Increasing longevity is one of humanity's greatest achievements. Indeed, population ageing is cause for celebration."

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<http://timesofindia.indiatimes.com/india/Chronic-diseases-haunt-Indians-over-50/articleshow/16619568.cms>

72. Screen-addicted Children may suffer Newest Mental Disorder

Sep 30, 2012

Melbourne: Children addicted to using electronic devices may suffer from "internet-use disorder", a newly discovered and serious mental illness, according to a new study.

Psychologists argue video game and internet addictions share the characteristics of other addicts, including emotional shutdown, lack of concentration and withdrawal symptoms if the gadgets are removed.

The formal inclusion of this new addiction in a worldwide psychiatric manual has been welcomed by Australian psychology professionals in response to a wave of "always-on" technology engulfing kids, the 'Sydney Morning Herald' reported.

"With kids, gaming is an obvious issue. But overall, technology use could be a potential problem", said Mike Kyrios, Professor of Psychology.

Other fallout can include devastating impacts for children and families as social interaction and even food are neglected in favour of the virtual worlds the children inhabit.

Australian experts contributed to the Australian Psychological Society's submission to the international manual, supporting the inclusion of an addiction focused on internet gaming.

The inclusion acknowledges risks posed by over-use of seemingly benign technologies, classifying internet-use disorder alongside other mental disorders that need further research before becoming a recognised mental illness that can be formally diagnosed.

Kyrios said once more research is invested in the disorder, it would allow health professionals to diagnose children with addictive behaviours from technology overuse and treat them appropriately, including strategies to change their obsessive over-reliance on being connected.

He said children with underlying obsessive compulsive disorders could be at risk from technology overuse.

<http://www.financialexpress.com/news/screenaddicted-children-may-suffer-newest-mental-disorder/1010013/>

73. Acid attacks: Now, 100% Medical cover, Rs 5 Lakh to Kin in Case of Death

Express news service
Sep 28, 2012

Chandigarh: The Haryana government recently amended the Relief and Rehabilitation of Women Acid Victims Scheme. Under the new amendment acid attack victims will now be fully re-imbursed for their medical treatment including plastic surgery at high-end specialised hospitals. Various private hospitals have been included in a list of approved hospitals where acid attack victims can now get their treatment. A sum of Rs 5 lakh will also be given to the legal heirs of the victims who succumb to their injuries.

The list of approved hospitals, which originally contained just PGIMS in Rohtak, PGIMER in Chandigarh and AIIMS in New Delhi, has now been extended to include a number of private hospitals.

“Escorts Hospital, Batra Hospital, Sir Ganga Ram Hospital, Indraprastha Apollo Hospital, Rajiv Gandhi Cancer Institute, Maharaja Aggarwal Hospital and Charitable Trust in New Delhi, Fortis Hospital in Mohali, Drishti Eye Hospital and Sake Hospital in Panchkula have been added to the list,” said the director general of Haryana’s Women and Child Development Department.

The Relief and Rehabilitation of Women Acid Victims Scheme was originally launched in May, 2011 to provide relief to girls and women residents of Haryana who had become victims of acid attack.

<http://www.financialexpress.com/news/acid-attacks-now-100-medical-cover-rs-5-lakh-to-kin-in-case-of-death/1009124/2>

74. Orthopaedic Study Conducted

Anuradha Mascarenhas
Oct 03, 2012

With the increasing number of accidents in Pune, the Sancheti Institute in collaboration with McMaster University, Canada, recently concluded a study to evaluate the characteristics and treatment of patients with fractures presenting to the emergency department across hospitals in India. Dr. Chetan Pradhan, Assistant medical director and head of the trauma department of the Sancheti institute has now been invited to the Orthopaedic Trauma Association Conference, to be held in Minneapolis, USA to deliver a lecture on the study. **“With over 1300 patients recruited, our research centre aimed at**

understanding the standard of medical care prevalent in our country with an emphasis in difference of outcomes between private and public sectors,” he said.

World Elders Day Observed

World Elders Day was observed recently and according to the report released on October 1 by UNFPA and HelpAge International on Ageing in the 21st Century, **by 2050 in India women over 60 years would exceed the number of elderly men by 18.4 million.** “The population of the elderly is increasing at 3.9 per cent as compared to 1.9 per cent of the total population. As per HelpAge's India study on Elder abuse, 31 per cent of the elderly interviewed reported facing abuse. The report has recommended the inclusion of the ageing and needs of the elderly in all national development policies,” a statement issued by HelpAge stated.

Skin and Hair Diagnosis

Dr Niteen Dhepe, of Skin City PG Institute spoke to media persons recently on the latest trends in hair transplantation and how diagnosis and treatment of all dermatological and trichology related problems is possible. Dhepe explained various methods such as Follicular Unit Hair Transplant (FUT) technology, Follicular Unit Extraction FUE and the Low laser therapy for hair transplant, how it is different, much easier and better and more economical on the pocket. Skin City Clinic was invited to the Mexico World Congress of Cosmetic Dermatology to speak on the long term results of laser hair removal in Indian skin.

Nirmal Bharat Yatra Announced

WASH United and Quicksand Design Studio announced the impending kickoff of the Nirmal Bharat Yatra (NBY). NBY is a toilet and hygiene mela that harnesses the passion for cricket, the glamour of Bollywood, the fun of interactive games towards creating a “masala” of positive excitement around the long-neglected issues of sanitation and hygiene across India. More specifically, the NBY raises awareness of and facilitates behaviour change around sanitation and handwashing with soap. In addition, it also tackles the persisting taboos around menstrual hygiene management (MHM) in India. Thorsten Kiefer, Executive Director of WASH United, says: “We have looked at the things Indians really are passionate and excited about and transposed them into a sanitation and hygiene context. What we are trying to do with the **Yatra is to make toilets and hygiene cool and sexy.**”

<http://www.financialexpress.com/news/orthopaedic-study-conducted/1011195/1>

75. Difficulty in Chewing Food Linked to Dementia Risk

Last Updated: October 05, 2012

Washington: Your chewing ability can determine your mental abilities, according to new research from Karolinska Institute.

The older people become the more likely it is that they risk deterioration of cognitive functions, such as memory, decision-making and problem solving.

Research indicates several possible contributors to these changes, with several studies demonstrating an association between not having teeth and loss of cognitive function and a higher risk of dementia.

One reason for this could be that few or no teeth makes chewing difficult, which leads to a reduction in the blood flow to the brain. However, to date there has been no direct investigation into the significance of chewing ability in a national representative sample of elderly people.

Now a team comprised of researchers from the Department of Odontology and the Aging Research Center (ARC) at Karolinska Institute and from Karlstad University have looked at tooth loss, chewing ability and cognitive function in a random nationwide sample of 557 people aged 77 or older.

They found that those who had difficulty chewing hard food such as apples had a significantly higher risk of developing cognitive impairments.

This correlation remained even when controlling for sex, age, education and mental health problems, variables that are often reported to impact on cognition. Whether chewing ability was sustained with natural teeth or dentures also had no bearing on the effect.

The results are published in the Journal of the American Geriatrics Society (JAGS).

ANI

http://zeenews.india.com/news/health/diseases/difficulty-in-chewing-food-linked-to-dementia-risk_19087.html

76. Brain Dead Girl gives New Lease of Life

Bindu Shajan Perappadan

Oct 05, 2012

“We realised our daughter would never return, so we decided to help others”

When 17-year-old Payal (name changed because her parents preferred not to reveal it) was declared brain dead on September 2, a day short of her 18th birthday, at a private hospital in the Capital, her parents made what they claim was the most difficult decision of their lives. “We decided to donate our child’s organs, and today we are proud to say that she has helped save the lives of three persons and helped restore sight to two others,” says Ajay Mathur, father of the deceased child.

The child had met with an accident on the outskirts of the Capital on August 23 and was admitted to BLK Super Specialty Hospital on August 25.

BLK Super Specialty Hospital Nephrology/Renal Transplant Services senior consultant and director Dr. Sunil Prakash says: “The patient was declared brain dead on September 2 and we harvested her organs including kidneys, liver and cornea. While one kidney was used for a patient in our hospital, a liver and kidney was used by Army Research & Referral Hospital, New Delhi, and her corneas were donated to the Centre for Sight.”

Speaking at a function organised by the hospital here on Thursday to felicitate the girl’s parents, Mr. Mathur said: “Donating her organs was an emotional decision for all of us. But we realised that our daughter was never going to return, so we decided to help others.”

Dr. Prakash said: “In India, thousands of patients die either for want of donors or because they had to wait for too long. **Recent data shows that as many as 1.25 lakh Indians died in road accidents last year but only less than 20,000 of them had donated their kidneys, liver, pancreas or heart for**

potential recipients. In India, nearly 14 people are involved in fatal accidents every hour. Of these, one brain dead person could save 7-8 lives, which can overcome the shortage and prevent illegal activities of organ use.”

<http://www.thehindu.com/news/cities/Delhi/brain-dead-girl-gives-new-lease-of-life/article3967746.ece>

77. Unhygienic Britons are World`s Worst Flu-spreaders

Last Updated: Friday, October 05, 2012

London: Britons take fewer basic hygiene precautions like washing hands and sneezing into a tissue against catching flu than people in other countries, a new international study has found.

The survey by Harvard School of Public Health showed that just one in five cavalier Brits tried to keep away from people with flu-like symptoms and fewer avoided shopping centres or sporting events during the flu season.

Researchers carried out surveys in the UK, the US, Argentina, Japan and Mexico soon after the 2009 H1N1 swine flu pandemic, the `Daily Mail` reported.

