



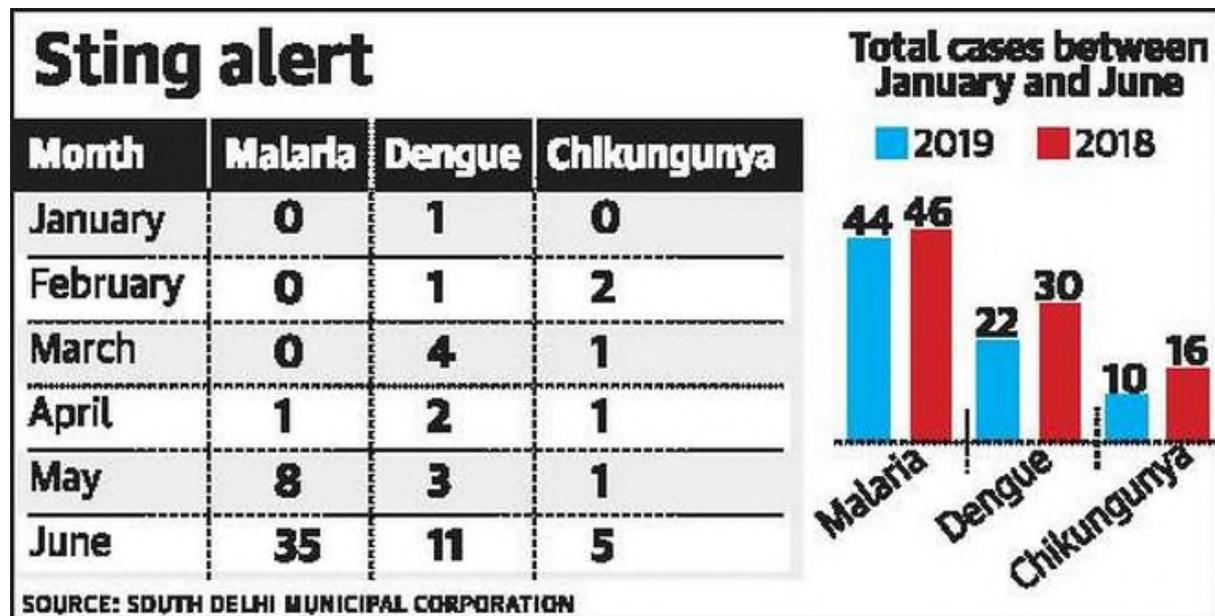
DAILY NEWS BULLETIN

LEADING HEALTH, POPULATION AND FAMILY WELFARE STORIES OF THE DAY
Tuesday 20190702

Vector-borne diseases

Rise in cases of vector-borne diseases (The Hindu: 20190702)

<https://www.thehindu.com/news/cities/Delhi/rise-in-cases-of-vector-borne-diseases/article28255688.ece>



With monsoon approaching, numbers likely to see a surge

Cases of vector-borne diseases — malaria, dengue and chikungunya — has picked up this week, according to a report from the three municipal corporations on Monday.

Last week, 13 cases of malaria were registered, taking the total cases to 44 this year. At the same time last year, 46 cases of malaria were recorded.

Apart from this, there have been eight cases of dengue, taking the total number of such cases to 22 this year, compared to 30 at the same time last year.

Five cases of chikungunya were also reported last week, taking the total to 10, compared to 16 last year.

Measures taken

The number of cases of vector-borne diseases is expected to rise during the monsoon, which is expected to arrive later this week.

The three municipal corporations have been undertaking several measures such as door-to-door to surveys and spraying insecticides to prevent mosquito breeding. The South Delhi Municipal Corporation's report stated that 2,37,466 houses have been sprayed with insecticides. Around 80,165 houses have been sprayed in north Delhi and only 12,542 in east Delhi.

Japanese Encephalitis (JE) in Assam

22 cases of Japanese Encephalitis (JE) in Assam (The Hindu: 20190702)

<https://www.thehindu.com/news/national/22-cases-of-je-reported-in-assam/article28254176.ece>

Toll almost double the figure during same period in 2018

At least 22 people have died of Japanese Encephalitis (JE) in Assam, officials said on Monday.

The toll is almost double the figure during the same period in 2018.

The State Programme Officer of National Vector-Borne Disease Control Programme, said that JE had claimed 21 people till June with 59 more positive cases having been reported.

Assam has had a history of JE and malaria outbreak, especially during the rainy season. But the gravity of the situation saw the Union Home Ministry send a team headed by Additional Secretary Sanjeeva Kumar.

The Central team met officials of the State's Health Department on Monday and suggested measures to check the outbreak of the vector-borne disease.

