World Health Organization

Tedros re-elected as head of World Health Organization
Had steered the UN agency through a turbulent period dominated by the COVID-19 pandemic (The Tribune:20220525)


Tedros re-elected as head of World Health Organization
Director-General of the World Health Organization (WHO) Tedros Adhanom Ghebreyesus addresses the 75th World Health Assembly at the United Nations in Geneva, Switzerland on May 22. Reuters

The World Health Organization's (WHO) members re-elected Tedros Adhanom Ghebreyesus as Director General by a strong majority for another five years, the president of the World Health Assembly said on Tuesday.

The vote by secret ballot, announced by Ahmed Robleh Abdilleh from Djibouti at a major annual meeting, was seen as a formality since Tedros was the only candidate running.

Ministers and delegates took turns to shake hands and hug Tedros, a former health minister from Ethiopia, who has steered the UN agency through a turbulent period dominated by the COVID-19 pandemic. The president had to use a gavel several times to interrupt the applause.

German Health Minister Karl Lauterbach tweeted on Tuesday: "Just re-elected as ?Director General of #WHO: @DrTedros?.

155/160 votes, spectacular result. Congratulations, fully deserved. Germany recently overtook the United States as the UN health agency's top donor.
Alcoholism

Alcohol may be riskier for heart than previously thought
According to WHO, European Union is the heaviest-drinking region in the world (The Tribune:20220525)


Alcohol may be more risky for heart than previously thought
Photo for representation. — iStock

Levels of alcohol consumption currently considered safe by some countries are linked with development of heart failure, according to research.

According to the World Health Organisation, the European Union is the heaviest-drinking region in the world.

While it is well recognised that long-term heavy alcohol use can cause a type of heart failure called alcoholic cardiomyopathy, evidence from Asian populations suggests that lower amounts may also be detrimental.

“This study adds to the body of evidence that a more cautious approach to alcohol consumption is needed,” said Dr Bethany Wong of St. Vincent’s University Hospital in Ireland.

“To minimise the risk of alcohol causing harm to the heart, if you don’t drink, don’t start. If you do drink, limit your weekly consumption to less than one bottle of wine or less than three-and-a-half 500 ml cans of 4.5 per cent beer,” Wong added. The findings were presented at Heart Failure 2022, a scientific congress of the European Society of Cardiology (ESC).

Wong noted that as the mainstay of treatment for this group is management of risk factors such as alcohol, knowledge “about safe levels is crucial”.

The study included 744 adults over 40 years of age either at risk of developing heart failure due to risk factors (e.g. high blood pressure, diabetes, obesity) or with pre-heart failure (risk factors and heart abnormalities but no symptoms). The researchers analysed the association between alcohol use and heart health over a median of 5.4 years.

The results suggest that drinking more than 70 gm of alcohol per week is associated with worsening pre-heart failure or progression to symptomatic heart failure.

“We did not observe any benefits of low alcohol usage. Our results indicate that countries should advocate lower limits of safe alcohol intake in pre-heart failure patients,” Wong said. IANS
Covid vaccine

Over 80 pc of India’s youngsters get first dose of Covid vaccine, total coverage 192.65 crore
70 per cent of teenagers between 12-14 age bracket get first dose (The Tribune:20220525)


Over 80 pc of India’s youngsters get first dose of Covid vaccine, total coverage 192.65 crore
A healthcare worker administers a dose of the Covid-19 preventive vaccine to a beneficiary, at a vaccination camp in Gurugram University. PTI

With more than 11 lakh vaccine doses administered, India’s Covid-19 vaccination coverage crossed 192.65 crore On Tuesday evening, as per the Union Health Ministry report.

“Young India is taking the world’s largest vaccination drive to new heights! Over 80% of youngsters between 15-18 age group have received the first dose of COVID-19 vaccine,” Union Health Minister Mansukh Mandaviya said in a tweet.

As per the report, a total of 5,92,60,091 first doses of vaccines and 4,50,76,824 second doses have been administered among the age bracket of 15 to 18 years so far.

