



DAILY NEWS BULLETIN

LEADING HEALTH, POPULATION AND FAMILY WELFARE STORIES OF THE DAY
Friday 20190329

Artificial intelligence

Artificial intelligence may predict premature death risk'(The Tribune: 20190329)

<https://www.tribuneindia.com/news/health/-artificial-intelligence-may-predict-premature-death-risk/749688.html>

Scientists have developed and tested an artificial intelligence (AI)-based computer system to predict the risk of early death due to chronic diseases in a large middle-aged population.

The system of computer-based 'machine learning' algorithms was very accurate in its predictions and performed better than the current standard approach to prediction developed by human experts, according to the study published in the journal PLOS ONE.

Researchers at the University of Nottingham in the UK used health data from over half a million people aged between 40 and 69 recruited to the UK Biobank between 2006 and 2010 and followed up until 2016.

"Most applications focus on a single disease area but predicting death due to several different disease outcomes is highly complex, especially given environmental and individual factors that may affect them," said Stephen Weng, Assistant Professor at the University of Nottingham.

"We have taken a major step forward in this field by developing a unique and holistic approach to predicting a person's risk of premature death by machine-learning," Weng said in a statement.

"This uses computers to build new risk prediction models that take into account a wide range of demographic, biometric, clinical and lifestyle factors for each individual assessed, even their dietary consumption of fruit, vegetables and meat per day," he said.

The AI machine learning models used in the new study are known as 'random forest' and 'deep learning'.

These were pitched against the traditionally-used 'Cox regression' prediction model based on age and gender -- found to be the least accurate at predicting mortality -- and also a multivariate Cox model, which worked better but tended to over-predict risk.

"There is currently intense interest in the potential to use 'AI' or 'machine-learning' to better predict health outcomes," said Professor Joe Kai, one of the clinical academics working on the project.

"In some situations we may find it helps, in others it may not. In this particular case, we have shown that with careful tuning, these algorithms can usefully improve prediction," Kai said.
PTI

Artificial intelligence (The Asian Age: 20190329)

<http://onlinepaper.asianage.com/article/detailpage.aspx?id=12712192>

'Artificial intelligence may predict premature death'

London: Scientists have developed and tested an artificial intelligence (AI)-based computer system to predict the risk of early death due to chronic diseases in a large middle-aged population.

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Child Marriage (The Asian Age: 20190329)

<http://onlinepaper.asianage.com/articledetailpage.aspx?id=12712087>



Thailand's Mahasarakham University's Korin Khamrith conducts a Thai folk dance workshop in Guwahati on Thursday.

— PTI

Tripura's dubious distinction: 2nd in nation in child marriage

Agartala, March 28: Tripura occupies the second position in India in terms of child marriages among girls between 15-19 years of age, an international study has found.

Over 80 per cent of total child marriages in the state take place in rural areas of three districts, said the report.

"Tripura occupies the second position with respect to highest prevalence of child marriage among girls aged 15-19 years at 21.6 per cent which is significantly higher than the national average of 11.9 per cent," said Young Lives — an international study on childhood poverty, quoting data from the National Family Health Survey (NFHS).

The study is a collaborative research project coor-

▶ The report also said 52% of the surveyed girls were found to have conceived pregnancy at least once

inated by a team based at the University of Oxford.

Young Lives India coordinator Suntala Khan said the study found four districts of Tripura in the list of top 100 districts of the country which have the highest prevalence of child marriages.

Khan addressed a workshop on "Development of multi-spectral action plan to child marriage and teenage pregnancy in Tripura" here.

The Young Lives report, prepared on NFHS-4 (2015-16) data, said Dhalai district had 24.7 per cent

prevalence of child marriages, which was the highest in the state. Other affected districts are South Tripura, North Tripura and West Tripura.

The report also said 52 per cent of the surveyed girls were found to have conceived pregnancy at least once.

"Analysis of number of children born to teenage mothers reveals that 52 per cent of married teenage girls have given birth to one child, 5.5 per cent had 2 children and one per cent had more than 2 children by the tender age of 19," the report said.

Tripura Commission for Protection of Child Rights chairperson Nilima Ghosh said child marriage rate is increasing at an alarming rate in the state.

— PTI

Liver Injuries ((The Asian Age: 20190329)

<http://onlinepaper.asianage.com/articledetailpage.aspx?id=12708442>

Unsupervised use of certain drugs and supplements can cause liver damage and is known to be one of the leading causes of acute liver failure

DRUG-INDUCED LIVER INJURIES

KANIZA GARARI

THE ASIAN AGE

✓ Injury to the liver due to prescription and non-prescription drugs, dietary supplements, and herbal and ayurvedic medicines is a growing problem with the annual incidence rate rising from 139 to 240 in every million people.

