Monkeypox cases

Gay men asked to be alert as monkeypox cases rise to 7 in UK

The UK Health Security Agency (UKHSA) said on Monday evening that all of the new cases, three in London and one in the north-east of England, self-identify as gay, bisexual or other men who have sex with men (MSM) (The Tribune: 20220518)


Gay and bisexual men are being urged to be alert to unusual rashes or lesions after four new cases of the monkeypox virus were confirmed by UK health authorities, taking the total number of infections in the country to seven since the first case emerged earlier this year.

The UK Health Security Agency (UKHSA) said on Monday evening that all of the new cases, three in London and one in the north-east of England, self-identify as gay, bisexual or other men who have sex with men (MSM).

There is no link to travel to a country where monkeypox is endemic, and exactly where and how they acquired their infections remains under “urgent investigation”, including whether they have further links to each other, it said.

“We are particularly urging men who are gay and bisexual to be aware of any unusual rashes or lesions and to contact a sexual health service without delay,” said Dr Susan Hopkins, UKHSA Chief Medical Adviser.

“This is rare and unusual. UKHSA is rapidly investigating the source of these infections because the evidence suggests that there may be transmission of the monkeypox virus in the community, spread by close contact,” she said, adding that potential close contacts of the seven known cases are being contacted to provide health information and advice.
Currently, common contacts between the cases have been identified for two of the four latest cases. Those patients needing medical care are all in specialist infectious disease units at the Royal Free Hospital, Royal Victoria Infirmary in Newcastle upon Tyne and Guys’ and St. Thomas’ in London.

The UKHSA said they all have the West African clade of the virus, which is “mild” compared to the Central African clade.

“Due to the recent increase in cases and uncertainties around where some of these individuals acquired their infection, we are working closely with NHS [National Health Service] partners to identify if there may have been more cases in recent weeks, as well as international partners to understand if similar rises have been seen in other countries,” the health agency said.

Monkeypox is a viral infection usually associated with travel to West Africa. It is usually a mild self-limiting illness, spread by very close contact with someone with monkeypox and most people recover within a few weeks.

“The virus does not spread easily between people and the risk to the UK population is low. However, the most recent cases are in gay, bisexual and other MSM communities, and as the virus spreads through close contact, we are advising these groups to be alert to any unusual rashes or lesions on any part of their body, especially their genitalia, and to contact a sexual health service if they have concerns,” the UKHSA said.

The health authorities are urging anyone with concerns that they could be infected with monkeypox to make contact with clinics ahead of their visit, reiterating that their discussion will be treated “sensitively and confidentially”.

“Clinicians should be alert to individuals presenting with rashes without a clear alternative diagnosis and should contact specialist services for advice,” the agency said. Initial symptoms of monkeypox include fever, headache, muscle aches, backache, swollen lymph nodes, chills and exhaustion.

A rash can develop, often beginning on the face, then spreading to other parts of the body including the genitals. The rash changes and goes through different stages, and can look like chickenpox or syphilis, before finally forming a scab, which later falls off.

Covid mortality

**Estrogen treatment linked with reduced covid mortality: Study**

Younger women or those with higher estrogen levels less likely to experience covid-19 complications, according to researchers (The Tribune: 20220518)

Receiving hormone replacement therapy within six months of a recorded diagnosis of covid-19 was associated with a reduction in mortality from the viral disease, according to a study.

The research, published in the journal Family Practice, analysed the association between hormone replacement therapy or combined oral contraception use, and the likelihood of death in women with covid-19.

The researchers from the University of Oxford and the University of Southampton in the UK investigated combined oral contraception, which contains estrogen, because some recent observational data suggested that women taking oral contraceptives had a lower risk of acquiring covid-19.

They used a retrospective cohort with medical records from the Oxford-Royal College of General Practitioners Research and Surveillance Centre primary care database.

The team identified a group of 18,63,478 women over 18 from 465 general practices in England.

There were 5,451 covid-19 cases within the cohort. Hormone replacement therapy was associated with a 22 per cent reduction in all-cause mortality in covid-19, the researchers said.

This suggests that estrogen may contribute a protective effect against covid-19 severity.

This may explain why fewer women compared to men have been hospitalised, admitted to intensive care, or died due to covid-19 during the pandemic, they said.

"This study supports the theory that estrogen may offer some protection against severe covid-19," said Christopher Wilcox, one of the authors of the research paper.

"We hope that this study can provide reassurance to patients and clinicians that there is no indication to stop hormone replacement therapy because of the pandemic," Wilcox added.

The researchers noted that although men and women are equally susceptible to the SARS-CoV-2 virus, men tend to have more severe infections.

Younger women or those with higher estrogen levels are less likely to experience covid-19 complications, according to the researchers.

"The reason for these sex differences is uncertain. Limited recent observational data suggest that estrogen may reduce the severity of covid-19 disease," the authors of the study noted.
Robotic surgery

Robotic surgery improves patient recovery time, reduces complications: UK study

Patients’ physical activity—assessed by daily steps tracked on a wearable smart sensor—stamina and quality of life also increased after robotic surgery (The Tribune: 20220518)

Robotic surgery improves patient recovery time, reduces complications: UK study
Photo for representation. — iStock


Robotic surgery may reduce the chance of hospital readmission by over 50 per cent, and prevalence of blood clots by 77 per cent, when compared to patients who undergo an open surgery, according to a study conducted in the UK.