In another tweet, Mandaviya said over 70 per cent of teenagers between 12-14 age bracket have also received the first dose of vaccine.

“Another feather in the cap of the world’s largest & most successful vaccination drive! Over 70% of youngsters between the 12-14 age group have received the 1st dose of COVID19 vaccine”.

The Health Ministry report also said that a total of 3,31,52,453 first dose and 1,47,75,851 second doses of vaccines have been administered so far among the age bracket of 12 to 14 years.

A total of 3,34,22,866 precaution doses have also been administered among the eligible beneficiaries as of now, said the Ministry. IANS
Covid-19 infection linked to impaired heart function: Study
Study aims to help improve future care and outcomes for those most at risk from Covid-19

Findings revealed that approximately 1 in 3 of the patients in the study showed evidence of abnormalities in the right side of the heart. iStock(The Tribune:20220525)


Infection with the SARS-CoV-2 virus, which causes Covid-19, is associated with impaired function of the right side of the heart, according to a new study on intensive care patients in Scotland.

The researchers from NHS Golden Jubilee and the University of Glasgow in Scotland noted that these findings could play a vital role in not only saving the lives of Covid-19 patients, but for the care of potentially fatal heart and lung issues generally.

The first of its kind, the Covid-RV study aimed to help improve future care and outcomes for those most at risk from Covid-19, by gaining a better understanding of the impact the virus has on the sickest patients who require invasive ventilation.

The study was carried out in 10 ICUs across Scotland, examining 121 critically ill patients who were receiving treatment on ventilators due to the impact of coronavirus on their system.

The findings revealed that approximately 1 in 3 of the patients in the study showed evidence of abnormalities in the right side of the heart -- the area that pumps blood to the lungs.

"A combination of factors create the perfect storm for Covid-19 to damage the right side of your heart, which ultimately can cause death," said lead author of the study, Philip McCall, Consultant in Cardiothoracic Anaesthesia and Intensive Care at NHS Golden Jubilee.

"If you are pumping blood to the lungs and the lungs become very sick, you have an additional problem because the lungs are not willing to receive blood," McCall said in a statement.

The researchers noted the results of this study are so important as this is a very difficult condition to spot.

Chief Investigator of the study Ben Shelley, Consultant in Anaesthesia and Intensive Care at NHS Golden Jubilee, said the study has revealed that there is no doubt COVID-19 affects the heart and has a major impact on outcomes for the patient.
"However, now that we know this actually happens, and have a better understanding of how it affects people, we can plan for the future and put in place new care plans and treatments to help combat this,” Shelley said.

"For example, ultrasound scans can be used differently to focus in on early warning signs and areas we now know to be at risk,” the scientist said.

The finding is important, not only in combating any future waves of Covid-19, but in planning for future pandemics to allow people to be treated more effectively, the researchers said.

Nearly half of ventilated patients in the study (47 per cent) died because of Covid-19, a figure that is comparable to national and international death rates, they said.

Experts leading the Covid-RV study said that the overall condition of a person's heart can have a significant impact on how seriously you will be affected by the potentially deadly virus.

**Hepatitis**

**The current bout of unexplained hepatitis in Covid-hit children is related to the virus in some way**

"It would be fair to say there is a risk of liver dysfunction after you recover from Covid-19. But the proportion of children or patients who get it is not large," (The Indian Express:20220525)


Dr Arvinder Soin is the Chief Hepatobiliary and Liver Transplant Surgeon and Chairman of the Institute of Liver Transplantation and Regenerative Medicine, Medanta.

Dr Arvinder Soin talks to Kaunain Sheriff M about the recent scientific papers on unexplained hepatitis in children – and says that it may be linked to Covid-19. He explains how the immune system activated by Covid-19 and the antigen hanging around in the gut after recovery can trigger a large immune response. He suggests a three-month follow-up for every child who has been infected or exposed to infection in the family as a preventive measure.