Drug-induced liver injury (DILI) is also stated to be one of the leading causes of acute liver failure. "In Asia, it has been documented that herbs and health foods or dietary supplements are some of the most common causes of DILI. Apart from the metabolic pathways being affected due to external factors, internal factors like genetic determinants, age, gender, and co-existence of liver diseases, also predispose people to DILI," explained Dr Naveen Polavarapu, consultant gastroenterologist and transplant hepatologist at Apollo Hospitals.

Q What is drug-induced liver injury?

Drug-induced liver injury (popularly called DILI) is an acute insult caused to the liver by certain toxic drugs which harm the liver. The liver is exposed to all the drugs and toxins which are absorbed in the gastrointestinal tract, making it the organ which has to sustain the insult from time to time.

Q Which drugs have been identified to cause liver injury?

Most common drugs causing liver inflammation are anti-tubercular drugs (ATT), antibiotics, non-allopathic medicines, and anti-seizure medication. In the spectrum of non-allopathic medicines, the medicines which are found to cause injury are herbal medicines, digestive herbal medications, and drugs prescribed by quacks.

Q It has also been found that a combination of drugs and substances can cause liver injury. Which are these combinations that people should be aware of?

There are many combinations of drugs that might cause liver injury. The most widely known combination is that of alcohol and toxic levels of paracetamol. This combination is deadly and can cause liver failure, which can lead to an urgent need for liver transplantation. The toxic dose of paracetamol is 5000 mg per day. Very few studies have been done on the role of statins in altering liver function, and we require more evidence to back such studies.

Patients who are on multiple drugs experience adverse toxic reactions and they have to be evaluated from time to



time. Other drugs like oral contraceptive pills, anticoagulants, and those prescribed to treat mental health issues are also found to insult the liver.

Q What combinations of food and drugs should people with liver disease avoid?

There are no particular food restrictions for persons suffering from liver disease. It all depends on what stage we're talking about. In its final stage (cirrhosis), for example, salt should be very strictly avoided. Salt causes water retention, which can cause fluid accumulation in the stomach and legs.

There is also a myth that people with liver disease, colloquially termed jaundice, should avoid meat. This is completely wrong as people suffering from liver diseases are deficient in protein and a high-protein diet is, in fact, recommended for such individuals. Foods like chicken, egg whites, milk, and fish, should be consumed on a regular basis to avoid malnutrition.

Q What are the types of injuries caused?

Hepatotoxic drugs can cause varied alterations in the liver function, anything between self-limiting inflammation to acute liver failure. Hence, the use of any hepatotoxic medication needs close monitoring of liver function tests. Any jaundice or yellow discoloration of the eyes should be brought to the attention of doctors. The

evaluation of altered liver function includes scanning the abdomen, other necessary blood investigations, and regular follow up of the patient after withdrawal of the culprit drug.

Q What are the symptoms that people must look out for?

The first and most important symptom is the yellow discoloration of the eyes or urine. There can also be constitutional symptoms like abdominal discomfort. If such symptoms are observed, it is highly advisable to seek medical help as early identification helps to halt the progression of the injury to the liver by withdrawing the drug.

In the case of known hepatotoxic drugs like ATT, regular monitoring of liver tests is mandatory for patients. ATT drugs should be used with caution and doctors must counsel their patients about the side-effects of the drugs in terms of liver injury.

DILI is definitely a curable condition provided the culprit drug is withdrawn early, which is possible only through early diagnosis. Hence regular monitoring of liver tests of patients on ATT drugs is required.

Q Which group of patients with liver diseases needs more attention to ensure that this injury is avoided?

Those who are suffering from Hepatitis B, C, or HIV, are at a heightened risk of injury.

Those who are on multiple drugs and those who have been prescribed hepatotoxic drugs must be followed up. Those using unscientific drugs are often found to report when it's too late, and that is another major group where liver injuries are missed out.



Dr Naveen Polavarapu, consultant gastroenterologist and transplant hepatologist

■ THERE ARE NO SPECIFIC DIAGNOSTIC TESTS TO DETERMINE DILI. IT IS DIAGNOSED MOSTLY BASED ON CLINICAL SUSPICION WHERE THE USE OF VARIOUS DRUGS OVER A PROLONGED PERIOD OF TIME IS EVALUATED.