The research, published in the Journal of the American Medical Association (JAMA), also found that patients’ physical activity—assessed by daily steps tracked on a wearable smart sensor—stamina and quality of life also increased after a robotic surgery.

The findings provide the strongest evidence so far of the patient benefit of robot-assisted surgery and researchers are now urging National Institute of Clinical Excellence (NICE) to make it available as a clinical option across the UK for all major abdominal surgeries including colorectal, gastro-intestinal, and gynaecological.

“This is an important finding. Time in hospital is reduced and recovery is faster when using this advanced surgery,” said study co-chief investigator James Catto, a professor at the University of Sheffield in the UK.

“Ultimately, this will reduce bed pressures and allow patients to return home more quickly. We see fewer complications from the improved mobility and less time spent in bed,” Catto said in a statement.

Despite robot-assisted surgery becoming more widely available, there has been no significant clinical evaluation of its overall benefit to patients’ recovery.

“In this study we wanted to establish if robot-assisted surgery, when compared to open surgery reduced time spent in hospital, reduced readmissions, and led to better levels of fitness and a quality of life; on all counts this was shown,” said study co-chief investigator, John Kelly, a professor at the University College London (UCL).
“An unexpected finding was the striking reduction in blood clots in patients receiving robotic surgery; this indicates a safe surgery with patients benefiting from far less complications, early mobilisation and a quicker return to normal life,” Kelly said.

Unlike open surgery, where a surgeon works directly on a patient and involves large incisions in the skin and muscle, robot-assisted surgery allows surgeons to guide minimally invasive instruments remotely using a console and aided by three dimensional (3D) view.

However, it is currently only available in a small number of UK hospitals.

Across nine UK hospitals, 338 patients with non-metastatic bladder cancer were randomised into two groups: 169 patients had robot-assisted bladder removal with intracorporeal reconstruction (process of taking section of bowel to make new bladder), and 169 patients had open radical cystectomy.

On average, the robot-assisted group stayed eight days in hospital, compared to 10 days for the open surgery group, a 20 per cent reduction, the researchers said.

Readmittance to hospital within 90 days of surgery was also significantly reduced -- 21 per cent for the robot-assisted group vs 32 per cent for open, they said.

A further 20 secondary outcomes were assessed at 90 days, six- and 12-months post-surgery. These included blood clot prevalence, wound complications, quality of life, disability, stamina, activity levels, and survival.

All secondary outcomes were improved by robot-assisted surgery or, if not improved, almost equal to open surgery, according to the researchers.

This study, and previous studies, show both robot-assisted and open surgery are equally as effective in regards cancer recurrence and length of survival.

Open surgery remains the “gold standard” recommendation for highly complex surgeries, though the research team hopes this could change.

“In light of the positive findings, the perception of open surgery as the gold standard for major surgeries is now being challenged for the first time,” Kelly said.

“We hope that all eligible patients needing major abdominal operations can now be offered the option of having robotic surgery,” he added.

High BP (The Tribune: 20220518)

HIGH BP IS A SILENT KILLER, DO NOT IGNORE

Doctors explain in detail about this quiet killer disease, including the risk factors, diagnosis, treatment, measures to keep it under control and ways to take correct BP readings at home.

“"If there is a family history, get BP checked annually right from the age of 15. Limit the intake of salt, ensure to get 30 minutes one hour of moderate intensity exercise (brisk walking) at least four days a week. Prevent getting overweight or obese. Completely stop smoking and limit alcohol intake to maximum 60 ml that too occasionally in a tropical climate like India’s."”

— Dr Ravi Kanth Athalhuri, senior cardiologist, Yashoda Hospital

**DIAGNOSIS AND TREATMENT**

The higher the BP is above the normal (140/90), the more risky it is. High BP is usually detected while checking the BP for some other disease like fever. "Hypertension crisis can be 2 types — emergency & urgent. An emergency is where the BP is dangerously high like 220/120, there is organ damage and bleeding and there is need to immediately bring it down. The urgent can also be urgent where the BP has to be brought down within a couple of days, there may be an infarct but no bleeding. If Hypertension is detected in stage 1 (moderate or stage 2 (moderate)), we suggest lifestyle modifications for three months and two months respectively before prescribing medicines. In stage 3 (severe), we suggest (lifestyle modification for a month before prescribing medicines. However, a person's age, gender, overall health, co-morbidities are taken into consideration before prescribing medicines," says Dr Ravi Kanth.