Why? Dr Arvinder Singh Soin is one of the country’s top liver transplant surgeons. He is the Chief Hepatobiliary and Liver Transplant Surgeon and Chairman of the Institute of Liver Transplantation and Regenerative Medicine, Medanta. He has been closely studying Covid-19 and its impact on the liver and has been part of the team that has issued national guidelines on liver transplantation during the pandemic.

Explained | The mysterious Hepatitis outbreak in children around the world
Several countries are reporting severe hepatitis in children who have contracted Covid-19. A study from Madhya Pradesh, which is yet to be peer-reviewed, has shown that eight per cent of children in the group being investigated reported a unique form of hepatitis and subsequent asymptomatic Covid-19 infection. Can we say there is a link between Covid-19 and hepatitis in children?

In the West, there have been some cases of hepatitis, which are unexplained by previously known causes. And there have been publications that have been peer-reviewed, including the one published in The Lancet last week, where they have talked about several children reporting unexplained hepatitis, where every parameter they test, usually, is found negative. The majority of them actually get well. But there has been a small number of cases, where children have actually developed severe liver cases that need a transplant. That is obviously of concern.

The timing suggests it is related to Covid. Because the chronology is suggestive of Covid having a role as such a condition wasn’t seen before the pandemic, the theory of a link between the two is gaining ground. I am specifically talking about the Lancet paper. I am aware of the non-peer-reviewed data from Madhya Pradesh, where they found 37 cases of hepatitis out of 457 patients of Covid-19.

The Lancet study detected adenovirus in nearly 80 per cent of the cases. Normally, this virus is fairly harmless. It causes gastritis, diarrhoea and vomiting but so far has not caused any severe illness. But now nearly 80 per cent of children with hepatitis have this virus. It is still not known if it is causally related. Researchers even analysed the type of adenovirus and found a particular strain called 41F in all samples. Now this strain is typically associated with mild gastro-intestinal illness in children. So, the theory going around is that somehow the immune system of children affected by Covid-19 have developed abnormalities or been compromised to such an extent that the adenovirus, which is normally harmless, has manifested itself severely.

Also Read | Dog sniffs as good as RT-PCR? Research shows they could be
The same paper quoted studies in Israel, where most children with hepatitis had recovered from Covid-19; in the US, 70 per cent of kids had Covid-19 infection and in the UK, only 20 per cent had previous Covid-19 infection. So, the picture is not entirely clear. And the Indian data, of course, did not even look at it like that; it studied Covid-19 cases and found 37 children suffering from hepatitis. It is all a little blurry right now.

But as an expert in liver disease for over 30 years and as someone who does liver transplants in children literally every other day, I think it (the recent cases of hepatitis) is related to Covid pandemic in some way. I think it is very likely, in my view, that there is hepatitis which is previously not been seen that has come about in children because of Covid pandemic. Whether the pandemic prevented the exposure to usual antigens or bugs or whether the virus itself in a silent or infected form created the imbalance in the immune system needs to be looked into. But there has been some disturbance in the children’s immune systems.

Another complication in children is the multi-system inflammatory syndrome, which has been documented all over the world. That is also a kind of immune reaction to previous Covid-19 infection, typically seen three to four weeks after recovery. The majority of the kids settle down with medical treatment. In our specialised children’s unit, we have not had a single mortality and we have seen over 200 cases of MISC. We had four hepatitis cases too but they were mild to moderate.
Currently, the scientific hypothesis is that the mystery hepatitis among children has been triggered by an immune response caused by Covid-19. Could you explain this?

Covid-19 activates the immune system in the patient. Whether you are symptomatic or not, have a mild or moderate version of the infection or not, you have some antigens. These are like genetic identities of the Covid-19 virus sitting in your gut. Over time, they will get absorbed and stimulate the immune cells, little by little, even long after the infection is gone.

It is like inciting the enemy during a ceasefire. So, even the slightest skirmish on the border will activate the enemy in a big way. With the immune system activated by the viruses and the antigen hanging around in the gut after recovery from Covid, even a minor infection caused by the adenovirus or a repeat infection of Covid can trigger a large immune response. And when a large immune response happens, the patient can get hepatitis.