Self-care medical interventions

Miles to go: self-care medical interventions (The Hindu: 20190702)

<https://www.thehindu.com/opinion/editorial/miles-to-go/article28253593.ece>

India has some distance to cover before making self-care interventions freely available

Self-care, which mostly happens outside the formal health system, is nothing new. What has changed is the deluge of new diagnostics, devices and drugs that are transforming the way common people access care, when and where they need them. With the ability to prevent disease, maintain health and cope with illness and disability with or without reliance on health-care workers, self-care interventions are gaining more importance. Millions of people, including in India, face the twin problems of acute shortage of healthcare workers and lack of access to essential health services. According to the World Health Organization, which has released self-help guidelines for sexual and reproductive health, over 400 million across the world already lack access to essential health services and there will be a shortage of about 13 million health-care workers by 2035. Self-help would mean different things for people living in very diverse conditions. While it would mean convenience, privacy and ease for people belonging to the upper strata who have easy access to healthcare facilities anytime, for those living in conditions of vulnerability and lack access to health care, self-help becomes the primary, timely and reliable form of care. Not surprisingly, the WHO recognises self-care interventions as a means to expand access to health services. Soon, the WHO would expand the guidelines to include other self-care interventions, including for prevention and treatment of non-communicable diseases.

India has some distance to go before making self-care interventions for sexual and reproductive health freely available to women. Home-based pregnancy testing is the most commonly used self-help diagnostics in this area in India. Interventions include self-managed abortions using approved drugs — morning-after pills taken soon after unprotected sex, and mifepristone and misoprostol taken a few weeks into pregnancy — that can be had without the supervision of a healthcare provider. While the morning-after pills are available over the counter, mifepristone and misoprostol are scheduled drugs and need a prescription from a medical practitioner, thus defeating the very purpose of the drugs. The next commonly consumed drug to prevent illness and disease is the pre-exposure prophylaxis (PrEP) for HIV prevention. India is yet to come up with guidelines for PrEP use and include it in the national HIV prevention programme. Despite the WHO approving the HIV self-test to improve access to HIV diagnosis in 2016, the Pune-based National AIDS Research Institute is still in the process of validating it for HIV screening. One of the reasons why people shy away from getting tested for HIV is stigma and discrimination. The home-based testing provides privacy. India has in principle agreed that rapid HIV testing helps to get more people diagnosed and opt for treatment, reducing transmission rates.

Alcoholism

Alcohol causes significant harm to those other than the drinker (The Tribune: 20190702)

<https://www.tribuneindia.com/news/health/alcohol-causes-significant-harm-to-those-other-than-the-drinker/795572.html>

People who are in close proximity or connection with alcoholics can experience harm because of their drinking, according to a study led by an Indian-origin scientist.

According to the research, published in the Journal of Studies on Alcohol and Drugs, an estimated 53 million adults in the US experienced harm because of someone else's drinking in the last 12 months.

Researchers led by Madhabika B Nayak of the Alcohol Research Group in the US analysed data of 8,750 adults who answered questions from two databases in 2015 -- the National Alcohol's Harm to Others Survey and the National Alcohol Survey.

They found that some 21 per cent of women and 23 per cent of men experienced harm because of someone else's drinking.

These harms included threats or harassment, vandalism, physical aggression, harms related to driving, or financial or family problems, according to the study.

The specific types of harm experienced differed by gender. Women were more likely to report financial and family problems, whereas ruined property, vandalism, and physical aggression were more likely to be reported by men.

There is "considerable risk for women from heavy, often male, drinkers in the household and, for men, from drinkers outside their family," the researchers said.

Additional factors, including age and the person's own drinking, were also important.

People below 25 had a higher risk of experiencing harm from someone else's drinking. Further, almost half of men and women who themselves were heavy drinkers said they had been harmed by someone else's drinking, the study stated.

Even people who drank but not heavily were at two to three times the risk of harassment, threats, and driving-related harm compared with abstainers.

Heavy drinking was defined as drinking five or more drinks at a time for men or four or more drinks for women at least monthly.

"Control policies, such as alcohol pricing, taxation, reduced availability, and restricting advertising, may be the most effective ways to reduce not only alcohol consumption but also alcohol's harm to persons other than the drinker," Nayak said. —PTI

Health

WhatsApp can be good for your health (The Tribune: 20190702)

<https://www.tribuneindia.com/news/health/whatsapp-can-be-good-for-your-health/795560.html>

People who tend to spend more time on social media, especially WhatsApp, feel less lonely and have higher self-esteem, a study claims.

Researchers at Edge Hill University in the UK have found that the text-based messaging app has a positive impact on psychological well-being.

"The more time people spent on WhatsApp, the more this related to them feeling close to their friends and family and they perceived these relationships to be good quality," said Dr Linda Kaye of Edge Hill University.

"As well as this, the more closely bonded these friendships were and the more people felt affiliated with their WhatsApp groups, the more this was related positively to their self-esteem and social competence," she said.

Two hundred users, 158 women and 41 men with an average age of 24, participated in the study. It was published in the International Journal of Human-Computer Studies.

The researchers found that the average reported daily use of WhatsApp was around 55 minutes, with people using it because of its popularity and group chat function.

"Group affiliation also meant that WhatsApp users were less lonely. It seems that using WhatsApp to connect with our close friends is favourable for aspects of our well-being," Kaye said.

"This research contributes to the ongoing debates in this area and provides specific evidence of the role of social factors, along with social support motivations for using communication technology," she added. PTI

Emotions

New wrist bands can provide insight into users' emotions (The Tribune: 20190702)

<https://www.tribuneindia.com/news/health/new-wrist-bands-can-provide-insight-into-users-emotions/795518.html>

Smart wearable technology that changes colour, heats up, squeezes or vibrates as your emotions are heightened has the potential to help people with affective disorders better control their feelings, a study has found.