Around 900 people were asked how they had modified their behaviour when there was a risk of catching the virus. Britons consistently had the most careless attitude.

Flu expert Professor John Oxford, a virologist at the University of London, said the results were "terribly disappointing".

"We have a lot to learn about avoiding infection. One explanation is that we have become complacent because we think drugs will always be available but it`s very likely we will get a novel infection at some stage when it will be critical to do these basic things to stop us getting it," he said.

One in four Britons questioned said that when swine flu was sweeping the UK they covered their mouth or nose with a tissue more frequently when sneezing or coughing, or used their elbow or shoulder to catch a sneeze or cough.

This compared with 61 per cent of Americans, 77 per cent of Mexicans, 64 per cent of Argentinians and 48 per cent of Japanese.

Fifty-three per cent of Britons said they washed their hands more often, compared with 72 per cent of US citizens, 86 per cent of Mexicans, 72 per cent of Japanese and 89 per cent of Argentinians.

People from the UK were also the least willing to avoid hugging or kissing members of their family or friends during the pandemic.

Only 2 per cent of Britons said they followed this strategy, which was adopted by 46 per cent of Mexicans, 21 per cent of Americans and 19 per cent of Argentinians.

The question was not asked in Japan, where kissing is not the cultural norm.

Only one in five people in the UK tried to avoid being near someone with flu symptoms.

The study was published in The `Lancet` medical journal.

PTI

http://zeenews.india.com/news/health/diseases/unhygienic-britons-are-world-s-worst-flu-spreaders_19086.html

78. Contrary to Govt Claims, Leprosy on rise in Maharashtra

Last Updated: Saturday, October 06, 2012

Pune: Contrary to the official claims of elimination of leprosy in Maharashtra, the state is witnessing a constant increase in the number of fresh cases detected 2007 onwards.

"It was officially declared in 2005 that leprosy has been eradicated in Maharashtra. However, fresh cases are still being detected in the state," Sharadchandra Gokhale, founder president of the International Leprosy Union (ILU) claimed.

There is a further increase in the number of Multi-Bacillary cases with child population accounting for 12 per cent of total detected cases, he said.

The ILU, which is headquartered in the city, had in its search campaign conducted in 173 blocks in the state last year had detected as many as 2,515 fresh cases, Gokhale said, emphasizing the need for a door-to-door campaign to unearth fresh cases and timely treatment.

At present, the Annual New Case Detection Rate (ANCD) is 15.96 per cent per lakh population in Maharashtra, he said adding that the ILU had set up a human rights grievance cell in order to seek justice for the affected as the disease continued to be socially stigmatised.

"There is still no let-up in the stigma attached to the disease and discrimination against the leprosy-affected continues unabated," said Indranath Banerjee, an associate researcher attached to the ILU.

Of the 2,28,474 new leprosy cases detected in the world in 2010, the figure for India stood at 1,26,800, which accounts for 55.5 per cent, the data available with ILU shows.

"If the Union and state governments do not take serious note of this fact and initiate effective steps to eradicate leprosy, the problem would become more acute," Gokhale said.

To address the problems being faced by the Leprosy Affected Patients (LAP), the ILU has decided to constitute `LAP`s Human Rights Cell` to take their collective and individual grievances to the Human Rights Commission, he added.

Gokhale said the WHO has already alerted the Indian government on the situation concerning LAPs in the country, underlining a pressing need for conducting a fresh all-India survey to assess increase of fresh cases and its eradication.

PTI

http://zeenews.india.com/news/health/diseases/contrary-to-govt-claims-leprosy-on-rise-in-maharashtra_19096.html

79. 14 Novel Biomarkers for Type 2 Diabetes Identified

Last Updated: Friday, October 05, 2012

Washington: Researchers have identified 14 new biomarkers for type 2 diabetes, which can serve as basis for developing new methods of treatment and prevention of this metabolic disease.

The biomarkers can also be used to determine diabetes risk at a very early point in time. At the same time the markers enable insight into the complex mechanisms of this disease, which still have not been completely elucidated.

The researchers led by Anna Floegel of the German Institute of Human Nutrition (DIfE) and Tobias Pischon of the Max Delbrueck Center studied the blood of study participants from three different studies with respect to their metabolites (metabolomics).

The study was based on data and blood samples of the prospective EPIC-Potsdam study with more than 27,500 study participants, the Tuebingen family study and the KORA study. The study was conducted in collaboration with the German Center for Diabetes Research (DZD) and funded by the Federal Ministry of Education and Research (BMBF).

The aim of the current study was to identify metabolites in blood, which provide insight into the pathomechanisms of type 2 diabetes and in addition can be used as biomarkers to determine the disease risk.

To this end, the researchers studied a total of 4,000 blood samples. About 3,000 of these samples came from the EPIC-Potsdam study, nearly 900 samples from the KORA study in Augsburg and 76 from the study in Tuebingen.

At the time the blood sample was taken, none of the study participants suffered from type 2 diabetes. However, during the average follow-up time of seven years, 800 Potsdam study participants and 91 Augsburg participants were diagnosed with type 2 diabetes.

The 76 participants in the Tuebingen study were already classified at the beginning of the study as individuals at high risk for type 2 diabetes. At the time the blood sample was taken, however, they were still healthy.

Jerzy Adam ski and his team at the Institute of Experimental Genetics of Helmholtz Zentrum Muenchen analyzed the concentrations of 163 metabolites per blood sample. Fourteen of these metabolites exhibited a strong association with the development of type 2 diabetes.

“In addition to simple sugars, the 14 identified metabolites include various protein components and choline-containing phospholipids which play a role in the structure of cell membranes and in the transport of blood lipids,” said Anna Floegel, lead author of the study.

“Our findings particularly indicate a previously unknown role of phospholipids in type 2 diabetes development. This is a first clue which should definitely be pursued,” she added.

ANI

http://zeenews.india.com/news/health/diseases/14-novel-biomarkers-for-type-2-diabetes-identified_19085.html

80. Botox offers Effective Treatment for Urinary Urgency Incontinence

Last Updated: Friday, October 05, 2012

Washington: A new study has found that Botox (onabotulinum toxin-A) injections to the bladder are as effective as medication for treating urinary urgency incontinence in women, but the injection is twice as likely to completely resolve symptoms.

These findings were reported by a National Institutes of Health clinical trials network including Loyola University Chicago Stritch School of Medicine (SSOM).

Urgency incontinence is urinary incontinence with a strong or sudden need to urinate. Traditionally, this condition has been treated with drugs known as anticholinergics, which reduce bladder contractions by targeting the bladder muscle through the nervous system. However, many women who take anticholinergic medications experience side effects, including constipation, dry mouth and dry eyes.

“Prior to this study, we reserved onabotulinum toxin-A for women who did not respond to traditional oral medication. However, this research supports the use of either of these approaches as appropriate first-line treatment in women,” said Linda Brubaker, MD, MS, co-author and dean, SSOM.

Women are twice as likely to experience urinary incontinence as men.

This study evaluated 241 women with urinary urgency incontinence. One group of participants received six-months of daily oral medication plus a saline injection. The other group received one injection of onabotulinum toxin-A (Botox) plus a daily oral placebo capsule. At the beginning of the study, patients had an average of five urgency incontinence episodes a day.

The average reduction in episodes over six months was 3.4 with oral medication and 3.3 with onabotulinum toxin-A. The proportion of women with complete resolution of urgency incontinence was 13 percent with anticholinergics and 27 percent with onabotulinum toxin-A. Quality of life improved in both groups without significant differences.

More participants in the anticholinergic group reported dry mouth (46 percent versus 31 percent) while the onabotulinum toxin-A group had more urinary tract infections (28 percent versus 15 percent) and more incomplete bladder emptying, requiring temporary bladder catheterization (5 percent versus 0 percent).

“These results will help doctors weigh treatment options for women and make recommendations based on individual patient needs,” said Dr. Brubaker, who is in the Division of Female Pelvic and Reconstructive Surgery, Loyola University Health System.

These findings were published in the latest issue of The New England Journal of Medicine.

ANI

http://zeenews.india.com/news/health/diseases/botox-offers-effective-treatment-for-urinary-urgency-incontinence_19083.html

81. Violent Video Games make Teens More Aggressive towards Other People

London, Tue Oct 09 2012

Teenagers who play violent video games over a number of years tend to become more aggressive towards other people, according to a new long-term study.

Researchers said the study was the first to show a clear link between a sustained period of playing violent games and subsequent increases in hostile behaviour.

Girls who play violent computer games during their school years were found to be affected just as much as boys.

The research suggests that long-term players of violent games may become more likely to react aggressively to unintentional provocations such as someone accidentally bumping into them, they added.

The study involved 1,492 adolescents at eight high schools in Ontario, 51 per cent of who were female and 49 per cent male.

Surveys were carried out annually across four school years with the participants aged 14 or 15 at the start of the study and 17 or 18 at its conclusion.

The teenagers were asked a series of questions such as how often they pushed or shoved people and whether they frequently kick or punch people who make them angry.

Psychologists used this to give each individual a score for their aggression level at each point in time.

They were also asked whether they played action or fighting video games.

In the final two years of the study they were also asked how frequently they played such games, ranging from never to for five or more hours per day.

Analysis showed that teenagers who played violent video games over a number of years saw steeper rises in their aggression scores during the study.

Others who regularly played non-violent games did not show any evidence of increased aggression.

The trend remained even after taking into account other variables that could be linked to aggression such as gender, parental divorce and marijuana use.

The research team at Brock University in Canada said their results were "concerning" and wrote that violent games could "reinforce the notion that aggression is an effective and appropriate way to deal with conflict and anger".