Don't Miss | Combating heatwave: ‘Drink water but don’t overdo it. It can overload kidneys. Track urine output instead’

Children with Covid-19 have been mostly asymptomatic. Looking at this data, can we say that children are at a significantly increased risk of liver dysfunction after recovery?

It would be fair to say there is a risk of liver dysfunction after you recover from Covid-19. But the proportion of children or patients who get it is not large. It would be somewhere between the 10 and 20 per cent mark. But then that translates to a significant number. In all the seroprevalence studies that have been done in India, 60-70 per cent of children have been found to have Covid-19 antibodies. So, if you are surmising that 70 per cent of kids have developed infection and antibodies, then they are susceptible to this kind of hepatitis. That’s still a large number.

Given the limited knowledge on the long-term impact of Covid-19 on the liver, what are the preventive measures that need to be followed?

There are two things that you can do. First, prevent kids from getting Covid-19. That is easier said than done. We know that even without vaccination in India, 70 per cent of them had antibodies. Second, boost immunity with nutritious food, adequate sleep and intake of vitamin and mineral supplements whenever needed.

I would say that families that have had Covid-19 infection in their homes are very likely to have children who will be at risk of developing hepatitis. They should see a paediatrician and make sure that nutritious food and supplements, if necessary, are given.

How can parents identify these cases early? And when does one need to visit the specialist?

World Schizophrenia Day

World Schizophrenia Day: Living with the mental illness (The Indian Express:20220525)
“Dealing with schizophrenia can be tough. I have learnt to accept this reality,” says a 52-year-old woman as she recalls the closed chapter of her ambition to soar the skies as a pilot. World Schizophrenia Day is on May 24.

Roney George with the 52-year-old woman who trained hard to be a pilot as a youngster. She was diagnosed with schizophrenia much later and now works with the Chaitanya Institute of Mental Health. (Express Photo/Ashish Kale)

Reena (name changed) was among the 13 women selected nationally to join the first batch for pilot training in the early 1990s. She cleared the intense pilot aptitude battery test (PABT) and underwent psychometric tests apart from medical examination to then qualify for training at the Air Force Academy at Dindigul in Andhra Pradesh. She even flew her first solo sortie till she fell ill with a disorder that could only be diagnosed as schizophrenia in 2001.

“It has been a long journey since then and it is a reality that I have learnt to accept,” the 52-year-old woman told The Indian Express as she calmly goes about her new role in the accounts section of Chaitanya Institute for Mental Health at Kondhwa.

The high achiever who graduated with physics and chemistry as her core subjects from a top university in Kerala also cleared the exam conducted by the Institute of Cost and Works Accountants of India while she pursued her passion for flying. But that chapter was soon over as she faced episodes of nausea and a sense of strange smell while flying.

“It was not frequent, as that would have been air sickness, but I vomited during a solo sortie and subsequently my father refused to allow me to continue and I had to quit,” she said. These episodes and related symptoms, like irritability, were often thought to be part of a severe premenstrual syndrome. While she went on to work in a few firms in Kerala, her debilitating illness – which affects 21 million people worldwide, according to the World Health Organization – could only be identified in early 2000.

“I was hospitalised and then when I recovered, my family went to Mumbai. An unsuccessful marriage and accident later, I soon realised that I was scared to interact with people. I lost my self-confidence and a month before the pandemic, my family admitted me to the Chaitanya Institute of Mental Health in Pune,” recalls the 52-year-old who is aware that schizophrenia is a serious mental illness.

May 24 has been declared World Schizophrenia Day in a bid to spread awareness about the illness and eradicate myths and superstitions around mental illnesses in general.

According to a Lancet study, one in seven Indians were affected by mental disorders of varying severity in 2017. The proportional contribution of mental disorders to the total disease burden in India has almost doubled since 1990.