Researchers from Lancaster University in the UK have worked with smart materials on wrist-worn prototypes that can aid people diagnosed with depression, anxiety and bi-polar disorders in monitoring their emotions.

Wrist bands that change colour depending upon the level of emotional arousal allow users to easily see or feel what is happening without having to refer to mobile or desktop devices, according to the study, which will be presented at Designing Interactive Systems (DIS 2019) conference in San Diego.

"Knowing our emotions and how we can control them are complex skills that many people find difficult to master," said co-author Muhammad Umair from Lancaster University.

"We wanted to create low-cost, simple prototypes to support understanding and engagement with real-time changes in arousal," he said.

The researchers worked with thermochromic materials that change colour when heated up, as well as devices that vibrate or squeeze the wrist.

Tests of the devices saw participants wearing the prototypes over the course of between eight and 16 hours, reporting between four and eight occasions each when it activated - during events such as playing games, working, having conversations, watching movies, laughing, relaxing and becoming scared.

A skin response sensor picked up changes in arousal—through galvanic skin response, which measures the electrical conductivity of the skin—and represented it through the various prototype designs.

Those smart materials which were both instant and constant and which had a physical rather than visual output, were most effective.

“Participants started to pay attention to their in-the-moment emotional responses, realising that their moods had changed quickly and understanding what it was that was causing the device to activate. It was not always an emotional response, but sometimes other activities - such as taking part in exercise - could cause a reaction,” Umair said.

“One of the most striking findings was that the devices helped participants started to identify emotional responses which they had been unable to beforehand, even after only two days,” he

Healthcare requires reform

Stop violence against doctors in India (Hindustan: 20190702)

While healthcare requires reform, frustrated families must not target doctors

Sporadic violence against doctors and health workers occurs across the world, but it's usually limited to threats and abuse by patients under the influence of alcohol or illegal drugs. Violence against medical professionals in India is unique because it's not perpetrated by patients, but by their families and friends, strangers who join out of misplaced sympathy, random goons, and political leaders and party workers looking for the crowd's approval. It is often physical, with a mob quickly coming together to rough up healthcare staff and vandalise hospitals. While the global trigger is usually anger at real or perceived negligence, in India it is driven by delays in treatment, doctors and services not being available, and allegations of profiteering. In the absence of adequate grievance redressal mechanisms at hospitals and medical negligence cases taking decades to resolve, if at all, frustrated families vent their frustration in violence.

If patients are underserved, doctors are overworked, as highlighted by Prime Minister Narendra Modi's tweet congratulating “all hardworking doctors for their round the clock effort to make our society fit and healthy” on national Doctors' Day, July 1. There are 11,57,771 allopathic doctors registered with the Medical Council of India, of which an estimated 9.26 lakh are in active service to treat 1.35 billion people. This puts India's doctor-population ratio at 1:1,457, which is lower than the World Health Organization's recommended ratio of 1:1,000. Till the Centre's efforts to reinforce human resources in healthcare, such as raising the number of seats in medical colleges and relaxation of norms for setting up medical colleges in terms of

requirements of land, faculty and other infrastructure, bear fruition, short-term solutions are needed to defuse the crisis.

Improving doctors' communication skills, reducing waiting time, using digital technology for faster response, making billing transparent, and setting up a robust complaint redressal system in hospitals are some ways forward. Patients, too, must have realistic expectations and keep in mind that medicine is a science, and doctors are professionals, not magicians. Some patients will survive, and some won't, irrespective of doctors' skills or the services available.

Women Empowerment (The Asian Age: 20190702)

<http://onlinepaper.asianage.com/articledetailpage.aspx?id=13299371>

Making financial inclusion work for women



Moin Qazi
meanwhile

■ A nation cannot have sustained economic prosperity and well-being until the central role of women is recognised and their economic health is used as a measure to shape policy

Women's financial inclusion is one of the many powerful levers that can advance gender equality. Efforts to get more women signed up for accounts have increased in recent years, as development agencies and governments alike have started, focusing on financial products as a tool for poverty alleviation and female empowerment.

Despite the increased attention paid to awareness of women's financial inclusion, we have not been able to translate these efforts into large-scale, meaningful progress. Significant change can come only through focused efforts from governments and banks. A lot more awareness has to be created in women about financial services.

When women have the power to make, spend, save and control

their own money, they make gains not only for themselves but also for their communities. It is now recognised that "the women's market" represents numerous segments of women clients, from low-income salaried workers (factory workers, domestic workers, etc) and low-income self-employed women in the informal sector, to women who work in agricultural value chains, to small- and medium-enterprises.

Women often face several barriers that limit their financial inclusion, other than the universal constraints that low-income communities face: limited access to mobile phones, lower literacy levels, less confidence in using technology, and restrictions on travel or social interaction. We need to address them through behavioural and reformist approaches, instead of the usual hardware-based approach, so that demand and supply-side barriers women face in accessing finance are eliminated.

Women make up half the population. A nation cannot have sustained economic prosperity and well-being until the central role of women is recognised and their economic health is used as a measure to shape policy. This is plain logic. The human race is like a bird and as we all know, it needs both wings to be able to fly. Similarly, it cannot survive by giving importance to one gender and degrading the other. A great opportunity is wasted when women are isolated from the economy.