"Once hypertension is detected and if the patient has been prescribed medicines to keep BP in check, it has to be continued lifelong. Depending on his condition, the dosage can be increased or minimized by the doctor but it should not be stopped by the patient on his own," adds the doctor.
Viral infection

Monkeypox cases detected in United Kingdom; All you need to know about the viral infection
WHO states on its website that cases are often found "close to tropical rainforests where there are animals that carry the virus" (The Indian Express: 20220518)

https://indianexpress.com/article/lifestyle/health/united-kingdom-monkey-pox-cases-infection-symptoms-causes-transmission-treatment-7921544/

monkeypox

Monkeypox continues to occur in countries of Central and West Africa (Representative) (Source: Wikimedia Commons)
Cases of monkeypox virus have been confirmed in the United Kingdom. While some of the infected people had travel history to Nigeria, health authorities are yet to ascertain the source of transmission in others. The virus has been termed endemic to Nigeria and is considered ‘rare and unusual’.

Also Read | Viral infections can be now be treated with engineered proteins: Research
Though there are no cases of the virus reported in India, here’s all you need to know about the infection.

What is it?

A zoonosis disease, which is transmitted from animals to humans, monkeypox is an orthopoxvirus that causes a disease with symptoms similar, but less severe, to smallpox. “Monkeypox virus belongs to the Orthopoxvirus genus in the family Poxviridae. It was discovered in 1958 when two outbreaks of a pox-like disease occurred in lab monkeys that were kept for research, from which the name has originated,” said Dr Vikrant Shah, consulting physician, intensivist, and infection disease specialist, Zen Multispeciality Hospital Chembur.

According to World Health Organization (WHO), while smallpox was eradicated in 1980, monkeypox continues to occur in countries of Central and West Africa.

The main difference between symptoms of smallpox and monkeypox is that monkeypox causes lymph nodes to swell (lymphadenopathy) while smallpox does not, according to CDC (Source: Getty Images/Thinkstock)
How is it transmitted?

On its website, WHO states that cases are often found “close to tropical rainforests where there are animals that carry the virus”. Evidence of monkeypox virus infection has been found in
animals including squirrels, Gambian poached rats, dormice, different species of monkeys and others, it reads.

Also Read |Nipah virus: Know its symptoms, treatment options and preventive measures
It is transmitted through contact with bodily fluids, lesions on the skin or on internal mucosal surfaces, such as in the mouth or throat, respiratory droplets and contaminated objects.

Signs and symptoms

According to Centers for Disease Control and Prevention (CDC), monkeypox begins with fever, headache, muscle aches, and exhaustion. The incubation period (time from infection to symptoms) for monkeypox is usually 7-14 days but can range from 5-21 days.

Within 1 to 3 days (sometimes longer) after the appearance of fever, the patient develops a rash, often beginning on the face then spreading to other parts of the body.

How is it detected?

Detection of viral DNA by polymerase chain reaction (PCR) is the preferred laboratory test for monkeypox, WHO notes. The best diagnostic specimens are directly from the rash – skin, fluid or crusts, or biopsy where feasible. Antigen and antibody detection methods may not be useful as they do not distinguish between orthopoxviruses. “Typically, up to a tenth of persons suffering from monkey pox may die, with most deaths occurring in younger age groups,” said Dr Shuchin Bajaj, founder director, Ujala Cygnus Group of Hospitals.

Also Read |Viral infections more dangerous during morning: Study
How is it different from small pox?

The main difference between symptoms of smallpox and monkeypox is that the latter causes lymph nodes to swell (lymphadenopathy) while smallpox does not, according to CDC.

Treatment

Currently, there is no proven, safe treatment for monkeypox virus infection, notes CDC while mentioning that for purposes of controlling a monkeypox outbreak in the United States, smallpox vaccine, antivirals, and vaccinia immune globulin (VIG) can be used. “There is no treatment for it but vaccination against smallpox can be effective in preventing monkeypox,” said Dr Shah.

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Abortion conversation

Crypto joins the abortion conversation
Boosters have promoted blockchain technology as a solution to just about every global problem, while, at the same time, cryptocurrency has created plenty of new ones — regulatory, environmental and otherwise — and helped some of the wealthiest people grow even richer" (The Indian Express: 20220518)


Abortion rights activists and nonprofit leaders see a fundraising opportunity. (Source: Mark Pernice/The New York Times)
Written by Anna P. Kambhampaty, Alisha Haridasani Gupta and Valeriya Safronova

In the loud and confusing world of cryptocurrencies, fundraising efforts are forming around all sorts of causes. Groups known as decentralized autonomous organizations, or DAOs, have sent aid to Ukrainians whose lives have been upended by war, worked to offset carbon emissions, bought land and collected NFTs.

Now, after the leak of a Supreme Court draft opinion that would overturn Roe v. Wade, entrepreneurs and activists are floating ideas for an abortion-focused DAO. They see it as a way to provide money to women in more than two dozen states where abortion services may soon be severely restricted or banned — a kind of “Underground Railroad for abortion,” as Reshma Saujani, the founder of Girls Who Code and a host of the “De-Broing Crypto” podcast, put it in an interview.

ALSO READ |Why access to abortion is essential healthcare for women
The hubris of crypto idealists often draws the ire of critics on the internet, and with good reason. Boosters have promoted blockchain technology as a solution to just about every global problem, while, at the same time, cryptocurrency has created plenty of new ones — regulatory, environmental and otherwise — and helped some of the wealthiest people grow even richer.