Food and Nutrition

Here is how food affects your mood (The Times of India: 20190329)

<https://timesofindia.indiatimes.com/life-style/health-fitness/diet/here-is-how-food-affects-your-mood/articleshow/58533861.cms>

We are what we eat! It impacts the way we think and feel. There is indeed a science that talks about this connection - it is called Nutritional psychiatry. A recent study confirmed that excess consumption of refined flours, sugar and salts is directly linked to mental health issues like depression and anxiety.

The connection between food and mood has also been written and proved in our ancient Ayurvedic texts, specifying how foods and its contents majorly affect how we feel. The correlation between Indian masalas, curries, herbs and our body is not new to Indian food science.

Harvard health publication, our brain functions the best when we provide it the best quality of foods. Just like how we provide premium fuel to our car, our body also deserves the best. Eating high quality foods packed with vitamins, minerals and antioxidants helps our brain and protects it from 'oxidative stress' according to the study. This means that the free radicals that our body produces when it uses oxygen, can in turn damage the cells.

Understanding that there lies a deep connection between the food we consume and our thinking process is still unknown to many. The term 'clean eating' is not limited to only delivering an 'ideal' body for you, this process is further linked to a healthier mental activity.

In our body, Serotonin, a neurotransmitter, helps regulate sleep and appetite. This means, patterns involving moods and satiety. According to the Harvard health publication, 95 per cent of serotonin is produced in the gastrointestinal tract. Further, our gastrointestinal tract is lined with millions of neurons, making it even more evident that once we consume food, our digestive system not only breaks it down, but at the same time, guides our emotions as well.

TOI Health spoke to doctors and health experts asking the same question: how does food affect our mood?

Pollution

Pollution tied to psychotic episodes in teens: Study (The Times of India: 20190329)

<https://timesofindia.indiatimes.com/home/science/pollution-tied-to-psychotic-episodes-in-teens-study/articleshow/68625284.cms>

High levels of air pollution in England and Wales have been linked with psychotic experiences in teenagers, such as hearing voices and intense paranoia, scientists said on Wednesday, as poor air quality in British cities comes under scrutiny.

Children and adolescents living in a city were twice as likely to experience a psychotic episode than those living in rural areas, said researchers at King's College London, who described their study as the first of its kind in the country.

"We found that adolescent psychotic experiences were more common in urban areas," said Joanne Newbury, lead author of the paper, published in the journal 'JAMA Psychiatry'.

The researchers used data from a two-decade long study examining over 2,200 British children born in 1994-5, and compared it with national air pollution data from 2012, when the children would have been about 17 years old. About 30% of children reported at least one psychotic episode between the ages of 12 and 18, with the highest rates in cities with heavy exposure to nitrogen dioxide, nitrogen oxides and tiny air pollution particles, such as dust and smoke.

Babies delivered in government hospitals

Institutional deliveries in hospitals up by 14% in 5 years' (The Indian Express: 20190329)

<https://indianexpress.com/article/cities/delhi/institutional-deliveries-in-hospitals-up-by-14-in-5-years-5647712/>

RTI data also reveals that the number of babies delivered in government hospitals is significantly higher than those delivered in private hospitals.

Pune man who filed RTI queries against illegal construction found dead, police suspect murder

RTI backlog: SC enquires if only bureaucrats are filling posts of information commissioners in CIC

No process for handling complaints against CVC, says Centre in RTI reply

‘Institutional deliveries in hospitals up by 14% in 5 years’

The number of deliveries in private and government hospitals in Delhi has increased by 14% in the last five years. (Source: Thinkstock Images)

The number of deliveries in private and government hospitals in Delhi has increased by 14% in the last five years, the directorate of family welfare (DFW) has stated in response to an RTI.

RTI data also reveals that the number of babies delivered in government hospitals is significantly higher than those delivered in private hospitals.

As per the data, 1,91,694 deliveries were conducted at government institutions in 2013-2014, and the number increased to 2,20,321 in 2017-2018. At private hospitals, 34,638 deliveries took place in 2013-2014, and 39,796 in 2017-2018.

“The trend is welcoming and the government should continue with its maternal health programs,” said RTI activist Rajhans Bansal, who filed the petition.

Experts attributed the trend to various government initiatives planned to reduce maternal and infant mortality rate. Janani Suraksha Yojana (JSY), a safe motherhood intervention under the National Rural Health Mission (NHM), is being implemented with the objective of reducing maternal and infant mortality by promoting institutional delivery among pregnant women.

The scheme is under implementation in all states and Union Territories, with a special focus on Low Performing States (LPS).

This is how the Anti Satellite Missile works

“People have more confidence in government institutions now...Though there are still many women who are unaware and do not come to hospitals, but in last few years, the number of those visiting hospitals has increased,” said Dr Alka Kriplani, head of gynaecology department at AIIMS.