More From Political Pulse
Hardik Patel interview: ‘When polls come, you'll see me in an important position... Why should BJP not be an option?’
For B S Yediyurappa’s younger son, wait for political ascent continues
AAP’s Uttarakhand CM face Col Ajay Kothiyal joins BJP, calls it 'mid-course correction'
Schizophrenia is a serious mental health disorder that impacts an individual’s ability to think, feel and behave clearly, says Roney George, founder of Chaitanya Institute which has seven centres across the country. While four centres are functional in Pune, the others are located in Goa, Kerala and Panvel. With the institute set to celebrate 25 years in 2024, George said they have helped rehabilitate more than 10,000 persons with mental illness.

“The 52-year-old woman is also fit to be discharged. In such cases, family members have also to be convinced and guided so that they can get accustomed to welcoming them back home. This is a challenge and there are still so many persons with our centre who cannot go back to their families,” George said while citing the case of Neeta (name changed) who has been at the centre for 22 years.

“Her mother died during the Covid pandemic and she has no siblings. So we had to accommodate Neeta’s 93-year-old father at our centre as she has recovered but is yet to find a suitable job,” George added.

Dr Vidyadhar Watve, former president of Indian Psychiatric Society, told The Indian Express that schizophrenia is a chronic, relapsing and remitting illness. “However, comprehensive treatment can help fight the disorder with pharmacological, psychosocial interventions and family support. The role of family members is immense. Unfortunately, there is stigma and discrimination still associated with disorders like schizophrenia and many do not receive specialist mental health care,” Dr Watve said.

**HIV vaccine**

**HIV vaccine development has taken a back seat’ (The Indian Express:20220525)**

https://indianexpress.com/article/lifestyle/health/hiv-vaccine-development-has-taken-a-back-seat-7924378/

With no commercial vaccine available after 35 years, there are very few companies and research laboratories who would invest in further R&D, Dr Ishwar Gilada, president, AIDS Society of India, tells Anuradha Mascarenhas on World AIDS Vaccine Day today

With antiretroviral therapy, HIV has become a chronic but manageable disease. Still there are challenges that need to be tackled to eliminate AIDS by 2030, warns Dr Ishwar Gilada, president, AIDS Society of India. Considering India diagnosed its first case in 1986 and there’s enough scientific evidence to adopt ways to prevent HIV transmission and care for people living with HIV (PLHIV), the knowledge acquired is still not being actualised on the ground. What are the obstacles?

Current status of the HIV disease burden in India
There are an approximate 2.3 million people living with HIV (PLHIV) in India. Of these 76% know their HIV status. Of those aware of their status, 84% are on antiretroviral treatment (ART). Among those on ART, the virus has been suppressed in 84% cases. New HIV infections in India have declined by 37% between 2010 and 2019 compared to the global average of 23%. Similarly, during the same period, AIDS-related deaths have declined in India by almost 66% against the global average of 39%, according to the NACO report of 2020. The decline is higher in states like Andhra Pradesh, Maharashtra, Karnataka, Telangana, Tamil Nadu and West Bengal and noticeably among women and children at 73.7% and 65.3% respectively.

Dr Ishwar Gilada, president, AIDS Society of India.
HIV burden higher in Mizoram, Nagaland and Manipur

Despite commendable progress, challenges continue to confront our goal to end AIDS by 2030. Mizoram (2.32%), Nagaland (1.45%), and Manipur (1.18%) had higher than 1% HIV prevalence in the adult population in 2019. HIV prevalence in injection-prone drug users is almost 28 times higher than overall adult prevalence. Similarly, HIV prevalence among transgender people, LGBTQ and female sex workers is six to 13 times higher than adult prevalence. Among inmates in central jails, where the population with high-risk behaviour is over-represented, HIV prevalence is nine times higher than the adult prevalence. More than 69,000 people were newly infected with HIV in 2019, twice the number envisaged by NACO, 2020 (75% reductions since 2010).