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And although many crypto enthusiasts dangle the lure of anonymity — an especially salient issue if Roe is overturned — because of the precision with which the blockchain traces transactions, paying for abortions using crypto could potentially have the opposite effect: exposing both the women getting abortions and the people paying for them. Not to mention that the crypto market just went through a major crash and regularly experiences wild price fluctuations.

Still, abortion rights activists and nonprofit leaders see a fundraising opportunity. (Several anti-abortion groups already accept cryptocurrency donations.)

Here’s how they think an abortion-rights DAO would work: Members would pool funds that would be used to pay for out-of-state travel, in-clinic procedures and the pills that account for 54% of abortions in the United States. Grassroots abortion funds have been doing similar work for decades, and multinational corporations such as Amazon and Citigroup have agreed to help employees cover travel costs. (In many states, there could soon be legal consequences for financially facilitating abortions.) DAOs have raised huge sums of digital currencies in short periods of time; abortion rights groups are in a rush to do just that.

Dr. Giovannina Anthony, an OB-GYN, feels the urgency acutely. She works at a small practice in Jackson, Wyoming — the only office in the state that provides abortions. If Roe is overturned, a trigger law will effectively ban all abortions in the state. Should that happen, she said, providers and women seeking abortions will confront new hurdles and costs.

“They’re going to have to try and find child care. They’re going to risk losing their jobs. They’re going to have to pay for super-expensive gas,” Anthony said. “We’re in uncharted territory.”

Given the challenges of crypto, what may be most exciting about its role in the abortion debate — on both sides — is the problem fundraisers have always faced: how to raise money quickly.

Crypto for a Cause

Last year, thousands of people raised more than $40 million in Ether, a top cryptocurrency, through a DAO in just a week with the hope of buying a first printing of the U.S. Constitution. Then the DAO lost the auction to Ken Griffin, billionaire founder of the hedge fund Citadel, and the group began to dissolve.

Jonah Erlich, a core contributor, still thinks ConstitutionDAO was a valuable experiment. “The speed at which we were able to move, as well as how many people were able to contribute, was a big success,” he said. (Refunding contributors has been much harder; the group had to cover the high transaction fees associated with the Ethereum blockchain, so it’s working with less money than it raised. “That is a problem that’s still being worked on,” Erlich said.)

Separately, UkraineDAO, organized in part by Nadya Tolokonnikova of Pussy Riot, raised more than $7 million in a few days by selling an NFT of a Ukrainian flag. In March, Ukrainian President Volodymyr Zelenskyy signed into law a bill legalizing cryptocurrency exchanges in the country. As of that month, according to Alex Bornyakov, Ukraine’s deputy minister of digital transformation, the country had received nearly $100 million in crypto donations.
But these are isolated examples in what remains for many an impenetrable sphere of finance. Only 16% of Americans have experience with cryptocurrencies — through investing, trading or paying for things — according to a recent Pew survey, and more than half of them are men. Affluent men. Those demographics can mean that the fanciful projects some crypto entrepreneurs have proposed don’t always reflect public interests, and can seem driven by impulse.

“Anytime there’s a problem, people say that crypto or web3 is going to be the solution without putting much thought into it,” said Molly White, a software developer who has been archiving crypto crashes and missteps on a website called Web3 Is Going Just Great.

Activists and nonprofits are considering digital currencies as a way to raise funds. But can they really do anything other payment methods can’t? (Source: Mark Pernice/The New York Times) White pointed to the crypto project Nemus, which aims to raise funds for the Amazon rainforest. “People are talking about protecting portions of the Amazon rainforest, but they’re using blockchains that are very damaging to the environment,” she said, referring to the energy-intensive process of putting cryptocurrencies into circulation. “It’s like they don’t see the damage they’re doing with the solutions that they’re proposing.”

There have been attempts to make crypto donations more accessible to charitable organizations. Change, a company that sells an interface for web donations, recently created a nonprofit arm that manages crypto wallets for charitable organizations. The point is to avoid “putting the daunting security, technical and accounting burden on them,” said Change CEO Sonia Nigam. Donations are paid out to those organizations — including Girls Who Code, Make-A-Wish Foundation and One Tree Planted — in the form of grants.

Most national abortion nonprofits and health care providers still do not accept cryptocurrency. Elliott Kozuch, a senior communications strategist at the nonprofit NARAL Pro-Choice America, wrote in an email that “crypto has not come up in conversation at NARAL, including in relation to the SCOTUS leak.”

But there could be a shift coming. Elissa Maercklein, CEO of Crypto Chicks, an NFT collective, said that the organization made a donation of 5 Ether (worth more than $15,000 at the time and around $10,000 as of Friday) to the International Planned Parenthood Federation in February; it was the first crypto donation the organization accepted.

“When I contacted them, they were a bit surprised, but excited to learn more,” Maercklein said. She has worked with IPPF to ensure the organization will accept crypto donations moving forward through a platform called the Giving Block. The platform also enables several anti-abortion groups, including Alliance Defending Freedom, National Right to Life and Students for Life of America, to accept donations in cryptocurrencies.

“We offer nonprofits the ability to protect donor privacy by allowing anonymous donations,” Alex Wilson, a founder of the Giving Block, wrote in an email. “This has become popular for human rights organizations where donors might not otherwise give for fear of retaliation or targeting based on a cause they support.”