The scheme also provides performance-based incentives to women health volunteers known as ASHA (Accredited Social Health Activists) for promoting institutional deliveries among pregnant women.

Under this initiative, eligible pregnant women are entitled to get JSY benefit of Rs 600 (in rural areas) and Rs 400 (in urban areas) directly into their bank accounts. “Earlier, people thought that only high-risk pregnancies needed a visit to the hospital. Now they realise that there is nothing called ‘high’ or ‘low’ risk pregnancy. The JSY scheme has encouraged many women who were not able to reach hospitals due to a financial crisis,” said Dr Suneeta Mittal, director and head of department, obstetrics and gynaecology, Fortis Memorial Research Institute (FMRI), Gurgaon.



Organ Donation

First living HIV-positive donor provides kidney for transplant in medical breakthrough (The Indian Express: 20190329)

<https://www.centralmaine.com/2019/03/28/u-s-begins-organ-transplants-from-living-donors-who-have-hiv/>

Surgeons have performed what's thought to be the first kidney transplant from a living donor with HIV, a long-awaited milestone.

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Surgeons in Baltimore have performed what's thought to be the world's first kidney transplant from a living donor with HIV, a milestone for patients with the AIDS virus who need a new organ. If other donors with HIV come forward, it could free up space on the transplant waiting list for everyone.

Nina Martinez of Atlanta traveled to Johns Hopkins University to donate a kidney to an HIV-positive stranger, saying she "wanted to make a difference in somebody else's life" and counter the stigma that too often still surrounds HIV infection.

Nina Martinez of Atlanta is wheeled into a Baltimore operating room to become who is thought to be the world's first kidney transplant living donor with HIV, on Monday, March 25, 2019. Martinez, 35, donated a kidney to an HIV-positive stranger, saying she "wanted to make a difference in somebody else's life" and counter the stigma that too often still surrounds HIV infection. Johns Hopkins Medicine via AP

Many people think "somebody with HIV is supposed to look sick," Martinez, 35, told The Associated Press before Monday's operation. "It's a powerful statement to show somebody like myself who's healthy enough to be a living organ donor."

Hopkins, which is making the transplant public on Thursday, said both Martinez and the recipient of her kidney, who chose to remain anonymous, are recovering well.

"Here's a disease that in the past was a death sentence and now has been so well controlled that it offers people with that disease an opportunity to save somebody else," said Dr. Dorry Segev, a Hopkins surgeon who pushed for the HIV Organ Policy Equity, or HOPE, Act that lifted a 25-year U.S. ban on transplants between people with HIV.

There's no count of how many HIV-positive patients are among the 113,000 people on the nation's waiting list for an organ transplant. HIV-positive patients can receive transplants from HIV-negative donors just like anyone else.

Only in the last few years, spurred by some pioneering operations in South Africa, have doctors begun transplanting organs from deceased donors with HIV into patients who also have the virus, organs that once would have been thrown away.

Since 2016, 116 such kidney and liver transplants have been performed in the U.S. as part of a research study, according to the United Network for Organ Sharing, or UNOS, which oversees the transplant system. One question is whether receiving an organ from someone with a different strain of HIV than their own poses any risks, but so far there have been no safety problems, said UNOS chief medical officer Dr. David Klassen.

Hopkins' Segev said Monday's kidney transplant was a world first. Doctors had hesitated to allow people still living with HIV to donate because of concern that their remaining kidney would be at risk of damage from the virus or older medications used to treat it.

Surgeons operate on Nina Martinez of Atlanta, who's thought to be the world's first kidney transplant living donor with HIV, in Baltimore on Monday, March 25, 2019. Doctors transplanted one of Martinez's kidneys into an HIV-positive recipient who chose to remain anonymous. Johns Hopkins Medicine via AP

But newer anti-HIV medications are safer and more effective, Segev said. His team recently studied the kidney health of 40,000 HIV-positive people and concluded that those with well-controlled HIV and no other kidney-harming ailments like high blood pressure should face the same risks from living donation as someone without HIV.

“There are potentially tens of thousands of people living with HIV right now who could be living kidney donors,” said Segev, who has advised some other hospitals considering the approach.

Generally, kidneys from living donors last longer, added Dr. Niraj Desai, the Hopkins surgeon caring for the recipient. And if more people living with HIV wind up donating, it helps more than HIV-positive patients who need a kidney.

“That’s one less person waiting for a limited resource,” Desai said. “That helps everybody on the list.”