"The current study is the first to demonstrate a relation between sustained violent video game play and the progression of aggressive behaviour," the Daily Mail quoted lead researcher Professor Teena Willoughby, as saying.

The study has been published in the journal *Developmental Psychology*.

<http://www.indianexpress.com/news/violent-video-games-make-teens-more-aggressive-towards-other-people/1014070/>

82. Depression, a Forced Silence Within

Vikram Patel; Oct 10-2012

The World Federation for Mental Health proposes that depression is a global crisis because it affects more than 300 million people around the world, that it is associated with profound social and economic consequences, and that despite the fact that it is "treatable" most people around the world do not receive these treatments. But there are many who question this evidence, with the most strident critique challenging the very notion of depression as a disorder in the first place and equating its application across cultures with psychiatric imperialism: one commentator has famously referred to the globalisation of the concept of depression as the "[Americanisation of mental illness](#)". (<http://www.nytimes.com/2010/01/10/magazine/10psyche-t.html?pagewanted=all>).

These dissenting voices argue that what constitutes depression is, in fact, a perfectly normal human response to adversity in one's life (for example, losing someone you love or your job), and that applying a medical label wrongly transforms this response into a sickness. Worse, applying such labels primarily furthers the pernicious agendas of the professional mental health sectors and its bed-fellows in the pharmaceutical industry. As Horwitz and Wakefield, two American mental health professionals argue, there is a real danger of the "[loss of sadness](#)" (<http://www.amazon.com/Loss-Sadness-Psychiatry-Transformed-Depressive/dp/0195313046>), an emotional experience which is as common as happiness, through the over-use and abuse of the diagnostic label of depression and antidepressant medicines.

What do we make of these contrasting views? Is depression a real disorder? Does it really occur in non-western settings? How do we distinguish despair from disorder?

There seems little doubt in my mind that depression, in particular at the severe end of the experience of this condition, is as real a disorder as diabetes is at the severe end of blood glucose levels. I could invoke the hundreds of studies carried out in scores of countries around the world which demonstrate not only that the core features of this condition can be identified in all cultures, but also that the condition is very common and disabling. I could invoke the fact that my own mother who grew up and lived her life in India, suffered from severe depression from which she made a full recovery with treatment. But I think the most compelling evidence to support the existence of this condition comes from the annals of the history of medical knowledge: indigenous systems of medicine from times immemorial, including our own in India, have described a syndrome akin to what we refer to as depression (albeit with different names and different explanations). Depression has existed as long as mankind itself, and certainly well before psychiatry, antidepressant medication or the nation of America itself came into being.

However, it is equally true that, we have a real problem is distinguishing depression as an illness from the despair of everyday life. Defining a disorder, at least from a clinical point of view, necessitates that we do identify such a dividing line. While the problem of defining the dividing line is also encountered in many other medical conditions such as hypertension (what is the exact dividing line between “normal” and “abnormal” blood pressure?), at least in those cases we can fall back on some objective indicator or measure (such as a blood pressure reading) to determine whether a person has the condition. In the absence of such an objective indicator of the disorder, psychiatry has defined a “case” on the basis of various characteristics of the self-reported experiences of depression (for example, their duration) and the impact of these experiences on social or occupational functioning. There is an obvious element of subjectivity and arbitrariness in making such distinctions and thus the inherent risk of mistaking despair for disorder, particularly at the milder end of the spectrum.

In the end, I do not think we will find the neat boundary between “normal sadness” and “clinical depression” if only because mood is an innate human characteristic, like weight or the length of our hair. However, to reject the very notion of depression as an illness on account of these difficulties is throwing the baby out with the bathwater. In my mind, depression is, like all non-communicable diseases, a physiologically expressed condition which is profoundly influenced by our social and cultural environments. Depression is a global crisis not only because it is common and universal, but because the vast majority of affected people suffer in silence or receive inappropriate care. We need to move firmly beyond the misinformed views that depression is a “psychiatric invention” to investing more on understanding its nature, finding more accurate ways of distinguishing when a person with the condition may benefit from medical care, and improving access to the full range of treatments (medicines and psychosocial) for such persons.

(Vikram Patel is director of the Centre for Global Mental Health at the London School of Hygiene & Tropical Medicine, director of the Center for Mental Health at the Public Health Foundation of India, and founder of the Goa-based NGO, Sangath.)

<http://www.thehindu.com/health/rx/depression-a-forced-silence-within/article3982210.ece>

83. Missing Just Two Hours of Sleep can erase Memories

Researchers have discovered that memories can be lost for ever if you don't get enough sleep, and missing even two hours of slumber can stop the brain from storing them.

Researchers from the University of Pennsylvania looked at how mice that were stopped from sleeping fared on a memory task.

The creatures were kept awake for varying amounts of time, to pinpoint just how little sleep had to be lost for their recall to be damaged, the Daily Mail reported.

"What we found is that when we deprived animals of sleep, that impaired storage of memories," researcher Ted Abel said.

"And most importantly we found out that a very short period of time would block memory consolidation, it was as short as three hours, which for mice is something like 20 per cent of their sleep over 24 hours," Abel said.

"In human terms, it would be the equivalent of dropping an eight-hour night of sleep to six hours, which is something we do all the time," Abel added.

It is thought that the replay of our memories while we are asleep is essential for their proper storage in the brain.

The study also suggested that there is a critical period after learning during in which memories are consolidated; meaning that loss of sleep at some points in time may be more damaging than at others.

Researchers added that any information lost due to lack of sleep is gone forever - meaning that sleeping longer the next night won't bring it back.

<http://www.indianexpress.com/news/missing-just-two-hours-of-sleep-can-erase-memories-study/1018029/>

84. Alzheimer's Disease

Symptoms, Stages and Coping with Alzheimer's Disease

Alzheimer's disease causes more worry for people over 55 than any other condition. Suspecting you or a loved one are exhibiting signs of Alzheimer's can be a stressful and emotional experience. Even if you find yourself forgetting things, it doesn't necessarily mean you have this disease. Even when you fear the worst, the earlier you seek help, the better your chances of getting the care you need and maximizing your quality of life.

What is Alzheimer's disease?

Alzheimer's disease is the most common form of *dementia*, a serious brain disorder that impacts daily living through memory loss and cognitive changes. Although not all memory loss indicates Alzheimer's disease, one in ten people over 65 years of age, and over half of those over 85 have Alzheimer's disease. Currently, 26 million people worldwide have this dementia, and over 15 million Americans will be affected by the year 2050.

Symptoms of Alzheimer's disease usually develop slowly and gradually worsen over time, progressing from mild forgetfulness to widespread brain impairment. Chemical and structural changes in the brain slowly destroy the ability to create, remember, learn, reason, and relate to others. As critical cells die, drastic personality loss occurs and body systems fail.

Who is at risk of Alzheimer's disease?

- **The primary risk factors of Alzheimer's are age, family history, and genetics.** However, there are other risk factors that you can influence. Maintaining a healthy heart and avoiding high blood pressure, heart disease, stroke, diabetes, and high cholesterol can decrease the risk of Alzheimer's. Watch your weight, avoid tobacco and excess alcohol, stay socially connected, and exercise both your body and mind.
- **Early-onset Alzheimer's** affects patients under the age of 65. This relatively rare condition is seen more often in patients whose parents or grandparents developed Alzheimer's disease at a young age, and is generally associated with three specific gene mutations (the APP gene found on chromosome 21, the PSI gene on chromosome 12, and the PS2 gene on chromosome 1).

Signs and symptoms of Alzheimer's disease

For many people, detecting the first signs of memory problems in themselves or a loved one brings an immediate fear of Alzheimer's disease. However, most people over 65 experience some level of forgetfulness. It is normal for age-related brain shrinkage to produce changes in processing speed, attention, and short term memory, creating so-called "*senior moments*." Forgetfulness is merely inconvenient, though, and generally involves unimportant information. Understanding the significance

of these age-related changes begins with knowing the difference between what is *normal* and what is an *early symptom of Alzheimer's*.

Signs Of Normal Change vs. Early Alzheimer's Symptoms

Normal	Early Alzheimer's Disease
Can't find your keys	Routinely place important items in odd places, such as keys in the fridge, wallet in the dishwasher
Search for casual names and words	Forget names of family members and common objects, or substitute words with inappropriate ones
Briefly forget conversation details	Frequently forget entire conversations
Feel the cold more	Dress regardless of the weather, wear several skirts on a warm day, or shorts in a snow storm
Can't find a recipe	Can't follow recipe directions
Forget to record a check	Can no longer manage checkbook, balance figures, solve problems, or think abstractly
Cancel a date with friends	Withdraw from usual interests and activities, sit in front of the TV for hours, sleep far more than usual
Make an occasional wrong turn	Get lost in familiar places, don't remember how you got there or how to get home
Feel occasionally sad	Experience rapid mood swings, from tears to rage, for no discernible reason

What else can cause Alzheimer's symptoms?

Significant cognitive and memory loss are **not** symptoms of normal aging. However, these symptoms do not always indicate Alzheimer's disease. Other conditions can also cause mental decline.

Symptoms that mimic early Alzheimer's disease may result from:

- **Central nervous system and other degenerative disorders**, including head injuries, brain tumors, stroke, epilepsy, Pick's Disease, Parkinson's disease, Huntington's disease.
- **Metabolic ailments, such as** hypothyroidism, hypoglycaemia, malnutrition, vitamin deficiencies, dehydration, kidney or liver failure.
- **Substance-induced conditions, such as** drug interactions, medication side-effects, alcohol and drug abuse.
- **Psychological factors, such as** dementia syndrome, depression, emotional trauma, chronic stress, psychosis, chronic sleep deprivation, delirium.
- **Infections, such as** meningitis, encephalitis, and syphilis.