The Privacy Question
Blockchain technology, which underpins every cryptocurrency exchange, produces a public ledger where all transactions are recorded. If that’s the case, is crypto really more private than other payments?

It can be. Monero and Zcash, for instance, are known as “privacy coins.” Unlike Bitcoin or Ethereum, Monero’s public ledger doesn’t show addresses or amounts for each transaction, making it harder to identify how funds are moving.

Justin Ehrenhofer, the vice president for operations at Cake Wallet, which allows people to store Monero, said the currency could be used to discreetly buy abortion pills in cases in which that may become illegal. (Right now, he said, common uses include black market purchases and ransomware payments.) But he noted that using Monero requires more technical expertise than Bitcoin or Ethereum.

In part because of the Silk Road, a digital black market where thousands of vendors sold drugs and other illegal goods from 2011-13, cryptocurrency is often thought of as a way to make private payments. But Sarah Meiklejohn, a professor of cryptography and security at University College London, said most digital currency payments were fairly traceable.

“The transactions that you make are less inherently tied to your name,” Meiklejohn said, because people typically use pseudonyms, but they are visible to everyone on a digital ledger. “Literally anyone in the world can go look at the transactions that are taking place.”

Pseudonyms, she said, “provide a really thin level of anonymity.” Chainalysis, which has become the U.S. government’s blockchain surveillance partner of choice, can identify patterns in transactions made through certain wallets, although a company representative said in an email that Chainalysis aims to protect individual privacy. Likewise, Coinbase, one of the more mainstream cryptocurrency exchanges, states on its website that it maintains records of transactions and may report some to law enforcement.

“With privacy, it’s like, once it’s out, it’s out,” Meiklejohn said.

Dr. Rebecca Gomperts, a physician and the director of Women on Waves, a nonprofit that provides resources for abortion seekers, found this to be the case when she tried setting up her own crypto wallet. “It had exactly the same diligence requests as a normal bank account, where you have to provide IDs and other information,” she said.

Legal scholars are not convinced that cryptocurrencies would shield patients in most cases. Abortion bans “will cover everything, whether you pay with cash or crypto,” said Rachel Rebouché, the interim dean at the Temple University Beasley School of Law and an author of a forthcoming paper called “The New Abortion Battleground.”

“If abortion is illegal in your state — it doesn’t matter whether you get a surgical abortion, a medication abortion, whether you self-manage your abortion — if it’s illegal, it’s illegal,” said
Kimberly Mutcherson, a dean and professor of law at Rutgers Law School who has focused on reproductive rights. (In the first three months of this year, 22 states introduced more than 100 restrictions on abortion pills approved by the Food and Drug Administration, according to the Guttmacher Institute, a reproductive health research group that supports abortion rights.)

Still, organizations such as Planned Parenthood are keeping an open mind about how they might raise and distribute funds.

Alexis McGill Johnson, president and CEO of Planned Parenthood, said the organization was “looking into a number of things” in the realm of cryptocurrencies but would not divulge details.

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**World Hypertension Day 2022**

**World Hypertension Day 2022: Six signs of high blood pressure you shouldn’t ignore**

If you detect these symptoms, it is suggested to seek treatment right away as "ignoring these signs and symptoms can lead to major problems later in life", Dr Shuchin Bajaj said" (The Indian Express: 20220518)


hypertension dayIgnoring blood pressure concerns can be fatal (Source: Getty Images/Thinkstock)

World Hypertension Day is observed on May 17 every year to increase awareness about hypertension or high blood pressure. This year’s theme is ‘Measure Your Blood Pressure Accurately, Control It, Live Longer’.

“Hypertension is known as the ‘silent killer’ for a reason. The majority of the time, there are no visible indicators of hypertension, and even if you do detect certain symptoms, you may dismiss them as normal exhaustion, work pressure, or tiredness due to exercising.” Dr Shuchin Bajaj, Founder-Director, Ujala Cygnus Group of Hospitals said.

ALSO READ |World Hypertension Day 2022: Five restorative yoga poses for high blood pressure

Ignoring blood pressure concerns, however, can be fatal, the expert warned. It can result in “heart attack, heart failure, aneurysm, stroke, memory loss, or dementia. Regular blood pressure monitoring is essential for avoiding major illnesses”.

Here are six warning symptoms of high blood pressure you should never ignore, according to Dr Bajaj.
Nose bleeds can occur due to sinusitis, constant blowing of the nose, or even high blood pressure, he explained. “If you are one of those who have had nasal bleeding, go to the doctor right away.”

Headache

Headache is a warning sign of high blood pressure (Source: Getty Images/Thinkstock)

Headaches

If you have a constant throbbing headache, chances are that your blood pressure is too high. Elucidating the same, the expert said, “A headache is common in patients with high blood pressure. Your peace of mind will be stolen by these annoying headaches. So stay alert and get treatment as soon as possible.”

Fatigue

A headache is common in patients with high blood pressure, he shared. Your peace of mind will be stolen by these annoying headaches. So stay alert and get treatment as soon as possible.