When more people have access to affordable and good quality financial services, they have more opportunities to thrive. This is especially true for women, who are often underserved by traditional financial institutions. Every client is unique and women, in particular, may prefer more focus on savings and not credit. Experience worldwide shows that when a woman receives money, her entire extended family profits from it, as women make the best use of it. When women control financial assets, they are often more likely than men to invest in health, educa-



Women often face several barriers that limit their financial inclusion

— BLOOMBERG

tion and the well-being of their families. Women are in fact one of the wisest investors. By investing in them we create the most powerful catalyst for lasting social change. For all interventions, the fundamental logic is plain: If we are going to end extreme poverty, we need to start with girls and women. Structural barriers and discriminatory social norms continue to constrain women's decision-making power in rural households and communities. Women and girls in rural areas lack equal access to productive resources and assets, public services such as education and healthcare, infrastructure, including water and sanitation, while much of their labour remains invisible and unpaid, even as their workloads become increasingly heavy due to the out-migration of men. Globally, with a few exceptions, every gender and development indicator for which data is available reveals that rural women fare worse than rural men and urban women and that they disproportionately experience

poverty and exclusion. Closing the gender gap is essential to realising the promise of financial inclusion. It is also critical because the business case for women's financial inclusion is now universally acknowledged. Research indicates that women tend to be loyal customers and cautious investors — they have better loan-payback rates, default less often, and bounce checks rarely. Serving this market not only makes business sense, it also has a positive impact on society as a whole by expanding economic growth and job creation. In the new development discourse, women have come to be recognised as key participants in efforts to alleviate poverty and achieve economic and social transformation. Effecting comprehensive change from a woman's point of view calls for a transformation of gender relations, not merely superficial attention to "women's needs". Research suggests that by serv-

ing a girl at the vulnerable crossroads of adolescence, development programs can have the greatest impact not only on that girl, but can empower her to be a catalyst for change in her family and community. By ignoring them we have lost the opportunity to impact a generation. However, once that window of adolescence closes, we have opened the doors for another broken generation. The Self Help Group model of extending small credits to women's groups without collateral has been so effective that it has now been appropriated by the National Rural Livelihood Mission (NRLM). Although this access to credit is assumed to strengthen the agency of women borrowers, there are a lot of cases where men influence loan decisions, while on the surface merely signing the application and contract. In fact, helping women to decide and act on their livelihoods is a slow and engaging process. Flagship programmes like NRLM are not able to fully handhold the utilisation and

management involved in the credit delivery process within the self help group. Without engaging with access and control of household-level benefits, much progress on women's say in decision making cannot be brought forth.

One of the criticisms against microfinance is that the system is built on coercion — women pressuring each other into making payments even when they are themselves in desperate situations. We need to remember that these are women whose social support is lost when they marry and move to their husbands' villages or neighbourhoods, where their initial interactions may be limited to their husband, children, and mother-in-law.

The micro-credit movement brought these women into the formal financial fold for the first time. But they were not necessarily considered active consumers of financial services. Rather, they were often seen just as conduits to push credit into households with the hope of eventually lifting people out of poverty.

Women clients, particularly in rural areas, find interacting with male staff at banks an intimidating experience and may not trust banks. Banks are not considered part of their trusted service providers. To overcome such psychological barriers, financial institutions can increase women staff, and appoint dedicated women staff to serve women customers because most of them have a preference for a non-inhibiting environment.

There is an urgent need to consider women as a distinct segment without disguising male-focused products as gender neutral. To enable this change, one needs to study the myriad social and behavioural impediments impacting women, and use this knowledge to design customised financial product offerings.

Illiteracy, distinctly apart from illiteracy, acts as a cognitive barrier and hinders women from developing familiarity with financial service providers (FSPs) or their male agents. Often, men take advantage of

this handicap, using it as a pretext to deal with FSPs on "behalf" of the women in the household, who, they claim, "would get duped or would be unable to transact".

To make financial inclusion for women more relevant and meaningful, we also need to sensitise men to the peculiarities and needs of the female gender. The inadequacies of focusing on women in isolation have long been recognised: women live in communities, they live in families, and they live with men. Abstracting women from their social realities distorts our understanding of the relational nature of gendered power and the interdependency of women and men, and that has a strong bearing on women's motivations, choices and possibilities.

Providers will need to deepen their understanding of the unique needs of women consumers and develop products and customer experiences tailored to these needs. This doesn't sound like rocket science and it isn't, except that the financial products currently available to women are hand-me-downs of regular products and do not match their distinct income, expenditure and savings patterns. For example, income, which is mostly from their casual employment, tends to be more irregular and unpredictable, often cobbled together from various sources. Savings are limited, often taking the form of small amounts saved daily that need to be banked quickly to prevent them from being spent. Formal credit histories are virtually non-existent. There is heavy reliance on informal networks like friends and family for financing big-ticket needs.

Financial service providers have been surprisingly unimaginative and lackadaisical in sensing a business opportunity around the millions of poor women who have bank accounts at their retail branches.