Diagnosing Alzheimer's disease

Since there is no single definitive medical test for identifying Alzheimer's disease, arriving at the correct diagnosis can take time and patience. The most important step is to assess past and present functioning. Determining classic patterns can not only help your doctor eliminate other causes of Alzheimer's symptoms, but also distinguish Alzheimer's from other forms of dementia. Your doctor will gather family history information, order medical tests, and estimate your memory loss using a variety of assessments. To diagnose Alzheimer's disease from your symptoms, a doctor will look for:

- **Significant memory problems** in immediate recall, short-term, or long-term memory.
- **Significant thinking deficits** in at least one of four areas: expressing or comprehending language; identifying familiar objects through the senses; poor coordination, gait, or muscle function; and the executive functions of planning, ordering, and making judgments.
- **Decline severe enough** to interfere with relationships and/or work performance.

- **Symptoms that appear gradually** and become steadily worse over time.
- **Other causes to be ruled out – to ensure** memory and cognitive symptoms are not the result of another medical condition or disease, such as Mild Cognitive Impairment.

How is Mild Cognitive Impairment different from Alzheimer's?

Recent research examining Mild Cognitive Impairment (MCI) reveals biological changes identical to those seen in an Alzheimer's brain. Considered by some to be an intermediate stage between normal aging and the onset of Alzheimer's disease, MCI is characterized by persistent forgetfulness, but lacks many of the more debilitating symptoms of Alzheimer's disease.

MCI often precedes the early stages of Alzheimer's. In other cases, patients plateau at a relatively milder stage of decline, and are able to live independently with little help from others. Understanding how these conditions progress to dramatically different outcomes continues to be a source of scrutiny and study.

Stages of Alzheimer's disease

If you or a loved one is dealing with a diagnosis of Alzheimer's, your doctor may have provided information on stages in the diagnosis. These stages can provide general guidelines for understanding the progression of Alzheimer's symptoms and planning appropriate care. However, it is important to remember that each individual with Alzheimer's progresses differently. Cognitive, physical, and functional phases often overlap, the time in each stage varies widely from patient to patient, and not everyone experiences all Alzheimer's symptoms. Your doctor or local support groups can often provide firsthand information about the different Alzheimer's stages and tips on handling them.

The three stage Alzheimer's disease model

- **Stage 1 - Mild/Early (lasts 2-4 yrs)** - Frequent recent memory loss, particularly of recent conversations and events. Repeated questions, some problems expressing and understanding language. Mild coordination problems: writing and using objects becomes difficult. Depression and apathy can occur, accompanied by mood swings. Need reminders for daily activities, and may have difficulty driving.
 - **Stage 2 - Moderate/Middle (lasts 2-10 yrs)** - Can no longer cover up problems. Pervasive and persistent memory loss, including forgetfulness about personal history and inability to recognize friends and family. Rambling speech, unusual reasoning, and confusion about current events, time, and place. More likely to become lost in familiar settings, experience sleep disturbances, and changes in mood and behavior, which can be aggravated by stress and change. May experience delusions, aggression, and uninhibited behavior. Mobility and coordination is affected by slowness, rigidity, and tremors. Need structure, reminders, and assistance with the activities of daily living.
 - **Stage 3 - Severe/Late (lasts 1-3+ yrs)** - Confused about past and present. Loss of ability to remember, communicate, or process information. Generally incapacitated with severe to total loss of verbal skills. Unable to care for self. Falls possible and immobility likely. Problems with swallowing, incontinence, and illness. Extreme problems with mood, behavior, hallucinations, and delirium. In this stage, the person will need round the clock intensive support and care.

Sample seven stage model of Alzheimer's disease

In addition to the three stages of Alzheimer's, your doctor may also use a diagnostic framework with five, six, or seven levels. Progression through these stages usually lasts from 8 to 10 years, but can sometimes stretch out as long as 20 years.

The seven stage Global Deterioration Scale, also known as the Reisberg Scale, includes the following dimensions:

- **Stage 1 – No impairment.** Memory and cognitive abilities appear normal.
- **Stage 2 – Minimal Impairment/Normal Forgetfulness.** Memory lapses and changes in thinking are rarely detected by friends, family, or medical personnel, especially as about half of all people over 65 begin noticing problems in concentration and word recall.
- **Stage 3 – Early Confusional/Mild Cognitive Impairment.** While subtle difficulties begin to impact function, the person may consciously or subconsciously try to cover up his or her problems. Expect to experience difficulty with retrieving words, planning, organization, misplacing objects, and forgetting recent learning, which can affect life at home and work. Depression and other changes in mood can also occur. Duration: 2 to 7 years.
- **Stage 4 – Late Confusional/Mild Alzheimer's.** Problems handling finances result from mathematical challenges. Recent events and conversations are increasingly forgotten, although most people in this stage still know themselves and their family. Experience problems carrying out sequential tasks, including cooking, driving, ordering food at restaurants, and shopping. Often withdraw from social situations, become defensive, and deny problems. Accurate diagnosis of Alzheimer's disease is possible at this stage. Lasts roughly 2 years.
- **Stage 5 – Early Dementia/Moderate Alzheimer's disease.** Decline is more severe and requires assistance. No longer able to manage independently or unable to recall personal history details and contact information. Frequently disoriented regarding place and or time. People in this stage experience a severe decline in numerical abilities and judgment skills, which can leave them vulnerable to scams and at risk from safety issues. Basic daily living tasks like feeding and dressing require increased supervision. Duration: an average of 1.5 years.
- **Stage 6 – Middle Dementia/Moderately Severe Alzheimer's disease.** Total lack of awareness of present events and inability to accurately remember the past. People in this stage progressively lose the ability to take care of daily living activities like dressing, toileting, and eating but are still able to respond to nonverbal stimuli, and communicate pleasure and pain via behavior. Agitation and hallucinations often show up in the late afternoon or evening. Dramatic personality changes such as wandering or suspicion of family members are common. Many can't remember close family members, but know they are familiar. Lasts approximately 2.5 years.
- **Stage 7 – Late or Severe Dementia and Failure to Thrive.** In this final stage, speech becomes severely limited, as well as the ability to walk or sit. Total support around the clock is needed for all functions of daily living and care. Duration is impacted by quality of care and average length is 1 to 2.5 years.

Coping with an Alzheimer's diagnosis

An Alzheimer's diagnosis is an enormous adjustment for both you and your loved ones. For many, the secrets to navigating this journey are learning, supporting, and loving. While there is currently no cure for Alzheimer's disease, there are treatments available for the symptoms. These treatments cannot prevent Alzheimer's from progressing but if symptoms are diagnosed early enough, they can be effective in delaying the onset of more debilitating symptoms. Early diagnosis can prolong independence and is the first step towards treatment, management, and living life fully.

If your symptoms have been diagnosed as Alzheimer's

You may not know what to think if you've been diagnosed with Alzheimer's. You may be furious that you have to deal with this, scared about what the future will bring, uncertain about how your memory will change- or all of these emotions at once. These feelings are all normal.

- **Give yourself some time to adjust.** As with any major change in life, don't expect that you will smoothly snap into this new transition. You may feel alright for a while, and then suddenly feel stressed and overwhelmed again. Take time to adjust to this new transition.
- **Reach out for support.** Living with Alzheimer's is not easy, but there is help in this journey. The more you reach out to others and get support, the more you will be able to cope with Alzheimer's symptoms while continuing to enrich and find meaning in your life.

- **Make your wishes known.** While it's not easy to think about, getting your finances in order and figuring out how you want your healthcare handled gives you power over your future. Talk with your family and loved ones and let them know what is important to you. Who do you trust to make decisions for you when you are no longer able to do so?

If a loved one's symptoms have been diagnosed as Alzheimer's

If a family member or loved one has been diagnosed with Alzheimer's, you will also be dealing with a host of emotions. You may be grieving for your loved one, especially if significant memory loss is already present. You may feel like you no longer know this person, as new behaviors and moods develop that are unlike the person you remember. You may start to become overwhelmed with the needs of your loved one, or even resentful that other family members won't help enough.

- **Learn as much as you can.** Understanding what to expect will help you plan for care and transitions. Knowledge will help you both honor a loved one's strengths and capabilities throughout each stage, and make sure you have the strength and resources to carry on.
- **Don't take on the caregiving journey alone.** No matter how dedicated you are, at some point you will need some help in caregiving. No one can be awake and alert 24 hours a day. You have your own health and other obligations to consider. Having support in caregiving is key, whether it be from other family, in-home help, respite care, or making the decision to move your loved one to an assisted living or nursing home.

http://www.helpguide.org/elder/alzheimers_disease_symptoms_stages.htm

85. Vigorous Exercise can heal Heart, says Study

Nov 5, 2012

A new study says that regular and vigorous exercise can activate dormant stem cells in the heart which heal the damage caused by a heart attack. The study by Liverpool John Moores University is the first to suggest that a simple exercise programme has an effect similar to that of the stem cells, when they are cajoled into producing new tissues through special shots.

Strenuous exercises include 30 minutes of running or cycling daily, enough to work up a sweat, the European Heart Journal reports. A study on healthy rats showed that an equivalent amount of exercise resulted in producing more than 60 percent of heart stem cells, usually dormant in adults, becoming active, the Telegraph reports. After two weeks of exercise the mice had a seven percent increase in the number of cardiomyocytes, the 'beating' cells in heart tissue.