Newer generation of candidate vaccines with better ability to induce immune response against HIV

Currently, all are candidate vaccines because there is no finished product which has been commercialised or licensed for human usage. The first candidate vaccine was made in 1987 by Dr Jonas Salk and went into phase I trial in 1989. With Dr Salk’s track record, who had invented the polio vaccine, we were all very hopeful but that failed.

Broadly, here are two types of vaccines: One for those who are HIV negative, termed a preventive vaccine or immunoprophylaxis. The other one is for PLHIV, to prevent disease progression to clinical stages and that is called a therapeutic vaccine or immunotherapy, akin to treatment. There has been a lot of progress in this area after the success of long-acting antiretrovirals, Cabotegravir and Rilpivirine, where the PLHIV needs to be treated with a monthly or bimonthly injectable rather than daily oral medicines.

Several studies are on with broadly neutralising antibodies (BNAb) for both types of vaccines. In prophylactic HIV vaccines, a total of some 95 candidates were assessed, of which more than 30 HIV candidate vaccines have been tested in approximately 60 Phase I/II trials, involving more than 10,000 healthy volunteers. Most of the initial trials were conducted in the USA and Europe, but several have also been conducted in developing countries like Brazil, South Africa, China, Cuba, Haiti, Kenya, Peru, Thailand, Trinidad, and Uganda. The results have confirmed the safety of the vaccines and have provided important scientific information to develop newer generations of candidate vaccines with better ability to induce immunogenicity or anti-HIV specific immune responses.

After Covid vaccines, two specific platforms that can be used for HIV
After the COVID vaccine success story, there are two specific COVID vaccine platforms, which can be used for HIV – an mRNA and DNA one. Broadly neutralising antibodies (BNAbs) are produced by certain types of B immunity cells, which are rare. May be only one in 300,000 B cells have this capability. The mRNA vaccine aims to stimulate production of BnAbs that can act against many variants of HIV. So, the mRNA vaccine will instigate B-cells and try to produce more neutralising antibodies.

Challenges with HIV vaccines

Vaccine research and development is a long-drawn and very expensive proposition. With no commercial vaccine in 35 years, there are very few companies and research laboratories which would invest in vaccine development. Moreover, with a very high success rate of ART in India, HIV vaccine development has taken a back seat. Even if candidate vaccines against HIV are found successful in phase 2 and can be taken forward to phase 3 of trials, the chances of getting emergency use authorisation or listing are less as HIV is no more an emergency.

TMS treatment

**Cutting Edge: TMS treatment is safe, eases depression just like medication, says expert**

Since 2016, PGIMER has been using novel techniques such as TMS and Transcranial Direct Current Stimulation (TDCS) for the treatment of psychiatric, neurological and ENT conditions. (The Indian Express:20220525)


Side effects of TMS are occasional discomfort at the site of scalp stimulation by the TMS coil. There may be a rare occurrence of seizures. In recent times, brain stimulation therapies, that are non-invasive and use magnetic fields to stimulate nerve cells, have gained currency to treat psychological disorders just like medication or psycho-therapy. In fact, these are safe and their efficacy has been proven in many clinical trials. Which is why the Department of Psychiatry, Post Graduate Institute of Medical Education & Research (PGIMER), Chandigarh, has adopted novel techniques in its mental health management protocols.

Dr Shalini Naik, Assistant Professor of Psychiatry, who completed her post-doctoral fellowship in brain stimulation from NIMHANS, Bengaluru, before learning advanced brain stimulation techniques in the UK, said, “We were hit by the lockdown but have resumed regular services over the last three months. So far, more than 300 patients have received Transcranial Magnetic
Stimulation (TMS), mainly for depression, obsessive-compulsive disorder, substance use disorders, schizophrenia, post-stroke depression, migraine and tinnitus.”

Since 2016, PGIMER has been using novel techniques such as TMS and Transcranial Direct Current Stimulation (TDCS) for the treatment of psychiatric, neurological and ENT conditions.