The writer is a member of the Niti Aayog's National Committee on Financial Literacy and Inclusion for Women

Whats up ((The Asian Age: 20190702)

<http://onlinepaper.asianage.com/articledetailpage.aspx?id=13299413>



WHATSAPP GOOD FOR MENTAL HEALTH: STUDY

London, July 1: People who tend to spend more time on social media, especially WhatsApp, feel less lonely and have higher self-esteem, a study claims.

Researchers at Edge Hill University in the UK have found that the text-based messaging app has a positive impact on psychological well-being.

"The more time people spent on WhatsApp, the more this related to them feeling close to their friends and family and they perceived these relationships to be good quality," said Dr Linda Kaye of Edge Hill University.

"As well as this, the more closely bonded these friendships were and the more people felt affiliated with their WhatsApp groups, the more this was related positively to their self-esteem and social competence," she said.

Two hundred users, 158 women and 41 men with an average age of 24, participated in the study. It was published in the International Journal of Human-Computer Studies.

The researchers found that the average reported daily use of WhatsApp was around 55 minutes, with people using it because of its popularity and group chat function.

"Group affiliation also meant that WhatsApp

Nutrition mission

Cabinet nod to nutrition mission (The Hindu: 20190702)

<https://www.thehindu.com/news/cabinet-nod-to-nutrition-mission/article21244144.ece>

The Union Cabinet on Friday approved the launch of National Nutrition Mission with a target to reduce malnutrition and low birth weight by 2% each year. The government has budgeted ₹9,046 crore for the mission for a period of three years.

More than 10 crore people will be benefited by this programme. All the states and districts will be covered in a phased manner; to begin with the worst affected 315 districts will be targeted this financial year.

The core idea behind the mission is to converge all the existing programmes on a single platform. “One ministry alone working in its own silo can’t achieve this,” Women and Child Development Minister Maneka Gandhi said.

For example, the Pradhan Mantri Matruvandana Yojana, which provides support to pregnant and lactating women, works under the Ministry of Women and Child Development; while Mission Indradhanush, which seeks to increase rates of complete immunisation of women and children, functions under the Ministry of Health.

“The results of this, if we are on the right track, should show in a year. This is momentous,” Ms. Gandhi added.

The mission targets to bring down stunting in children. As per the National Family Health Survey, 38.4% of children in India have stunted growth. The mission plans to bring this down to 25% by 2022. It also aims to bring down anaemia among young children, women and adolescent girls by 3% every year.

Aadhaar or no aadhaar?

There remains confusion over whether or not Aadhaar is mandatory for all beneficiaries, many of who are children below the age of three years. Women and Child Development secretary R.K. Shrivastava said that it was mandatory, but no beneficiary would be denied benefits for the lack of Aadhaar card.

Linking food and nutrition security

“In a pilot study in Assam we found 3 lakh fake children enrolled in Anganwadis, which means pilferage of ₹30 lakh per day,” Ms. Gandhi said.

The ministry, however, was not clear as for children below the age of five biometrics cannot be recorded. “There has to be some sort of identification. This is a good question I think we have to work it out, so that it does not create more paperwork but at the same time avoid an Assam-like situation,” she added.

Posan Abhiyann

West Bengal and Odisha yet to implement BJP-led government's.. (The Times of India: 20190702)

Read more at:

http://timesofindia.indiatimes.com/articleshow/70014560.cms?utm_source=contentofinterest&utm_medium=text&utm_campaign=cppst

Dementia

Use of statins decreases mortality, stroke in dementia patients (New Kerala: 20190702)

<https://www.newkerala.com/news/read/167130/use-of-statins-decreases-mortality-stroke-in-dementia-patients.html>

The use of statins in dementia patients is significantly linked to reduced mortality and stroke risks among the patients, new research shows.

According to a study presented at the '5th European Academy of Neurology (EAN) Congress', it was found that users of statins, a class of drug, had a 22 per cent lower risk of all-cause death compared to matched non-users.

The study analysed 44,920 Swedish dementia patients.

"Survival in patients in dementia is variable, and previous studies have identified many factors associated with survival and risk of stroke in these patients", said Bojana Petek, the study's first author.

"However, the effect of statins on these two outcomes is not clear. The aim of this study was to analyse the association between the use of statins on the risk of death and stroke in patients diagnosed with dementia," Petek added.

The research also demonstrated that statin users had a 23 per cent reduction in the risk of stroke, which is three times more likely in patients with mild dementia and seven times more likely in those with severe dementia.

The protective effect of statins on survival were strong for patients younger than 75 years (27 per cent reduction) and in men (26 per cent reduction) but women and older patients also benefitted (17 per cent and 20 per cent reduction respectively).

Patients with vascular dementia - the second most common type of dementia after Alzheimer's disease - also saw a 29 per cent lower mortality risk.

"This is a cohort study, which means patients were not randomized to a treatment like they would be in a clinical trial. For this reason, we can only show an association, and not definitely

prove that statins caused this decline in mortality. However, our results are encouraging and suggest that patients with dementia benefit from statins to a similar extent than patients without dementia," said Dr Sara Garcia-Ptacek, study's lead author.