The John Moores team said they would now study the effects on mice which had suffered heart attacks to determine whether it could have an even greater benefit. 'The exercise is increasing the growth factors which are activating the stem cells to go on and repair the heart, and this is the first time that this potential has been shown,' said Georgina Ellison, from the John Moores University, who led the study. 'We hope it might be even more effective in damaged hearts because you have got more reason to replace the large amount of cells that are lost,' Ellison added.

Although some patients with severe heart damage may not be capable of intensive exercise, Ellison said a significant number would easily be able to jog or cycle for 30 minutes a day without risking their health.

Jeremy Pearson, professor and associate medical director of the British Heart Foundation, which funded the research, said: 'However, much more research is now needed to find out whether what's been seen in this study can be translated into treatments for human patients.'

Source: IANS

<http://health.india.com/news/vigorous-exercise-can-heal-heart-says-study/>

86. Donated Stem Cells may work Best for Heart Patients

Nov 5, 2012

(Reuters) - Stem cells culled from the bone marrow of healthy donors work as well or even better as cells harvested from patients themselves as a treatment for damaged hearts and are more convenient to use, according to new research.

The 13-month trial was the first to compare the safety and effectiveness of so-called mesenchymal, or bone marrow-derived, stem cells taken from patients themselves versus those provided by donors.

Such adult stem cells that renew themselves and mature into specific cell types have been used for 40 years in bone marrow transplants.

Scientists are now exploring their use as treatments for ailments such as heart disease and inflammatory conditions, some of the biggest markets in medicine.

The rationale behind using patients' own stem cells to treat disease is that they do not trigger an attack by the body's immune system. Mesenchymal stem cells, however, are also not recognized as foreign tissue.

Researchers from the University of Miami Miller School of Medicine, funded by the National Institutes of Health, found that previously prepared cells from a healthy donor were comparatively safe and may offer the most convenience since it takes up to eight weeks to grow the amount of stem cells needed for the treatment.

The study involved 30 patients whose hearts were damaged by an earlier heart attack. Half received heart-muscle injections of their own cells, while the other half received donor cells.

Scar tissue was reduced by 33 percent in both groups, a result researchers called "very, very significant."

Improvements in heart function were seen in 28 percent of those receiving donor cells, and in 50 percent of patients receiving their own cells.

After a year, five patients in the donor cell group and eight who received their own cells suffered serious adverse events.

"The trials so far have very small patient numbers," said Stefanie Dimmeler, director of the Institute of Cardiovascular Regeneration Center of Molecular Medicine at Johann Wolfgang Goethe University in Frankfurt, [Germany](#). "I think this early work in cardiac stem cells look very promising."

The trial results were presented here at the annual scientific meeting of the American Heart Association and published in the Journal of the American Medical Association.

Companies working to develop off-the-shelf stem cell treatments include Celgene Corp, Pluristem Therapeutics Inc, Athersys Inc and Mesoblast Ltd.

(Editing by Bernard Orr)

<http://www.reuters.com/article/2012/11/06/us-heart-stemcells-idUSBRE8A501Y20121106>

87. Vitamin D Deficiency in Teens a Serious Problem

The writer has posted comments on this article IANS | Nov 7, 2012,

Does your teenage daughter often complain of backache and joint pain? Is your college-going cousin always lethargic? [Vitamin D deficiency](#) among youngsters, which causes such problems, is becoming common these days and is a growing health concern, doctors say.

Vikas Ahluwalia, senior consultant of Internal [Medicine](#) at [Max Super Specialty hospital](#), said that vitamin D deficiency among young people has increased over the last couple of years, especially in metros like Delhi.

"We have observed a rising number of cases of young people coming with complaints like backache, leg pain, joint pain and lethargy, which relate to vitamin D and vitamin D3 deficiency. It's a cause of concern," Ahluwalia said.

The trend is mostly seen in metros, like Delhi, he added.

"What is even more worrying is that children as young as 16, who are in the growing stage of their life, are coming with such problems," Ahluwalia said.

Paediatrician Anju Virmani of the [Indraprastha Apollo hospital](#) agreed.

"Vitamin D deficiency is becoming very common these days, and it's affecting different sets of population. Among kids too it is becoming common," Virmani said.

"Scientific studies show that vitamin D deficiency is increasing in each decade. So the deficiency in the population between 2000 and 2010 was more than the previous decade. And the urban population is more affected than its rural counterpart," she added.

The root cause of the problem is lifestyle-related, doctors say.

"It starts right at the beginning - when a woman is pregnant. If she is low on vitamin D, so will the child be. If there is not enough breastfeeding, the child will have this and all sorts of other problems when he or she grows older," Virmani said.

Young office goers, in their twenties and early thirties, who mostly have desk jobs and work in air-conditioned offices, also come with similar complaints.

"I remember one patient who came to us with a fracture. She was married for just six months and we were concerned if it had to do with domestic abuse. But after two days, her other leg too had a fracture, removing our doubts, because it meant that her [bones](#) were very brittle because of vitamin D deficiency," she added.

Exposure to sunlight is the biggest source of vitamin D - something that we consciously avoid under various pretexts.

"We are a nation obsessed with fair skin although we are naturally blessed with more melanin which is meant to protect, unlike our Western counterparts who also have higher incidence of skin cancer. So people here put lots and lots of [sunscreen](#) and sit behind tinted glasses that blocks UV rays. This is not always healthy," said Ashu Agarwal, consultant in internal medicine at a private hospital in Delhi.

Pollution too blocks the sun's rays, she added.

"Children these days hardly play outside. They are running from school to tuitions and then when they play, it's mostly video games in their rooms. So there is not enough exposure to sunlight," Ahluwalia said.

"Also, the common trend in all the kids with vitamin D deficiency is that they don't take milk or milk products. So where do you get your calcium? Fast food has added to the problem. The normal range of vitamin D is 30 (nanogrammes per millilitre of blood) and at times we get children with 3-4; so that's how severe the problem can get," he added.

Virmani advises parents not to encourage their children, especially their young daughters who are more conscious about their weight, to have low fat milk. "It hardly does any good and doesn't slim you down," Virmani said.

"The good thing is that tests for vitamin D are easily available and more reliable nowadays, so you can keep a check on it by maintaining a healthy lifestyle and ensure that your children do too. Ultimately your health is in your hands," Agarwal said.

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/Vitamin-D-deficiency-in-teens-a-serious-problem/articleshow/17127849.cms>

88. Pregnant Women beware

London, Mon Nov 12 2012

Cell phone radiation exposure during pregnancy impacts foetal brain development and may cause hyperactivity, researchers say.

Yale School of Medicine researcher, Dr Hugh Taylor co-authored the latest study to probe the impact of cell phone exposure on pregnancies.

"We had pregnant mice in cages and we just simply put a cell phone on top of the cage. In half the mice, the cell phone was active and in half of the ... cages the cell phone was turned off so it wasn't transmitting a signal at all," Taylor said.

Researchers allowed the mice to give birth and waited until offspring were young adults before behaviours were tested, the 'Daily Mail' reported.

"The mice exposed to cell phones were more active. Their memory was slightly decreased ... these mice were basically bouncing off the walls and didn't have a care in the world," Taylor said.

The study shows there is a "biological basis" to suggest cell phone exposure can impact pregnancies, said Taylor.

Patients should be cautious with devices and recommends pregnant women hold phones away from their body, he said.

According to recent numbers published by the UN telecom agency, the world now has almost as many cell phone subscriptions as inhabitants, the report said.

The World Health Organisation's cancer arm, in 2011, said cell phones could cause cancer and called for more research, it said.

<http://www.indianexpress.com/news/pregnant-women-beware-/1030385/>

89. Quarter of World's Pneumonia Child Deaths in India

The writer has posted comments on this article TNN | Nov 13, 2012

KANPUR: Doctors of [the Academy](#) of Paediatrics advised locals to take extra care of their kids in the prevailing weather conditions and keep pneumonia at bay. They were speaking at a press conference on Pneumonia Day here on Monday and emphasised strengthening immunity and resistance to fight the killer disease.

Commenting on pneumonia deaths among young children in India, president of the academy Dr Rashmi Kapoor informed that the disease globally killed an estimated 1.4 million children below the age of five years every year-more than AIDS, [malaria](#) and [tuberculosis](#) together did. It is alarming that India accounts for almost 25 per cent of the world's pneumonia deaths of children.

"Pneumonia accounts for 20 per cent deaths among children below 5 years of age becoming the leading cause of death in the age group. According to the IAP records, annually, India witnesses 45 million pneumonia cases among children below 5 years of which 0.37 million die due to pneumonia," added Dr Kapoor.

The experts also stressed the government should take serious steps towards introduction of [pneumococcal conjugate vaccine](#) (PCV) which immunises children against pneumonia and other diseases caused by streptococcus pneumoniae.

They also stressed creation of a clean environment, addressing the issue of malnutrition and breast feeding for the first 6 months, timely immunisation and appropriate healthcare during delivery to reduce significantly mortality rates due to vaccine preventable diseases like pneumonia.

"Try to take extra precautions for kids under the 5 years of age with the onset of winters. Consult doctor immediately in case of prolonged cough, cold or fever," said Dr Saurabh Dwivedi, another paediatrics.

<http://timesofindia.indiatimes.com/city/kanpur/Quarter-of-worlds-pneumonia-child-deaths-in-India/articleshow/17205149.cms>

90. Screen Children too for Diabetes

IANS | Nov 14, 2012

If you are under the impression that diabetes is an old man's disease, you are wrong. More and more [children](#) are falling prey to this lifestyle disease and doctors say it is best to screen children too.

The theme of this year's [World Diabetes Day](#), being observed Wednesday, is: "Protect Our Future".