Martinez, a public health consultant, became interested in living donation even before HIV-to-HIV transplants began. Then last summer she learned that an HIV-positive friend needed a transplant, and tracked down Segev to ask if she could donate.

Her friend died before Martinez finished the required health tests but she decided to honor him by donating to someone she didn’t know.

A runner who plans on making this fall’s Marine Corps Marathon, “I knew I was probably just as healthy as someone not living with HIV who was being evaluated as a kidney donor,” Martinez said. “I’ve never been surer of anything.”



Motion sickness

Despite ban, motion sickness medicine buclizine being sold as appetite stimulant’ (The Indian Express: 20190329)

<https://indianexpress.com/article/business/despite-ban-motion-sickness-medicine-buclizine-being-sold-as-appetite-stimulant-5647771/>

The findings have caused a public health activist to urge the Delhi High Court to direct the government to initiate “criminal” proceedings against the medicine’s manufacturer — Mankind Pharmaceuticals Ltd.

Drugs and medical devices: ‘Price cap helped patients save around Rs 15,000 crore’

Maharashtra Druggists’ body to pharma firms: ‘Refrain from unethical practices to boost sales’

Oxytocin: Drug regulator calls for ‘strict vigil’

Indian pharma sector, banned drugs, antihistamine, motion sickness, buclizine sale, business news, indian express

The survey, conducted by a private investigation agency, also claims requirements to clearly mention that the drug should not be sold for this purpose have not been followed for the samples examined.

Several Indian pharmacies continue to sell antihistamine and motion sickness medicine buclizine to boost children’s appetite, despite a government order three months ago to ban this particular use of the drug “in public interest”, shows a new survey. The survey, conducted by a private investigation agency, also claims requirements to clearly mention that the drug should not be sold for this purpose have not been followed for the samples examined.

The findings have caused a public health activist to urge the Delhi High Court to direct the government to initiate “criminal” proceedings against the medicine’s manufacturer — Mankind Pharmaceuticals Ltd.

In December 2018, the Health Ministry prohibited the use of buclizine as an appetite stimulant, stating it is “likely to involve risk” to human beings. It also directed manufacturers to mention “in conspicuous manner” on the drug’s package insert and promotional literature that it was “not to be used as appetite stimulant”.

However, over 170 pharmacies in Delhi, Gurgaon and Hyderabad, including those attached to hospitals, continue to sell ‘Longifene’, Mankind’s brand of buclizine, for this indication, the survey conducted in February found. The investigator was hired by activist Dinesh S Thakur, the whistleblower who exposed wrongdoing at Ranbaxy.

“Despite the unambiguous directions issued by the Central Government ... the appellant was shocked to discover that the old stock of buclizine have not been recalled from the retail market, and moreover, no label or stickers containing the disclaimer have been affixed on the packaging,” stated Thakur in a fresh application to the Delhi High Court. The Indian Express has reviewed a copy of this application.

“None of the pharmacies surveyed by the investigation agency were aware of the prohibited use of buclizine as an appetite stimulant or the associated health hazards,” the application stated.

This is how the Anti Satellite Missile works

Thakur has alleged the survey “disclosed the commission of a cognizable offence” under India’s Drugs and Cosmetics Act. He has urged the court to direct the government to initiate “criminal proceedings” against Mankind Pharma “and its agents” as a result. The high court has sought the reply of the ministry and Central Drugs Standard Control Organisation (CDSCO), India’s apex drug regulatory body, to the allegations raised in the application. The case will be heard next on August 5. As of March 27, The Indian Express’ own inquiries confirmed that some chemist shops in Delhi, Mumbai and Chennai were selling Longifene tablets and syrups belonging to batches manufactured before December 2018. These packages did not carry the mandated disclaimer, the stores did not stock any Longifene syrups manufactured during or after December and the pharmacists said Longifene can be used to increase appetite.

EXPLAINED

Ineffective enforcement by authorities

Several pharmacies continue to sell buclizine as an appetite stimulant months after the government banned the drug for this usage. Old stocks of the drug remain in the market without awareness labels. This implies ineffective surveillance and enforcement of the regulation by authorities, which could put patients in danger.

However, in one instance where a pharmacy was selling December 2018-manufactured Longifene tablets, the box containing the strips carried a sticker with the required disclaimer. The manufacturing, sale and distribution of drugs are primarily regulated by state licencing authorities, according to Drug Controller General of India Eswara Reddy. “State Licensing Authorities (SLAs) have the mandate to enforce statutory provisions. CDSCO zonal and sub-zonal offices are also being sensitised to take action in coordination with SLAs,” he told The Indian Express in response to queries.