Postmenopausal pear-shaped women

Postmenopausal pear-shaped women healthier than apple-shaped women: Study (New Kerala: 20190702)

<https://www.newkerala.com/news/read/167017/postmenopausal-pear-shaped-women-healthier-than-apple-shaped-women-study.html>

Every woman desires to have a perfect hourglass figure, but a recent study has revealed that postmenopausal pear-shaped women are healthier than apple-shaped women. In fact, apple-shaped women are at an increased risk of heart and blood vessel problems, even if they have a normal, healthy body mass index (BMI).

The study published in the 'European Heart Journal' found that storing a greater proportion of body fat in the legs (pear-shaped) was linked to a significantly decreased risk of cardiovascular disease (CVD) in these women.

"Our findings suggest that postmenopausal women, despite having normal weight, could have a varying risk of cardiovascular disease because of different fat distributions around either their middle or their legs. In addition to overall body weight control, people may also need to pay attention to their regional body fat, even those who have healthy body weight and normal BMI," said Dr Qibin Qi, the lead researcher of the study.

The study involved 2,683 women who were part of the Women's Health Initiative in the USA, which recruited nearly 162,000 postmenopausal women between 1993 and 1998 and followed them until February 2017.

The research found that women in the top 25 per cent of those who stored most fat around their middle or trunk (apple-shaped) had nearly double the risk of heart problems and stroke when compared to the 25 per cent of women with the least fat stored around their middle.

In contrast, the top 25 per cent of women with the greatest proportion of fat stored in their legs had a 40 per cent lower risk of CVD compared with women who stored the least fat in their legs.

The researchers found that the highest risk of CVD occurred in women who had the highest percentage of fat around their middle and the lowest percentage of leg fat - they had a more than three-fold increased risk compared to women at the opposite extreme with the least body fat and the most leg fat.

When women reach the menopause, they can undergo changes in their body shape and metabolism; more fat may be stored around the organs in the body rather than underneath the skin. In addition, the distribution of body fat is determined by both genetics and exposure to environmental factors, such as diet and exercise.

Eating disorder

Don't ignore eating disorder (New Kerala: 20190702)

<https://www.newkerala.com/news/read/167005/dont-ignore-eating-disorder.html>

With a shift in lifestyle many people suffer from eating disorders without even realising the harmful effects it can have on their health.

People with an eating disorder have higher rates of other conditions including prescriptions in the years before their diagnosis, shows a study, which was published in the 'British Journal of Psychiatry'.

"I cannot emphasise enough the importance of detection and early intervention for eating disorders. Delays in receiving diagnosis and treatment are sadly common and also associated with poorer outcomes and great suffering," says Dr Jacinta Tan, lead researcher of the study.

Eating disorders have the highest mortality of all mental illnesses, both from physical causes and from suicide.

"Eating disorders can have a devastating impact on individuals and their families. So this study is very timely," says Keith Lloyd, chair of the Royal College of Psychiatrists Wales.

The research team from Swansea University Medical School examined anonymised electronic health records. 15,558 people in Wales were diagnosed as having eating disorders between 1990 and 2017.

In the two years before their diagnosis, data showed that these 15558 people had higher levels of other mental disorders such as personality or alcohol disorders and depression, higher levels of accidents, injuries and self-harm, higher rate of prescription for central nervous system drugs such as antipsychotics and antidepressants and higher rate of prescriptions for gastrointestinal drugs.

High blood pressure

Children end up having high blood pressure if born with lower vitamin D (New Kerala: 20190702)

<https://www.newkerala.com/news/read/166971/children-end-up-having-high-blood-pressure-if-born-with-lower-vitamin-d.html>

A recent study discovered that vitamin D deficiency from birth to early childhood is associated with an increased risk of elevated blood pressure in later childhood and adolescence.

According to the study published in the Journal of Hypertension, researchers examined 775 children from birth to age 18. Later when they compared children who were born with adequate

vitamin D levels, they found that children born with low levels of vitamin D had an approximately 60 per cent higher risk of elevated systolic blood pressure (values that determine whether your blood pressure is normal, too high or too low) between ages 6 and 18.

Secondly, the researchers discovered that children who had persistently low levels of vitamin D through early childhood had double the risk of elevated systolic blood pressure between ages 3 and 18.

And lastly, they found that high systolic blood pressure readings increase the risk of cardiovascular disease even when diastolic blood pressure, the second number in a blood pressure reading, is controlled.

"Currently, there are no recommendations from the American Academy of Pediatrics to screen all pregnant women and young children for vitamin D levels. Our findings raise the possibility that screening and treatment of vitamin D deficiency with supplementation during pregnancy and early childhood might be an effective approach to reduce high blood pressure later in life," said Guoying Wang, the study's lead author.

Wang added that what constitutes optimal circulating vitamin D levels during pregnancy and early childhood remains an active research question and that their study results need to be replicated in other large populations.

Vitamin D is needed for the body to absorb calcium for strong bones. It is made by our bodies when we are exposed to sunlight and found in a few foods, such as eggs, salmon and fortified milk products. It is also available as a vitamin supplement.

High blood pressure is a leading, preventable cause of cardiovascular disease worldwide. Along with an increase in obesity among children, the prevalence of high blood pressure in children has been on the rise in recent years. High blood pressure in childhood is an important risk factor for having high blood pressure and developing cardiovascular disease in adulthood.