Shortness of breath

Dr Bajaj said, “People with high blood pressure may have difficulty breathing. This is one of the most prevalent symptoms of hypertension.”

Hypertension can also distort your vision. (Source: Getty Images/Thinkstock)

Blurred vision

Uncontrolled hypertension can cause vision problems. “As a result, visual issues will arise. His vision will be distorted,” he said.

ALSO READ |Incorporate these two lifestyle habits for better sleep

Chest pain

Chest pain is yet another symptom of high blood pressure. If you detect these symptoms, it is suggested to seek treatment right away as “ignoring these signs and symptoms can lead to major problems later in life”.

DELHI NEWS
Liver transplant

Liver transplant: New hope for patients as doctors overcome blood group hurdle
Use of blood group incompatible donors helps increase the donor pool in a country like India that largely depends on relatives to donate organs" (The Indian Express: 20220518)

Unlike most western countries, where ‘deceased donor transplantation’ is predominant (which involves transplantation of organs from a brain-dead person), 85 per cent of liver transplant cases in India use living donors. (Representational Photo)

Nearly 10 years ago, Zuana underwent a liver transplant to beat terminal liver failure. At the time, it had been 13 years since the first liver was successfully transplanted in India at Delhi’s Apollo hospital. But Zuana’s case was different. Her donor, her grandmother, did not have the same blood type and it was the first such surgery conducted by Dr Arvinder Soin.

“Our team started liver transplantation in India 23 years ago and since then we have done it in about 3,600 cases. Over the years, we have continuously tried to innovate to ensure more liver patients can be saved and more people have access to the treatment,” said Dr Soin, who is now the chairman of the liver transplant department at Gurugram’s Medanta hospital and one of the surgeons who conducted India’s first liver transplant in 1998.

Also Read |Combating heatwave: ‘Drink water but don’t overdo it. It can overload kidneys. Track urine output instead’
Use of blood group incompatible donors (referred to as ABO-incompatible transplant) is among the ways to increase the donor pool, especially in a country like India that largely depends on relatives to donate organs.

Unlike most western countries, where ‘deceased donor transplantation’ is predominant (which involves transplantation of organs from a brain-dead person), 85 per cent of liver transplant cases in India use living donors.

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Around 2.5 to 3 lakh people are diagnosed with liver disease or cancer every year in the country, of whom around 50,000 can be saved with transplantation. There are less than 100 centres for the surgery across the country, all of whom together perform about 1,800 liver transplants a year.

Additionally, a liver transplant registry was set up in 2019 to collect data from these centres on survival rates, complications reported, and immunosuppressants used to help improve care across the country.

ABO-incompatible transplant

When the donor from a family does not have the same blood type as the recipient, the surgeons may try one of two approaches – a swap or an ABO-incompatible transplantation, where the transplant is done using a donor of a mismatched blood type.

A swap is conducted when donors from two different families match the blood group of each other’s recipients. Both sets of donors and recipients are then called to the hospital the same day and two transplantation surgeries are conducted simultaneously. This is possible only at high volume centres, with a big database of patients, several operation theatres, and a huge transplantation team.

“We have done this in nearly 60 pairs with 95 per cent success. This is interesting because there is a medically fit donor in both the families, but they individually cannot donate to their family member for the transplant. A swap helps achieve success in such cases,” said Dr Soin.

The other approach, an ABO-incompatible transplant, is a scientific challenge.

If a person is transfused with the wrong blood type, it may result in a severe reaction of the immune system, where the cells of the donated blood get “shredded”, causing shock, kidney failure and even death. So, how is it that the surgeons are able to transplant an entire organ from a person with a different blood type?

To achieve success in the procedure, the patients have to undergo an immunomodulation protocol three weeks before the transplant, which mainly includes two things. One, a medicine is used to kill the B cells that produce antibodies against the other blood types. Two, plasmapheresis – a process which separates the blood to its components outside the body – is conducted to remove the antibodies that are already present.

“The interesting thing is once the transplant is done, the body adapts to the new liver with a different blood type within six to eight weeks. The immune reaction is just a short-term problem and with the immunomodulation protocol, the success is just about 2-3% less than in compatible donors. So, it is a very good option for those who do not have a blood type matched
donor. This is what Zuana underwent and it was the first such case in the country,” said Dr Soin.

**Cardiac arrests**

**Is there a reason why cardiac arrests often happen in the bathroom?**

*World Hypertension Day: "Most people spend an average 30 minutes or 2 per cent of their time per day in the toilet," said Dr Nityanand Tripathi (The Indian Express: 20220518)*

[https://indianexpress.com/article/lifestyle/health/world-hypertension-day-cardiac-arrest-bathroom-heart-attack-7921382/](https://indianexpress.com/article/lifestyle/health/world-hypertension-day-cardiac-arrest-bathroom-heart-attack-7921382/)

If you fall in the vulnerable group, having had a previous heart attack, it is wise to not lock the door while using the toilet/bathroom. (Photo: Getty/Thinkstock)

Many people want to prioritise heart health, but have limited knowledge about the signs and symptoms that indicate an unhealthy heart. This World Hypertension Day, Dr Nityanand Tripathi, the director and unit head — cardiology and electrophysiology at Fortis Hospital, Shalimar Bagh throws light on an important topic: the disproportionately-high rate of heart attacks and cardiac arrests in the bathroom.