"There has been an increase in the number of patients coming to clinics for diabetes screening in the last decade. The number of young people falling prey to the disease is also increasing," said I.P.S. Kochar, paediatric and adolescent endocrinologist and diabetologist at Fortis Hospital here.

Type I diabetes, which is not lifestyle-induced, is more common among children. Doctors say the issue of concern, however, is the rising cases of Type II diabetes, which occurs due to lifestyle disorders.

"Type I diabetes is when the pancreas doesn't create insulin, and that is what mostly affects children. But these days, we are also seeing Type II diabetes, which is when insulin is secreted but fails to work. This type is lifestyle-induced," [Jean Claude](#) Mbanya, president of the International Diabetes Federation (IDF), said.

According to IDF, there are over 61 million patients of diabetes in India.

The [Juvenile](#) Diabetes Research Foundation (JDRF) says there are about a million children with Type I diabetes in India.

Mbanya blamed sedentary lifestyle for it.

"Our children are becoming obese. The prevalence of diabetes is on the increase because of increasing weight and lack of activity," he said.

Wondering how children could be encouraged to be more active, the IDF president said: "Where are the playgrounds? How do we motivate our children to lead a healthy lifestyle?"

Kochar said there was an average increase of one to four percent in the incidence of Type I diabetes and four to six percent in the case of [Type II diabetes](#) over the past decade.

Listing symptoms, Kochar said: "If the child is drinking too much [water](#), urinating more frequently than he used to, has gained weight, or feels hungry more frequently, it is a warning [sign](#)."

Archana Dayal Arya, consultant endocrinologist and diabetologist at Sir Ganga Ram Hospital recommends regular screening after the age of ten.

"Parents need to watch that children are not [overweight](#). After the age of 10, regular screening should be done, especially if symptoms are noticed," she said.

According to A.K. Jhingan, chairperson of the Delhi Diabetes Research Centre, the disease is more common among children in metros than in rural areas.

"Children in urban centres, specially in a metropolis like Delhi, are more prone to diabetes, as the lifestyle is flawed and physical activity sometimes nil," he said.

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/Screen-children-too-for-diabetes/articleshow/17214751.cms>

91. Exercise to Control Diabetes

The writer has posted comments on this article By Renita Tisha Pinto Renita Tisha Pinto, Health Me Up | Nov 19, 2012

"Exercise is the best thing to control your glucose level," says Dr. Sunita Pathania - Sr. Registered Dietician and [Diabetes](#) Educator, Healthy Living Diet [Clinic](#), Mumbai. She adds, "Exercise is beneficial for most people with diabetes; regular [activity](#) is important for overall fitness, weight management and blood sugar control."

However, **before beginning any [exercise](#) program, it is important to consult your doctor.** Exercise is the most beneficial when the blood glucose is below 200 mg/dL. Regular exercise is more beneficial than sporadic exercise and best done 60 to 90 minutes after [eating](#).

With exercise, those with diabetes can improve control, and those at risk for Type 2 diabetes can reduce that risk. Being active can also help enhance [weight loss](#), help control blood fat levels (cholesterol and triglycerides) and blood pressure, as well as reduce stress. If the patient is already active, he/she can increase the intensity or frequency after discussing with his/her doctor or health care provider.

If the patient is not currently active, a safe activity plan can be discussed and agreed upon. Start by taking small steps: Walk the dog, take the kids to the park, ride a bicycle to work, get down from the bus a stop earlier and walk to your [destination](#), climb stairs etc. Everything counts! But don't stop there. [Physical](#) activity is good, but it cannot replace the benefits of actual exercise.

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/Exercise-to-control-diabetes/articleshow/17277411.cms>

92. Spurt in Diabetes Cases tied to Obesity, Poor Diet

Jaya Shroff Bhalla, Hindustan Times
New Delhi, November 15, 2012

Samaira Khan, 32, developed diabetes when she was only 27 years old. "I used to weigh 90kg. While genes were partially responsible, it was my love for eating good food that caused the real problem," she said. Khan, who is an engineer with a multi-national firm, said she had a difficult time coping with diabetes. "I could not come to terms with the fact that I had to completely do away with sugar. The first time I was diagnosed, my sugar levels were over 400 mg/dL (normally, the levels should be less than 110 mg/dL).

Kaushambi-resident Mridula K Verma, 24, who has had Type 1 diabetes since she was four years old, says she has learnt how to hand her sugar levels. "At school, my sugar levels would fluctuate and I had to be careful when I was on insulin injections," she says. "Pumps have made diabetes management easy," Mridula adds.

Rising Numbers

One in every five patients at any general clinic has diabetes. “Poor eating habits, obesity and lack of physical exercise are triggering the rise in the number of young diabetic cases,” says Vikas Ahluwalia, senior consultant, internal medicine, Max Super Speciality Hospital, Saket.

Researchers have now identified a gene called myostatin, which leads Indians to have more body fat and low muscle mass, factors important for genesis of diabetes, lipid disorders and heart diseases.

“In this study, we clearly show that there is a genetic basis of not only low muscle but also more fat in Indians,” said Dr Surya Prakash Bhatt, co-investigator of the study and researcher at AIIMS. The study was published online in Journal Plos One (USA).

Rent-a-pump, Mom

One in 10 pregnant women develops diabetes in their second trimester. In the past six months, a pilot project at Indraprastha Apollo Hospitals has treated diabetic pregnant patients with excellent maternal and foetal outcomes using insulin pumps.

“Considering its high cost (Rs 2 lakh) and the fact that the pump is usually required only transiently during pregnancy, we are letting out insulin pumps,” said Dr SK Wangnoo, senior consultant endocrinologist and diabetologist, Apollo Hospitals.

“We have enrolled about 12 patients so far, of who about three have delivered successfully. The usual insulin shots involve multiple needle pricks along with a risk of sugar fluctuation, which is not good for the mother or the baby,” he said. Insulin pumps provide continuous insulin delivery and also display blood sugar levels every five minutes.

Curing Diabetes Foot

Fortis hospital has introduced Hyperbaric Oxygen Therapy (HBOT) at Fortis C-DOC Diabetes & Allied Disorders Hospital for treating diabetic foot and wounds. “HBOT is the administration of 100% oxygen to a patient in a pressurised environment. The combination of pressure and oxygen increases the number of oxygen molecules that are dissolved in the blood plasma, which is then delivered to the tissues,” Dr Ashok Damir, head, Advanced Centre for Diabetic Foot & Wound Management, Fortis C-DOC.

Size Wise

Your weight or having a wide girth puts you at risk of diabetes.

While Body Mass Index (BMI) under 23 indicates healthy weight, you must make sure your abs are as flat as possible.

<http://www.hindustantimes.com/India-news/NewDelhi/Spurt-in-diabetes-cases-tied-to-obesity-poor-diet/Article1-959341.aspx>

93. Smoking killed 100 Million in 100 Years

New Delhi, Sun Nov 25 2012

Nearly 45 trillion bidis and cigarettes manufactured over the past 100 years in the country are expected to be responsible for nearly 100 million deaths of adult Indians, a recent study has found.

"Our calculations are derived from using the most conservative estimates and yet present mortality estimates which are significant and alarming," researchers Pranay G Lal, Nevin C Wilson and Prakash C Gupta said in a study published in Current Science.

While Lal and Wilson are associated with the South-east Asia office of the International Union Against Tuberculosis and Lung Disease, Gupta is with the Healis-Sekhsaria Institute for Public Health, Navi Mumbai.

The study concluded that of the estimated 100 million deaths due to tobacco use, smoking bidis alone contribute to 77 million deaths.

The researchers have pressed for an urgent review of tobacco control interventions and re-examination of policies that promote the tobacco industry in India.

They said since it takes three to four decades for a smoker to die after he starts smoking, the current tobacco use was expected cause deaths only in the coming decades.

"For consumption in the last four decades, the mortality may be partially realised and some of the deaths will occur in near future", they said.

"Since the bulk of manufacturing and consumption occurred in the latter part of the last century, the early deaths of these smokers will happen in the first half of this century."

The study has estimated that there were about 190 million and 41 million lifetime bidi and cigarette smokers, respectively, in the country from 1910-2010.

"So in effect, if we were to cease all production and consumption in 2010, deaths would continue to take place. Less than one-fourth of the deaths from 100 year of smoking (from 1910-2010) have already taken place, and the three-fourths of the deaths will take place in the next 40 years", the study said.

The researchers have reviewed 23 data sources including industry reports, trade and academic journals, paid internet databases, repositories and reports prepared by market research firms from 1920 to arrive at the estimated number of cigarettes manufactured over the last 100 years.

To derive total bidis produced, they used total bidi tobacco produced in India using data from the Ministry of Agriculture and divided it by the average tobacco contained in each bidi. These estimates were compared with 14 other sources.

<http://www.indianexpress.com/news/smoking-killed-100-million-in-100-years/1036155/>

94. Infertility rises at Alarming Pace in India

English.news.cn 2010-07-16

By Sharmistha Dey

MUMBAI, July 16 (Xinhua) -- Indian newspaper headlines frequently report about rising inflation, especially food inflation, and how it is affecting India's population.

Health wise, the country is doing no better. As if rising rate of public health challenges such as diabetes, hypertension (high blood pressure) and heart disease were not enough, statistics reveal more and more couples in India are finding it difficult to procreate.

Medical case studies, anecdotal evidence as well as the rising number of infertility clinics in urban areas of the country are pointing to the fact that infertility is becoming a health challenge in the country.

According to a report conducted by the International Institute of Population Sciences, infertility is growing at an alarming pace, especially in the cities.

Out of around 250 million individuals estimated to be attempting parenthood at any given time, 13 to 19 million couples are likely to be infertile.