Lifelong medical care

Lifelong medical care can help people with single lower heart chamber to survive (New Kerala: 20190702)

<https://www.newkerala.com/news/read/166956/lifelong-medical-care-can-help-people-with-single-lower-heart-chamber-to-survive.html>

A recent study on Fontan procedure, a method used for redirecting blood flow from the lower body to the lungs, discovered that the procedure allowed more people born with only one ventricle of the heart to survive into adulthood, but requires lifelong medical care.

The study published in the journal of Circulation summarised the current state of knowledge on Fontan circulation and how best to care for these unique patients.

There are two ventricles in a normal heart - one pumps blood to the lungs and the other pumps blood to the rest of the body. In children born with only one ventricle, a surgical procedure (the

Fontan procedure) diverts blood returning from the veins directly to the main pulmonary artery leading to the lungs, instead of being pumped from the heart.

Typically, people with Fontan circulation have chronically elevated pressure in their veins and less blood being pumped out of their heart. This can lead to circulatory failure because when the heart pumps less efficiently it is not able to provide enough oxygen to the cells in the body. In addition, these patients often experience ventricular dysfunction, heart failure, heart rhythm disturbances and problems with their liver, kidneys, bones and other organ systems.

The statement provided recommendations for follow-up care for patients with Fontan circulation, including guidance on strategies for maintaining the health of the heart and organs through 'surveillance testing' - routine, systematic evaluation of both cardiovascular and other organs affected by Fontan circulation.

Gaps in knowledge and areas for future investigation are also highlighted, with the objective of laying the groundwork for creating a normal quality and duration of life for these unique individuals

"We need more research into the basic biology of single ventricle hearts and whether the damage to other organ systems, such as kidneys, liver, and brain can be mitigated or reversed," said one of the researchers, Jack Rychik.

Although life expectancy for people born with one ventricle is lower than average, people with Fontan circulation can live a rich and fulfilling life.

"We are entering a new phase in the management of patients born with one ventricle. Provided that patients undergo regular follow-up with their healthcare provider, adopt a healthy lifestyle and are encouraged to participate in investigational clinical protocols and research, healthcare providers and patients can share an optimistic and hopeful view for a brighter future," Rychik said.

The worldwide population of patients with Fontan circulation grew to an estimated 50,000 to 70,000 patients in 2018, with 40 per cent of patients aged 18 years or older.

"Patients with Fontan circulation are going to consume an ever-increasing amount of resources as they grow in number and age into adult life. Healthcare providers, both pediatric and adult, will need to increase their understanding and knowledge of this unique cardiovascular condition in order to maintain and improve their quality of life," Rychik said.

Vitamin D deficiency

Vitamin D deficiency at birth ups risk of high BP in kids New Kerala: 20190702)

<https://www.newkerala.com/news/read/166884/vitamin-d-deficiency-at-birth-ups-risk-of-high-bp-in-kids.html>

Those with vitamin D deficiency from birth to early childhood may be at 60 per cent higher risk of elevated systolic blood pressure between ages 6 and 18, says a study.

Systolic refers to the first or top number in a blood pressure reading. High systolic blood pressure readings increase the risk of cardiovascular disease even when diastolic blood pressure, the second number in a blood pressure reading, is controlled.

"Our findings raise the possibility that screening and treatment of vitamin D deficiency with supplementation during pregnancy and early childhood might be an effective approach to reduce high blood pressure later in life," said lead author Guoying Wang, Assistant Scientist at Johns Hopkins University Bloomberg School of Public Health in Baltimore, Maryland, US.

For the study, the researchers followed 775 children from birth to age 18 at the Boston Medical Center.

Low vitamin D levels were defined as less than 11 ng/ml (nanograms per millimetre) in cord blood at birth and less than 25 ng/ml in a child's blood during early childhood.

Vitamin D is needed for the body to absorb calcium for strong bones. It is made by our bodies when we are exposed to sunlight and found in a few foods, such as eggs, salmon and fortified milk products. It is also available as a vitamin supplement.

Study (Reading Habit) (Hindustan: 20190702)

http://epaper.livehindustan.com/imageview_108803_96515084_4_1_02-07-2019_i_20.pagezoomsinwindows.php

बचपन में पढ़ाई की अवधि बढ़ाने से रोग होने के खतरे को कम किया जा सकेगा

ज्यादा समय तक पढ़ना दिल को तंदुरुस्त रखेगा



वाशिंगटन | एजेसी

बचपन में पढ़ाई की अवधि को बढ़ाने से वयस्क होने पर दिल की बीमारियों के खतरे को कम किया जा सकेगा। एक हालिया शोध में यह दावा किया गया है। शोधकर्ताओं के अनुसार जो लोग ज्यादा पढ़े-लिखे होते हैं, उनमें दिल संबंधी बीमारियों का खतरा कम होता है क्योंकि उनकी कमाई ज्यादा होती है और वे अच्छे खानपान और चिकित्सा सुविधाओं का खर्च वहन कर पाते हैं। पत्रिका प्लोस मेडिसिन में प्रकाशित शोध के अनुसार अगर प्रशासन द्वारा स्कूल में पढ़ने वाले छात्रों की पढ़ाई की अवधि में कुछ साल और जोड़ दिए जाएं तो इन बच्चों के वयस्क होने पर इनमें कई दिल संबंधी बीमारियों का खतरा कम होगा। अमेरिका की