Is there any truth to it, and if so, why does it happen?

According to the doctor, one first needs to understand what a cardiac arrest is. It is a condition where the heart stops beating, and when it happens, essential organs no longer get oxygenated blood, leading to collapse and loss of life. “A heart attack, on the other hand, is a condition wherein a part of the heart stops getting oxygenated blood because of sudden clot formation in a blood vessel supplying blood to that part of the heart. Both are life-threatening,” he explains.

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Since bathrooms are private places, detection and resuscitation are always delayed, and outcomes are, therefore, poor. The frequency of collapse is 8 per cent, and the chances of revival a dismal 13 per cent, he mentions.

According to the expert, the most common cause of heart attack and sudden cardiac death in the toilet is a consequence of defecation/micturition syncope. “There is a decrease in blood pressure during straining because of an imbalance between the sympathetic and parasympathetic autonomic nervous system; this leads to a decrease in blood flow to the brain and loss of consciousness. These events may also lead to a sudden surge in blood pressure, heart attacks, and sudden cardiac arrest in the toilet and bathroom,” he explains.

World Hypertension Day, World Hypertension Day 2022, heart attack, cardiac arrest, cardiac arrest in the bathroom, heart health, indian express news Taking a bath in water that is too cold can lead to blood flow from all sides towards the head, increasing the stress on arteries and capillaries. (Photo: Getty/Thinkstock)
The other causes, he says, may be rushing to the toilet after feeling sick, nausea/vomiting, and collapsing.

“Taking a shower — either too cold or too hot — can impact heart rate, blood pressure, and distribution of blood flow. Taking a bath in water that is too cold can lead to blood flow from all sides towards the head, increasing the stress on arteries and capillaries, which may cause cardiac events.”

ALSO READ | Why heart disease in women is so often missed or dismissed
Some things to keep in mind, according to Dr Tripathi:

* One must not strain too much during defecation or passing urine. Take your time while getting relieved.
* Avoid water that is too hot or too cold. Do not start pouring water directly on the head; start washing the feet or shoulder and gradually move up.
* Avoid getting exposed to a cold environment in the bathroom/toilet, especially in winters, as it may trigger a heart attack.
* If you fall in the vulnerable group, having had a previous heart attack, angina, old age, your heart pumping power is weak, you have had a stroke or multiple comorbidities, it is wise to not lock the door while using the toilet/bathroom.
* Toilets/bathrooms used by the vulnerable should have alarms handy, so that help can come in time.
Sudden Infant Death Syndrome

Explained | What a new study on Sudden Infant Death Syndrome says about the disease" (The Hindu: 20220518)

A study led by Dr. Carmel Harrington found that the BChE enzyme level in infants who died of Sudden Infant Death Syndrome—the unexpected death of an apparently healthy infant—was significantly low.

The story so far: A team of researchers in Australia has identified a biochemical marker in the blood that could help identify newborn babies at risk for the Sudden Infant Death Syndrome (SIDS).

According to the findings of the research, babies who died of SIDS showed lower levels of the butyrylcholinesterase (BChE) enzyme shortly after birth. A low level of the BChE enzyme affects a sleeping infant’s ability to wake up or respond to their environment. The enzyme is an important part of the autonomic nervous system of the body and controls unconscious and involuntary functions.

liver diseases

Doctors educate people on liver diseases at ‘Punarjanma’ in Mysuru(The Hindu: 20220518)

People who underwent liver transplant share their experiences at awareness event organised in Mysuru; Music composer Arjun Janya calls for organ donation pledges

About 250 persons turned up for ‘Punarjanma’, a liver disease awareness programme organised in Mysuru, which was addressed by doctors and specialists from a private hospital. People who underwent liver transplant shared their experience after getting a new lease of life.

Noted music director Arjun Janya inaugurated the Punarjanma event.

Among those present were Bharateesha Reddy, Vice-President and Unit Head, Apollo BGS Hospitals, Mysuru; Dr. Rajkumar P Wadhwa, Chief Gastroenterologist and Head of Institute of Gastro Sciences; Dr. Suresh Raghavaiah, Senior Consultant HPB and Multi-Organ Transplant Surgeon; Dr. Nairuthya S., Chief Gastrointestinal Surgeon; Dr. Yashavanth Kumar...
V., Consultant Hepato-biliary and Liver Transplant Surgeon; and Dr. Arti Behl, Consultant Psychiatrist.

In his address at the Punarjanma event, Mr. Janya called upon the people to follow doctors’ advice and health recommendations, and make use of such programs for taking good care of their health. He encouraged people in the audience to sign up for organ donation for saving lives and making a difference to patients on the waitlist for an organ.

Mr. Reddy spoke about the importance and awareness of liver diseases among the general public, which can go a long way in helping them overcome significant health challenges. He explained how the hospital is transforming the lives of patients with chronic liver diseases through transplants, giving them hope and a fresh lease of life. He informed that the hospital has performed over 50 liver transplants in the last few years, transforming the lives of patients at the end stage of their lives.