TMS was invented as early as 1985 to deliver short magnetic pulses to the scalp. These painlessly traverse the skull and generate changes in the underlying nerve cells as well as their connections in the brain, said Dr Naik. This equipment works on Faraday’s principles of electromagnetic induction and is a classic example of using physics to bring about changes in the brain. Based on the pattern and rate of stimulation, it can either enhance or suppress underlying brain activity, says Dr Naik.

“In 1996, Pascual-Leone and colleagues used this unique property of TMS to cause focal (region-specific), non-invasive (without a surgical procedure) neuromodulation (change in neuronal activity) in a practically painless manner to treat patients with major depressive disorders. Over the last three decades, there have been several experiments to confirm these findings and today, TMS is a well-established treatment of major depression, a severe and common mental health condition that significantly contributes to the global disease burden,” she adds.

TMS is particularly leveraged in depression because of the various lines of neurobiological investigation that suggest individuals with depression had diminished activity in their left pre-frontal cortex, which slumped them into depression. TMS, when delivered at a rapid rate (10-20 pulses in a second), can improve one’s mood by enhancing the left pre-frontal brain activity. It is usually administered in 30-45-minute daily sessions for four weeks. “Recent advances allow us to precisely locate the target brain regions using the patient’s own MRI scan images,” says Dr Naik.

She adds, Electroconvulsive Therapy (ECT) has no substitute and remains the first line of treatment because of its effectiveness, though the ethical questions remain. Doctors make an informed decision about using these brain stimulation techniques based on how a patient will benefit. “Here at PGI, we get patients who are resistant to conventional treatments and have a poor prognosis. So, we base our decision to use TMS or TCDS based on several factors. In my opinion, medication is a long-term treatment,” she says.

Current evidence from robust and well-executed clinical trials suggests that TMS treatment eases depression just like medication or psychotherapy. However, given the high costs of the devices, the availability of effective alternative treatments, the limited number of trained specialists and the limited availability of these devices, TMS is not frequently used to treat depression.

Also Read | Biomarker can predict pre-diabetes years before diagnosis

It is, therefore, essential to tailor the application of TMS to individuals who need it the most. These are patients who have partially responded or not responded to medication or individual psychotherapy, and those who cannot tolerate medication because of intolerable side effects. The beneficial effects of TMS last for a few months and Dr Naik advises that patients continue taking their medication unless otherwise indicated. TMS, she clarifies, does not prevent future episodes of depression.
A day-long care procedure, Dr Naik says the treatment is not painful and is safe though it is not used on patients who have a history of seizures or have metallic implants.

Side effects of TMS are occasional discomfort at the site of scalp stimulation by the TMS coil. There may be a rare occurrence of seizures. This happens only when safety guidelines are ignored or when the patient has had an earlier episode of seizure or epilepsy. A thorough screening to select patients with minimal risk for side effects and administration of TMS with standard devices under prescribed stimulation guidelines are, therefore, necessary to limit side effects. “Often in our clinical practice, the prescription and administration of TMS is an informed decision made by the patient in consultation with his/her psychiatrist after going through risks, benefits, cost-effectiveness and pragmatic implementation. Here at PGI, a patient was adamant about not taking medication for depression and for close to nine months he opted for brain stimulation techniques for his condition with good results. This was a rare case where no medication was prescribed. We observed good results in an elderly patient suffering from depression, who was not responding to medication. The aim is to prolong balanced brain activity,” adds Dr Naik.

**Birth control**

**Birth control: What to expect if you choose to come off it**
There are a number of reasons why you might be considering this – whether that's to have a baby, or because of negative side effects you might be experiencing. *(The Indian Express:20220525)*


birth controlHere's what to expect when starting birth control (Photo: Getty/Thinkstock)
Deciding to stop using your regular birth control is a big decision.

There are a number of reasons why you might be considering this – whether that’s to have a baby, or because of negative side effects you might be experiencing (such as mood swings).

Buy Now | Our best subscription plan now has a special price

But while there is plenty of discussion about what to expect when starting birth control, there is less information out there about what to expect when you decide to quit.