2.5

फीसदी तक कम होता है दिल की बीमारियों का खतरा पढ़ाई की अवधि में एक साल की बढ़ोतरी करने से

डॉक्टर शिक्षा के कारकों को ध्यान में रखें

अमेरिकन कॉलेज ऑफ कार्डियोलॉजी और अमेरिकन हार्ट एसोसिएशन के 2019 के गाइडलाइन में सुझाव दिया गया है कि मरीजों की दिल संबंधी बीमारियों के बारे में अनुमान लगाने के लिए उनके शिक्षा के कारकों को ध्यान में रखना जरूरी है। बीमारियों के बारे में अनुमान लगाने के लिए पारंपरिक कारकों जैसे कोलेस्ट्रॉल और मधुमेह की तुलना में शिक्षा के स्तर के बारे में पता लगाना ज्यादा फायदेमंद साबित हो सकता है। यूएस स्वास्थ्य विभाग ने सुझाव दिया है कि इलाज करने वाले डॉक्टरों की पेमेंट के लिए भी शिक्षा के स्तर पर जोर दिया जाए।

स्टैनफोर्ड यूनिवर्सिटी और यूसी सैन फ्रांसिस्को ने एक प्राकृतिक शोध किया जिसमें स्कूल के अनिवार्य कानूनों,

जिसके तहत यह तय किया जाता है कि बच्चों को कितने समय तक स्कूल आना चाहिए, की जांच की गई।

दो बड़े नेशनल सर्वे के डाटा की जांच

इस दौरान दो बड़े नेशनल सर्वे के डाटा की जांच की गई। यह सर्वे 1971 से 2012 के बीच किया गया था। शोधकर्ताओं ने देखा कि 1900 से 1950 के बीच में जन्मे 75 हजार लोगों के लिए 0 से 12 साल की उम्र के बच्चों का स्कूल जाना अनिवार्य था। इसके बाद उन्होंने यूएस के जनगणना के आंकड़ों का इस्तेमाल कर यह अनुमान लगाया कि हर व्यक्ति को स्कूलिंग के लिए कितने साल दिए गए। शोध में मौजूद एक तिहाई प्रतिभागी हाईस्कूल से ग्रेजुएट ही नहीं हुए। इनमें से वयस्क होने पर 34.5 फीसदी लोगों को दिल संबंधी बीमारियां हो गईं।

एक साल ज्यादा पढ़ने से स्वास्थ्य बेहतर हुआ

शोधकर्ताओं ने देखा कि एक साल ज्यादा पढ़ने से दिल का स्वास्थ्य बेहतर हुआ। धूम्रपान छोड़ देने से दिल संबंधी बीमारियों में 3% की कमी और अवसाद कम होने से पांच फीसदी की कमी दर्ज की गई। प्रमुख शोधकर्ता रीता हमाद ने कहा, अमीरों और गरीबों में दिल संबंधी बीमारियों के बढ़ते अंतर से डॉक्टर और चिकित्सक भी परेशान हैं। शोध सुझाव देता है कि दिल संबंधी बीमारियों में सामाजिक कारक जैसे शिक्षा महत्वपूर्ण भूमिका निभाती है।

Pregnancy – Migrain ((Hindustan: 20190702)

http://epaper.livehindustan.com/imageview_108803_96547122_4_1_02-07-2019_i_20.pagezoomsinwindows.php

दावा : गर्भवती महिलाओं में माइग्रेन खतरनाक

लंदन | एजेंसी

गर्भवती महिलाओं को माइग्रेन होने से अधिक खतरा हो सकता है। इससे गर्भपात होने, सर्जरी से बच्चा पैदा होने और कम वजन वाले बच्चे का जन्म होने का खतरा बढ़ जाता है। एक हालिया शोध में यह दावा किया गया है।

डेनमार्क की आरहुस यूनिवर्सिटी के शोधकर्ताओं ने माइग्रेन से पीड़ित 22,000 गर्भवती महिलाओं के साथ काम करने के बाद यह निष्कर्ष निकाला है। इन महिलाओं की तुलना अन्य गर्भवती महिलाओं से की गई जो माइग्रेन से पीड़ित नहीं थीं। पत्रिका हेडएक में प्रकाशित शोध के अनुसार माइग्रेन से

शोध

- माइग्रेन का इलाज नहीं होने पर गर्भपात का खतरा बढ़ता है
- माइग्रेन की दवा से गर्भावस्था में जटिलताएं कम होती हैं

पीड़ित गर्भवती महिलाओं में सामान्य महिलाओं की तुलना में सी सेक्शन सर्जरी होने का खतरा 15-25 फीसदी तक बढ़ जाता है। डेनमार्क में करीब 20 फीसदी बच्चों का जन्म सर्जरी के से ही किया जाता है। शोधकर्ताओं ने कहा कि माइग्रेन के लिए ली जाने वाली दवाओं से गर्भावस्था में आने वाली जटिलताओं को कुछ हद तक कम कर सकते हैं।