Although the national census does not head count infertile couples, this study, which takes into account the national census reports of the past three decades, viz, 2001, 1991 and 1981, showed that infertility has risen by 50 percent in the country.

The report said that in India, 13 percent of ever-married women aged 15-49 years were childless in 1981 (rural 13.4 percent and urban 11.3 percent) which increased to 16 percent in 2001 (rural 15.6 percent and urban 16.1 percent). Over half of married women aged 15-19 years were childless in 1981, which increased to 70 percent in 2001.

Nearly 30 million couples in the country suffer from infertility, making the incidence rate 10 percent. Earlier childlessness in a couple used to be talked about in hushed tones, with the problem, without doubt, being attributed to the women.

Today, infertility is no longer recognized as only a female problem. In fact, the term infertility is a broad term, often loosely used. It actually refers to a range of disorders some of which affect the male, and some the female, and contribute to childlessness in a couple.

There is also something called unexplained infertility, where doctors fail to come up with a medical explanation for the couple's inability to conceive.

Study reports suggested that male infertility is almost as high as female infertility. One in every five

healthy young men between the age from 18 to 25 suffer from abnormal sperm count.

In every 100 couples, 40 percent of the males suffer from infertility compared to 50 percent women. In the remaining 5 percent, the causes are common to both men and women.

Some common causes of infertility in men are irregular sperm production, hampered sperm delivery due to either erectile dysfunction or early ejaculation, presence of medical conditions such as obesity that may hamper sperm production, certain infections such as Sexually Transmitted Diseases (STDs), and lifestyle conditions such as diet imbalance, addiction to smoking or alcoholism, sedentary existence, or mental and emotional stress, all of which contribute to poor sperm count.

In women, hectic lifestyle and job stress contribute to conception problems. A very common cause is polycystic ovary disease (PCOD), a condition characterized by excess production of hormones and lack of ovulation.

There are others as well such as genital tuberculosis (a chief factor in rural India) fallopian tube defects, endometriosis, a condition characterized by abnormal growth in the woman's reproductive system, multiple partners and STDs that may permanently destroy the woman's reproductive system, obesity, use of certain medication, and smoking and alcohol consumption.

Another factor, noted Dr. Anita Soni, gynaecologist and obstetrician, Hiranandani Hospital Mumbai, is the declining libido among couples living in cities. "Busy and stressful lifestyles are reasons behind the drop in libido and regular sexual activity among couples," she said, adding "stress levels are very high among city populace; combine that with poor eating habits and increase in medical conditions such as diabetes and you find the key to lack of quality and quantity of sperms and eggs. Vices such as smoking, tobacco consumption, drinking, obesity and hormonal imbalances such as polycystic ovaries and hypothyroidism are also responsible for this."

There is also delayed marriage and deferred childbirth among couples; by the time the new-age, career-oriented urban Indian woman is ready to have a child, her biological clock has already slowed down, and she needs the help of artificial and assisted technology for childbirth.

Couples walking into infertility clinics and asking about assisted methods of reproduction is common these days unlike in the past. This explains the rising number of infertility clinics in metros and urban parts of the country and long queues outside them.

The IVF industry, in fact, reportedly has a year-on-year growth of 20 to 30 percent with around 40,000 IVF cycles done every year.

Advanced fertility treatments include IVF or in vitro fertilization, in which case the eggs are removed from the woman's ovaries and fertilized with sperms in a fluid medium before transferring it to the woman's uterus; IUI or intrauterine insemination, which is a treatment used to increase the number of sperms reaching the fallopian tubes, therefore increasing the chance of fertilization.

There is also ICSI or intracytoplasmic sperm injection, in which case, a single sperm is injected into a single egg in order to achieve fertilization -- more often used in case of male infertility.

"With advances in technology, the success rate of artificial reproductive technology has steadily increased in the past few years; today the success rate with all of these are around 35 to 40 percent," said Dr. Soni.

Not every couple, however, can afford these treatments. While IUI may cost 3,000 to 15,000 rupees (60 to 300 U.S. dollars) approximately, one cycle of IVF may cost anywhere between 50,000 to 150,000 (1,000 to 3,000 U.S. dollars).

In case of ICSI, the price is even higher -- from 80,000 to 150, 000 rupees (1,600 to 3,000 U.S. dollars).

None of these guarantee 100 percent success; there is evidence of many unlucky couples who continue to do the rounds of clinics and spend their money on these methods, in their quest to have a child.

As the number of childless couples continues to increase in the country, so will other ancillary problems such as more and more medicalized forms of procreation and social evils such as illegal adoption.

Editor: Zhang Xiang

http://news.xinhuanet.com/english2010/world/2010-07/16/c_111963155.htm

95. Eating More Fish may cut Young Women's Heart Disease Risk

English.news.cn 2011-12-06

WASHINGTON, Dec. 5 (Xinhua) -- Young women may reduce their risk of developing cardiovascular disease simply by eating more fish rich in omega-3 fatty acids, researchers reported Monday in *Hypertension: Journal of the American Heart Association*.

In the first population-based study in Danish women of childbearing age, those who rarely or never ate fish had 50 percent more cardiovascular problems over eight years than those who ate fish regularly. Compared to women who ate fish high in omega-3 weekly, the risk was 90 percent higher for those who rarely or never ate fish.

About 49,000 women, 15-49 years old, median age of just under 30 years in early pregnancy -- were interviewed by telephone or answered food frequency questionnaires about how much, what types and how often they ate fish, as well as lifestyle and family history questions.

Researchers recorded 577 cardiovascular events during the eight- year period, including five cardiovascular deaths in women without any prior diagnosis of the disease. In all, 328 events were due to hypertensive disease, 146 from cerebrovascular disease, and 103 from ischemic heart disease. Inpatient and outpatient admission for cardiovascular disease was much more common among women who reported eating little or no fish. In three different assessments over a 30-week period, women who never ate fish had a three-fold higher disease risk compared to women who ate fish every week.

"To our knowledge this is the first study of this size to focus exclusively on women of childbearing age," said Marin Strom, lead researcher and post doctoral fellow at the Center for Fetal Programming, at Statens Serum Institute in Copenhagen, Denmark. "We saw a strong association with cardiovascular disease in the women who were still in their late 30's."

Fish oil contains long chain omega-3 polyunsaturated fatty acids, which are believed to protect against heart and vascular disease. Few women in the study took fish oil supplements, so these were excluded

from the analyses and the results were based on the dietary intake of omega-3 fatty acids, not intake from supplements.

The most common fish consumed by women in the study were cod, salmon, herring, and mackerel.

"Our study shows that for younger women, eating fish is very important for overall health, and even though we found cardio-protective effects at relatively modest dietary levels, higher levels may yield additional benefits," Strom said.

http://news.xinhuanet.com/english2010/health/2011-12/06/c_122380118.htm

96. Taking Vitamin D may reduce the Risk of Alzheimer's Disease

By Leon Watson

PUBLISHED: 3 December 2012

Women should take Vitamin D supplements to reduce the risk of Alzheimer's disease, according to new research.

Two new studies show that women who don't have enough Vitamin D as they hit middle age are at greater risk of going into mental decline and developing Alzheimer's.

The first of the studies found that women who developed Alzheimer's disease had lower vitamin D intakes than those who did not develop the illness.

Dr Cedric Annweiler, of Angers University Hospital in France, looked at data from nearly 500 women who participated in the Toulouse cohort of the Epidemiology of Osteoporosis study.

He found that women who developed Alzheimer's had an average vitamin D intake of 50.3 micrograms a week, whereas those who developed other forms of dementia had an average of 63.6 micrograms per week, and those who didn't develop dementia at all averaged 59 micrograms.

The study highlights the role vitamin D plays in Alzheimer's, a severe form of dementia which causes the sufferer to become disorientated, aggressive, and forgetful and find even quite basic tasks difficult to carry out.

There is no cure for the illness, which affects around 400,000 people in England - a figure which is steadily rising as people live for longer.

Meanwhile, investigators led by Yelena Slinin at the VA Medical Centre in the United States found that women with a low vitamin D intake were more likely to encounter cognitive decline.

Ms Slinin analysed the vitamin levels of 6,257 older women who also underwent mental ability tests known as the mini-mental state examination.

Low levels of vitamin D of less than 20 nanograms per milliliter of blood serum were associated with higher odds of mental decline.

Scientists say both studies, which were published in The Journals of Gerontology, underline the importance of getting enough vitamin D, either through exposure to the sun, food or supplements.

<http://www.dailymail.co.uk/news/article-2242107/Taking-Vitamin-D-reduce-risk-Alzheimers-disease.html?ito=feeds-newsxml>

97. Chlorine in Tap Water Linked to increase in Number of People Developing Food Allergies

By Nick Mcdermott

PUBLISHED: 3 December 2012

Chlorine in tap water has been linked to the rising number of people developing food allergies, a study has revealed.

The chemical, which is used to treat drinking water and is also present in commonly-available pesticides and household items, may weaken food tolerance in some individuals.

Researchers found adults with high levels of dichlorophenol – a chemical by-product of chlorine – in their urine, were up to 80 per cent more likely to have a food allergy.

Britain has seen a rise in food allergies in recent years, with up to ten million adults claiming to be unable to eat a variety of foods from milk to mustard – although scientists believe the figure may be exaggerated by the ‘worried well’.

Studies also estimate that four per cent of children have a food allergy. A rising number are diagnosed with gut allergies linked to common foods such as cow’s milk, wheat, soya, eggs, celery, kiwi fruit and other fruit and vegetables.

Food allergy can take the form of a sudden life-threatening reaction known as anaphylaxis, as well as eczema or an itchy rash. Much of the water supply in Britain is chlorinated to kill germs, although experts say it is at much lower levels than in the US.