Those found manufacturing, selling or distributing buclizine on or after December 13 without adhering to the government’s orders is liable for punishment under India’s drug regulations, according to him. This includes imprisonment for up to three years and a fine of up to Rs 5,000. Emailed queries to Mankind Pharma on March 26 and March 27 remained unanswered by press time Thursday. Mankind is the leader in India’s Rs 12.4 crore buclizine market, with nearly 35 lakh units sold in the 12 months ended February 2019, according to market research firm AIOCD Awacs PharmaTrac.

Thakur’s application is part of his ongoing lawsuit to ban certain medicines sold in India despite government experts having red-flagged them for safety issues since 2012.

Embryo:

Case of the 'imported' embryo: the how, the why, and what the law says (The Indian Express: 20190329)

<https://indianexpress.com/article/explained/case-of-the-imported-embryo-the-how-the-why-and-what-the-law-says-5647583/>

Earlier this month, the Directorate of Revenue Intelligence (DRI) arrested a Malaysian national who was allegedly attempting to import a nitrogen canister containing a frozen human embryo. The arrest, first of its kind in India, led to a search at an fertility clinic in Mumbai.

Karnataka: Why, despite Congress-JD(S) alliance, BJP unlikely to lose much ground in Lok Sabha elections

Telling Numbers: Target 33%, women in state police forces add up to 7%

Fake embryos, embryo smuggling, ivf childbirth, mumbai ivf clinic, ivf clinic scam, surrogacy, india surrogacy laws, illegal surrogacy, latest news, indian expressEmbryo smuggling, ivf childbirth, mumbai ivf clinic, ivf clinic scam, surrogacy, india surrogacy laws, illegal surrogacy, latest news, indian express, Mumbai news

In medical terms, the unborn offspring is an embryo from the day of fertilisation until the eighth week of pregnancy; after that, it is a foetus. (Source: Getty Images)

Earlier this month, the Directorate of Revenue Intelligence (DRI) arrested a Malaysian national who was allegedly attempting to import a nitrogen canister containing a frozen human embryo. The arrest, first of its kind in India, led to a search at an fertility clinic in Mumbai.

Why store embryos

Advertising

In medical terms, the unborn offspring is an embryo from the day of fertilisation until the eighth week of pregnancy; after that, it is a foetus. Following in vitro fertilisation (outside the body), some couples choose to freeze embryos that are left over. This would allow patients to conceive at a later time. Embryos are frozen from the second day of fertilisation, using techniques to halt physiological or biological development. The embryo is stored in liquid nitrogen or nitrogen vapour at a temperature below -190°C. In 2017, a 24-year-old frozen embryo made headlines after it was used to give birth in the US.

Until five years ago, facilities for embryo freezing were limited in India. Several couples stored embryos abroad and imported them when they wanted to conceive. Today, India has many embryo freezing banks at par with those in the West, said Dr Narendra Malhotra, former president of Indian Society for Assisted Reproduction (ISAR).

Read | Human embryo smuggling: Mock delivery leads DRI to Mumbai clinic

Why import them

One possible reason for importing embryos could be to meet demands from Indian couples for a baby with “non-Indian looks”. Dr Malhotra said he often gets requests for European gametes from couples.

In the latest case, experts suspect it is also possible that a Malaysian couple had commissioned illegal surrogacy in India. Malaysia does not allow surrogacy. In India, the Surrogacy (Regulation) Bill, 2016, passed by Lok Sabha in 2018, bans commercial surrogacy but permits altruistic surrogacy. India offers cheaper IVF procedures, at costs one-half to one-third of those in the US.

Muslims from Assam, UP, Bihar different... Fight is against Bangladeshi Muslims, not Indian Muslims

In 2017, a Thai national was arrested for smuggling six tubes of semen stored in liquid nitrogen to Laos for surrogacy. Embryos or gametes were getting routed to surrogacy clinics, ART clinics and IVF clinics.

Fake embryos, embryo smuggling, ivf childbirth, mumbai ivf clinic, ivf clinic scam, surrogacy, india surrogacy laws, illegal surrogacy, latest news, indian express Embryo smuggling, ivf childbirth, mumbai ivf clinic, ivf clinic scam, surrogacy, india surrogacy laws, illegal surrogacy, latest news, indian express, Mumbai news

Dr Goral Gandhi has denied all allegations, moved HC

The latest case

BEST OF EXPRESS

Despite Congress-JD(S) alliance, BJP unlikely to lose much ground in Karnataka

Rural distress and demand up, NREG gets lowest wage hike for 2019-20

LIVE

Narendra Modi interview: ‘Dynastic politics is not my problem, but threat to democracy’

DRI officials alleged that the arrested Malaysian national, Partheban Durai, had smuggled embryos at least eight times to Mumbai, after declaring these as stem cells. This time, he carried the nitrogen canister- as large as a mini gas cylinder- in his hand luggage and did not put it for

X-ray screening, officials said. It was allegedly meant for delivery at Indo-Nippon IVF Fertility Centre.