Dr. Wadhwa called upon patients to pay attention to their health, control alcohol intake, cut smoking, maintain ideal body weight, avoid stress and self-medication to protect the vital organ — the liver. He gave valuable insights to patients suffering from acute and chronic liver diseases.

Dr Suresh Raghavaiah presented case studies on organ donation and transplants, and how such patients are leading a normal life after the organ transplant at the Punarjanma event.

Dr Nairuthya S. and Dr. Yashavanth Kumar spoke about the surgical aspects of liver transplants, precautions to be taken and having a balanced life. Dr. Arti Behl touched upon the psychological challenges and overcoming them in alcohol addicts and patients suffering from chronic and acute liver diseases.

People who underwent liver transplant spoke about their experience at Punarjanma, and asked the people suffering end-stage liver diseases not to neglect their problems and consult experts immediately to get a new lease of life and recover faster from life-threatening liver diseases. They expressed their gratitude to the donor families, their kith and kin for coming forward for the noble cause, and appreciated doctors, the hospital staff and the nursing team for their support in their transplant journey.

**Highest dengue cases**

**Karnataka has the second highest dengue cases after Tamil Nadu (The Hindu: 20220518)**


Dengue-causing aedes aegypti mosquitoes breed in freshwater and bite during the day.

Dengue-causing aedes aegypti mosquitoes breed in freshwater and bite during the day.
May 16 is observed as National Dengue Day
Karnataka has the second highest number of dengue cases in the country this year. While Tamil Nadu tops the list with 2,361 cases, Karnataka follows with 1,417 cases reported from January till April 30 this year.

According to data from the National Vector Borne Disease Control Programme (NVBDCP), under the Union Ministry’s Directorate General of Health Services, Karnataka has always been one among the top ten States in the country with a high incidence of dengue.

Alternate year
Health officials said dengue in Karnataka has been following a pattern of spiking every alternate year. The number of dengue cases in the State had gone up from 3,358 in 2014 to 5,077 in 2015, 6,083 in 2016 and 17,844 in 2017. In 2017, Karnataka was behind Tamil Nadu and Kerala that reported 23,294 and 19,994 dengue cases, respectively. Karnataka reported 4,427 cases in 2018, 18,183 in 2019, 3,823 in 2020 and 7,393 in 2021. Officials said the rise in cases this year is seen mainly in urban areas, where construction work has begun after the decline in COVID-19 cases.

According to Karnataka’s Health Department data, there has been a 36.33% rise in dengue incidence this year - from January till May 12 compared to the corresponding period last year. Till May 12 this year, 1,335 cases were reported while 850 cases had been reported in the corresponding period last year. In 2020, 1,792 cases were recorded during the same period. In the last one month alone, nearly 300 cases have been added to the State’s tally.

Of the 1,335 cases this year, the most (393) were reported in February while 302 were recorded in March. In January, a rise of over 86% was recorded compared to the corresponding month last year. While 33 cases were recorded in January 2021, 244 cases were reported in the same month this year. However, there have been no deaths so far.

Contributing factors
Experts involved in vector borne disease control programmes said the transmission of dengue is governed by various ecological factors. This coupled with unplanned developmental activities, improper water storage, migration and improper solid waste management also play a crucial role in the upsurge of dengue cases. Dengue-causing aedes aegypti mosquitoes breed in freshwater and bite during the day.

Susanta Kumar Ghosh, former scientist and head, field station of ICMR-National Institute of Malaria Research in Bengaluru, said although dengue was earlier associated with the monsoon, it has now become a self-limiting viral fever which is prevalent all through the year.

A BBMP employee in Bengaluru using a fogging machine to clear mosquitoes as part an intense fumigation drive in the city.

A BBMP employee in Bengaluru using a fogging machine to clear mosquitoes as part an intense fumigation drive in the city. | Photo Credit: File Photo

Robust reporting
State Health Commissioner Randeep D. told The Hindu that the high incidence in Karnataka is because of a robust reporting system. “Unseasonal rains, rapid urbanisation and construction activities have added to the problem. We have intensified awareness and are regularly conducting campaigns to educate people about preventive measures,” he said.
K.V. Trilok Chandra, BBMP’s Special Commissioner (Health), attributed the dengue spurt in the city to intermittent rains and resultant water logging. “Our health workers are conducting larvae surveys via door-to-door visits. We have intensified awareness and preventive measures. To mark National Dengue Day on May 16, a jatha is being taken out to make people aware about prevention measures,” he said.

BBMP tops

With 22.6% of the State’s total cases this year being reported in Bengaluru, the city continued to record the highest number of positive cases. From 232 cases in April, Bengaluru’s dengue tally shot up to 302 on May 12.

After BBMP, a significant rise has been recorded in Udupi, Mysuru, Koppal, Chitradurga and Vijayapura districts from January to May compared to last year.

Data showed that Udupi has recorded the highest number (150) - from January to May - among districts other than Bengaluru. Udupi is followed by Mysuru (127), Koppal (87), Chitradurga (79) and Vijayapura (48).

Dengue (The Hindu: 20220518)

https://epaper.bhaskar.com/detail/1320231/682004535276/mpcg/18052022/194/image/