They point out that, for British households at least; certain common household products are more likely to be sources of dichlorophenol than tap water.

Professor Jeni Colbourne, the chief inspector of drinking water, said strict regulations in the UK meant dichlorophenol is unlikely to be found in household taps.

She said its likeliest source for British consumers were household products impregnated with triclosan, commonly used in lipsticks, face washes, toothpaste and kitchen utensils. An anti-bacterial, it can break down to form dichlorophenol.

In a study of 2,211 American adults with the chemical in their urine, 411 were found to have a food allergy, while 1,016 had an environmental allergy.

The research, published in journal of the American College of Allergy, Asthma and Immunology, concluded: ‘Excessive use of dichlorophenols may contribute to the increasing incidence of food allergies in Westernised societies.

‘This chemical is commonly found in pesticides and consumer insect and weed control products, as well as tap water.’

Lead author Dr Elina Jerschow added: ‘Previous studies have shown that both food allergies and environmental pollution are increasing in the United States.

‘Our study suggests these two trends might be linked, and that increased use of pesticides and other chemicals is associated with a higher prevalence of food allergies.’

Professor Colbourne insisted: ‘Currently in the UK consumer, exposure to dichlorophenol via tap water is considered to be minimal.

‘In the US generally chlorination is known to be less well controlled and relatively high doses of chlorine are used, so it would be reasonable to consider the risk of exposure to be generally higher.

‘In the UK exposure is more likely to come from other, non-tap water sources.’

<http://www.dailymail.co.uk/health/article-2242094/Chlorine-tap-water-linked-increase-number-people-developing-food-allergies.html>

98. Fish Oil heals Bed Sores Too

IANS | Dec 5, 2012

Fish oil promotes healing in bed sores of critically ill patients, too, says an Israeli research.

Bed sores result from constant [pressure](#) on the skin and underlying tissue due to prolonged sitting or lying down by such patients.

Painful and prone to infection, these sores need to be healed, says Pierre Singer, professor at the [Tel Aviv University's Sackler Faculty of Medicine](#).

With doctoral candidate Miriam Theilla at the Rabin Medical Centre, Singer designed a randomized experiment to test the impact of dietary [fish oil](#) supplements on bed sores, the British Journal of Nutrition and the American Journal of Critical Care reported.

After a three week period of adding eight grams of fish oil to their patients' daily diet, researchers found not only a significant easing of pain and discomfort from bed sores - a 20 to 25 percent improvement, according to the Pressure Ulcer Scale for Healing - but also a more efficient immune system and a reduction to [inflammation](#) throughout the body.

Inspired by the results of a previous study showing that dietary fish oil supplements also raised oxygen levels in body tissues, Singer and fellow researchers sought to determine whether the supplement could also help heal bed sores, which are also formed by a lack of oxygen, reduced blood flow, and skin wetness, according to a Tel Aviv statement.

To test this [theory](#), the researchers developed a randomized study with 40 critically ill patients. Half the patients were given standard hospital diets, and the rest had a daily addition of eight grams of fish oil added in their food, said a university statement.

After a three-week period, the patients in the fish oil group had an average of 20 to 25 percent improvement in the healing of their bed sores compared to the control group.

Fish oil, chock-full of Omega-3 [fattyacids](#) and anti-oxidants, can also help lower blood pressure, reduce inflammation in the skin and [joints](#), and promote healthy foetal development.

99. Top 20 Health Benefits of Fish Oil

Comments on this article By Renita Tisha Pinto, Nov 22, 2012

Fish oil will never disappoint health conscious folks. Not only is it loaded with essential fatty acids that benefit heart health, it also improves mental disorders like depression, bipolar disorder and schizophrenia.

Good sources of fish oil are mackerel, sardines, swordfish, oysters, salmon, and tunas. Here are 20 important health benefits of fish oil that everyone should know.

Cardiovascular Disease

Fish oil helps in preventing cardiovascular diseases.

Fish oil not only helps in lowering triglycerides, hardening of the arteries and cholesterol, but also prevents certain heart rhythm abnormalities.

Cancer Prevention

Fish oil has proved effective against three common forms of cancer - breast, colon and prostate.

Omega 3 helps in maintaining normal healthy cells from mutating into cancerous tumours and restrain unwanted cellular growth.

Normalize Cholesterol

One of the main benefits of fish oil is that it helps in regulating cholesterol levels.

The presence of EPA (eicosapentaenoic acid) and DPA (docosahexaenoic acid) found in most high quality fish oil supplements helps in regulating cholesterol.

Go slim; with fish oil

Fish consumption can be used to cure hypertension and obesity.

A study in Australia has discovered that a weight-loss diet which includes a regular amount of fish can be quite effective.

Treatment of Arthritis

Fish oil helps in treating arthritis. Prolonged use of the oil can be effective in reducing and preventing arthritis pain.

The relief, will not be immediate, and may take days, weeks or even months to show results.

Eye Health

Omega-3 offers protection against macular degeneration (AMD) of the eye and also reduces the risk of dry eye syndrome.

Mental Disorders

Fish oil helps in reducing the risk of Alzheimer's disease, dementia, and schizophrenia.

Skin and Hair Health

Omega 3 helps lock moisture into skin cells, produces collagen, alleviates skin blemishes, and gives one a youthful look.

The protein content in fish oil helps in hair growth and maintaining strong, healthy hair.

High Blood Pressure

Omega-3 possesses anti inflammation and anti-coagulant properties, which help in lowering blood pressure.

Blood is pushed more proficiently throughout the body hence there is less pressure exerted on the heart.

Asthma

Fish oil is very effective for respiratory problems like asthma. It helps in reducing asthma attacks and to breathe more easily.

AIDS

Research conducted by the Nutritional Sciences Program in Lexington proved that fish oil helps in the treatment of AIDS, as it helps in reducing triglycerides levels

Nails

Fish oil can also be used in cosmetic enhancement, as high intakes of fish oil can help improve the texture and quality of nails

Health Bones

Omega-3s found in fish oil helps in regulating the balance of minerals in bone and surrounding tissue.

Depression

People suffering from depression have lower levels of EPA. Hence, fish oil is beneficial for those suffering with depression.

Happy Pregnancy

Fish oil is good for pregnant women as the DHA present in it helps in the development of the baby's eyes and brain.

It helps to avoid premature births, low weight at birth, and miscarriage.

Anti-inflammation

Fish is effective in reducing inflammation in blood and tissues.

Fish oil is effective in treating gastrointestinal disorders, short bowel syndrome and chronic inflammatory diseases.

Brain and Nervous System

Fish oil also helps in improving memory, reasoning and focus.

It improves blood flow and may even affect hormones and the immune system, eventually affecting brain function.

Protects against Type 2 Diabetes

A study has found that fish oil can prevent inflammation in fat cells which can lead to insulin resistance and, ultimately, type 2 diabetes.

Acne

Fish oil is effective for acne as well, because of its EPA properties, which influence the formation of sebum in hair follicle.

Improves your Mood

In addition to decreasing depression, fish oil has been shown to improve mood swings.

Read more Personal Health, Diet & Fitness stories on www.healthmeup.com

<http://timesofindia.indiatimes.com/life-style/health-fitness/diet/Top-20-health-benefits-of-fish-oil/articleshow/16248086.cms>

100. Why Women are more prone to Arthritis

ANI | Nov 24, 2012

New genetic clues piecing together the arthritis puzzle of why more [women](#) succumb to the condition than men have been found by University of [Manchester](#) researchers, bringing potential treatments closer to reality.

[Rheumatoid arthritis](#) - which affects about 1 per cent of the world's population - is a complicated disease: [lifestyle](#) and environmental factors, such as [smoking](#), diet, [pregnancy](#) and infection are thought to play a role, but it is also known that a person's genetic makeup influences their [susceptibility](#) to the condition.

Scientists at the Arthritis Research UK Epidemiology Unit at The University of Manchester have discovered 14 new genes that can lead to rheumatoid arthritis, adding to the 32 other genes they had already identified; the team believes it has now discovered the vast majority of disease-causing genes for the condition.

The Manchester researchers' latest study has identified genes specific to the female X-chromosome - which could explain why three times more women than men present with the disease.

"This work will have a great impact on the clinical treatment of arthritis; we have already found three genes that are targets for [drugs](#), leaving a further 43 genes with the potential for drug development, helping the third of patients who fail to respond well to current medications," first author Dr Stephen Eyre said.

"Although patients who first present at [clinic](#) have similar symptoms, it is likely that their route to developing [disease](#) has involved a varied path. The genetic findings can help divide patients into smaller groups with more similar types of rheumatoid arthritis and assist in the allocation of therapies and disease management."

The Manchester team used advanced technology and a large collection of international samples to identify the new genes.

Professor Jane Worthington, study lead based at the NIHR Manchester Musculoskeletal Biomedical Research Unit, said: "This groundbreaking study brought together scientists from around the world and involved the use of DNA samples from more than 27,000 patients with rheumatoid arthritis and healthy controls. As a result of our findings, we now know that genetic [variations](#) at over 45 regions of the genome determine susceptibility to this form of arthritis.

"We observed remarkable similarities with genetic markers associated with other autoimmune diseases.

Our future work will focus on understanding how the simple genetic changes alter normal biological processes and lead to disease. Ultimately, this will help us to develop novel therapies and improved targeting of existing drugs," she added.

The study has been published in the journal *Nature Genetics*.

<http://timesofindia.indiatimes.com/life-style/health-fitness/health/Why-women-are-more-prone-to-arthritis/articleshow/17243409.cms>