The DRI said its team conducted a mock delivery through Durai, and that the director of the clinic received the canister. The director, Dr Goral Gandhi, refused to comment. Her lawyer Sujay Kantawala said, “These are false allegations, no delivery was staged.” While Gandhi has moved a petition challenging the DRI action, Durai is out on bail and in custody of Malaysian consulate.

Indian laws

In October 2015, the Director General of Foreign Trade moved the import of human embryos from the ‘restricted’ to the ‘prohibited’ category, except for research purposes. The next month, the Ministry of Home Affairs banned commercial surrogacy for foreign nationals in India. Since then, the Indian Council of Medical Research (ICMR) has stopped giving no-objection-certificates for import of embryos or gametes. Export is allowed on a case basis for couples who froze their embryos or gametes in India before the surrogacy ban was enforced, and wish to continue IVF in another country.

Read | Human embryos smuggling: DRI expands probe to more clinics, to carry out forensic test after recording statement

IVF experts have urged for regulation rather than prohibition. “There are lots of Indian couples who froze their eggs or embryos abroad while living there. Now that they have migrated to India, they wish to continue IVF here,” said Dr Jaideep Malhotra, current ISAR president. Alternatively, those with terminal illness may travel abroad for treatment and preserve their healthy gametes before initiating radiation or chemotherapy. Once treatment is over, they may wish to bring it back to India. “These are genuine problems that Indians face and the government must allow import in such cases,” said IVF expert Dr Duru Shah.

In a draft regulation submitted to Director General of Foreign Trade and Ministry of Health and Family Welfare, the ICMR has suggested ways to regulate import of embryos and gametes – matching of DNA of embryo with that of importing couple, justifiable reasons for import, a mandatory check on exporting and importing clinic. “This is to ensure foreign couples do not send their embryo for surrogacy,” said Dr R S Sharma, senior director at ICMR, who was involved in drafting the guidelines

Swine Flu

दिल्ली में स्वाइन फ्लू का कहर अब तक 21 लोगों की मौत (Dainik Gagan: 20190329)

https://epaper.jagran.com/epaper/article-29-Mar-2019-edition-delhi-city-page_5-9452-13302-4.html

राज्य ब्यूरो, नई दिल्ली: स्वाइन फ्लू का कहर दिल्ली में इस बार लोगों पर भारी पड़ा है। पिछले दो सप्ताह में इस बीमारी के कारण 14 लोगों की मौत की पुष्टि हुई है। इस कारण दिल्ली में स्वाइन फ्लू से इस वर्ष अब तक 21 लोगों की मौत हो चुकी है। हालांकि राहत की बात यह है कि सर्दी खत्म होने के बाद इसका संक्रमण कम होने लगा है।

राष्ट्रीय रोग नियंत्रण केंद्र (एनसीडीसी) द्वारा जारी रिपोर्ट के अनुसार, वर्ष 2010 के बाद पिछले नौ सालों में इस बार स्वाइन फ्लू से सबसे अधिक लोगों की मौत हुई है। दो सप्ताह में स्वाइन फ्लू के 150 नए मामले सामने आए हैं। इसे लेकर दिल्ली में अब तक 3512 मामलों सामने आ चुके हैं। वर्ष 2010 में स्वाइन फ्लू से 77 लोगों की मौत हुई थी। तब स्वाइन फ्लू के 2725 मामले सामने आए थे। उस साल की तुलना में इस बार अधिक मामले सामने आ चुके हैं।

वर्ष 2015 में यहां स्वाइन फ्लू के 4307 मामले सामने आए थे। उसके बाद इस साल स्वाइन फ्लू के अधिक मामले सामने आए हैं। डॉक्टर कहते रहे हैं कि इस साल स्वाइन फ्लू का वायरस (एन1एन1) अधिक आक्रामक रहा है।

इलाज में न करें देरी : तेज बुखार के साथ सर्दी, जुकाम, खांसी, गले में दर्द व सांस लेने में परेशानी हो तो डॉक्टर को तुरंत दिखाना चाहिए। इलाज में देरी से स्वास्थ्य बिगड़ सकता है। कई लोग शुरुआत में बीमारी को नजरअंदाज करते हैं। हालत बिगड़ने पर ही अस्पताल पहुंचते हैं। इस वजह से जान खतरे में पड़ जाती है।

एचआइवी संक्रमित डोनर

एचआइवी संक्रमित डोनर से किडनी लेकर प्रत्यारोपण किया **Dainik Gagan: 20190329**

https://epaper.jagran.com/epaper/article-29-Mar-2019-edition-delhi-city-page_11-11027-13297-4.html

वाशिंगटन, एपी: बाल्टीमोर के सर्जनों ने एक एचआइवी संक्रमित डोनर से किडनी लेकर प्रत्यारोपण किया है। यह दुनिया में इस तरह का पहला मामला माना जा रहा है। यह एड्स वायरस के साथ उन रोगियों के लिए मील का पत्थर है जिन्हें नए अंग की जरूरत है। यदि दूसरा एचआइवी पीड़ित डोनर सामने आता है तो किसी के लिए भी प्रत्यारोपण की प्रतीक्षा कम करने में मददगार साबित होगा। अटलांटा की नीना मार्टिनेज एक एचआइवी पॉजिटिव को किडनी डोनेट करने के लिए जॉन हॉपकिन्स यूनिवर्सिटी पहुंची। उन्होंने कहा कि वह 'किसी दूसरे के जीवन में कुछ खास' करना चाहती हैं। वह एचआइवी संक्रमित के इर्दगिर्द लगे दाग का मुकाबला करना चाहती हैं।

Kidney Transplant (Hindustan: 20190329)

http://epaper.livehindustan.com/imageview_10280_70461872_4_1_29-03-2019_i_21.pagezoomsinwindows.php

अमेरिका के जॉन हॉपकिंस अस्पताल में भारतवंशी डॉक्टर ने ऑपरेशन किया, अंगदान की प्रक्रिया को मिलेगा बढ़ावा

पहली बार जीवित एड्स पीड़ित की किडनी दूसरे को लगी

सफलता

बाल्टीमोर | एजेंसी

अमेरिका में मेडिकल क्षेत्र का पहला अनोखा अंग प्रत्यारोपण हुआ है। डॉक्टरों की एक टीम ने जॉन हॉपकिंस अस्पताल में एक 35 वर्षीय एड्स पीड़ित महिला की किडनी दूसरे एड्स पीड़ित को प्रत्यारोपित की है।

इससे पहले मर चुके एड्स रोगी के अंगों का ही प्रत्यारोपण होता था। निना मार्टिनेज ने एक पहल करते

हुए अपनी किडनी दान करने का मन बनाया। आमतौर पर एड्स पीड़ित के लिए एक किडनी पर जीना मुश्किल होता है लेकिन निना का एचआईवी पूरी तरह नियंत्रित है और उनका शरीर एक किडनी पर काम करने में सक्षम है।

जॉन हॉपकिंस अस्पताल में सोमवार को सर्जनों की एक टीम ने निना की किडनी एक अन्य एचआईवी पॉजिटिव मरीज को लगा दी। इस टीम में भारतवंशी डॉक्टर नीरज देसाई प्रमुख थे। दोनों स्वस्थ हैं और इन्हें 15 दिनों तक सघन निगरानी में रखा जाएगा।

116 अंगदान हुए मर चुके एड्स रोगियों के

1.52 लाख किडनी प्रत्यारोपित हुई हैं बीते तीन दशक में

1.13 लाख लोग अंगदान के लिए प्रतीक्षारत हैं अमेरिका में

जानलेवा बीमारी वाले भी देने लगेंगे 'जीवनदान'

निना कहती हैं कि उनकी बीमारी जानलेवा है। एक दौर था जब इससे पीड़ितों को मरने वाला माना जाता था। लेकिन आज किडनी दान कर उन्हें लगता है कि इस जानलेवा बीमारी से पीड़ित होने के बाद भी वह किसी को जीवनदान दे सकती हैं। निना को जन्म के तुरंत बाद एचआईवी संक्रमण हुआ था। निना कहती हैं कि इससे लोगों की विचारधारा बदलेगी।



मरीज को जीवनदान मिला: नीरज देसाई

सफल किडनी प्रत्यारोपण करने वाले सर्जन नीरज देसाई कहते हैं कि इस सर्जरी से मरीज को नया जीवन मिला है। नीरज ने बताया कि जीवित व्यक्ति से किडनी मिलना मृतक की तुलना में अधिक लाभकारी है। आम तौर पर प्रत्यारोपित किडनी 10 से 15 साल तक सही ढंग से काम करती है। जीवित व्यक्ति से प्रत्यारोपित करने पर यह अधिक काम करती है।