One of the biggest things to consider if you do stop using your regular birth control is the possibility of becoming pregnant. If you’re trying to avoid this, using a back-up contraceptive method is important.

ALSO READ |Important things to know about contraception failure
But some women may also experience changes to their periods, skin or mood when they come off the pill and their natural cycle returns.

This is because most contraceptive methods contain hormones – typically oestrogen and progesterone – which suppress the body’s normal hormonal changes.

This not only prevents pregnancy, but may also have other effects – such as reducing period pain or affecting mood.

The pill

The most common method of birth control used by women in the UK is the pill.

This includes both the combined pill (which contains both oestrogen and progestogen) and the progestogen-only pill (often called the “mini pill”).

If you decide you want to stop using the pill, it’s typically best to wait until the end of a packet. This will lower the risk of becoming pregnant from intercourse that took place just before stopping the pill.

When using a combined pill, it’s safe to have sex during the pill free break, but only if you start the next packet on the correct day and take pills for at least the next seven days. That is why stopping in the middle of a packet is risky in terms of pregnancy.

The biggest change you’ll experience when stopping is the return of your normal menstrual cycle.

Since the combined pill typically makes periods lighter, less painful and more predictable, you may find your periods are heavier and more painful in comparison when you stop the pill. Your periods will also return to their regular pattern (which for some may have been irregular).

People who experienced mid-cycle pain (during ovulation) or pre-menstrual syndrome before starting the pill may also see these return.

If you were using the combined pill to improve acne or manage certain conditions (such as polycystic ovary disease) you will likely find these benefits are lost once you stop.

ALSO READ | Five myths about contraceptive pills you mustn’t believe
But if you were someone who took the mini pill, you may find your experience is slightly different when you stop.

The progestogen-only pill does not provide the regularity of periods that the combined pill usually does – with many women often having irregular bleeding (usually light but unpredictable) while taking it.

pills The most common method of birth control used by women is the pill. (Photo: Getty/Thinkstock) So when you stop the mini pill, your period will likely return to its natural pattern, which may be more regular and predictable.
Since progestogen has various side effects for some women – such as causing acne, mood changes or low libido – stopping both the combined and mini pill may improve all of these.

It’s also important to note that your periods and your fertility return very quickly after stopping the pill and you could become pregnant within weeks or even days of stopping. So use a back-up method immediately after stopping the pill if this is something you want to avoid.

Longer-acting contraceptives

Longer-acting hormonal contraceptive methods – such as the implant, hormonal intrauterine system (IUS) and the injection – have similar effects on the menstrual cycle as the pill.

This may include making periods lighter but more unpredictable, or even the absence of periods.

If you have your implant or IUS removed, your menstrual cycle will return to its previous pattern within weeks. Your fertility will also return to normal within days or weeks.

But with the injection, you might not have a period for several months after stopping – and the return of fertility can also be delayed by a few months.

This is most likely because of the high dose of hormone in the injection, and how well it suppresses the natural cycle.

However, most women typically get their period again within a year of stopping the injection, and these periods are as regular and heavy (or light) as before.

If you use the copper intrauterine device (IUD), this does not contain any hormones. Though it’s long-acting and extremely effective against pregnancy, some women experience heavier and longer periods when using this method.

Fertility returns immediately after having the IUD removed, so it’s important for women who don’t want to become pregnant to use back-up contraception.

It’s also advised women with an IUD don’t have unprotected sex for a week before removal because fertility returns so quickly.

You might be concerned about contraception having a long term effect on your periods or your fertility, but happily all the evidence points to this not being the case.

Some women may find they experience a slight delay in the return of their periods after stopping any form of hormonal birth control (though it’s most common with the injection).

ALSO READ | Total fertility rate dips in India; find out what it is and how it is calculated

This is because it can take a few weeks for the body’s natural hormonal cycle to re-establish itself. This is not a cause for concern unless it goes on for many months.

The decision to stop using birth control is an extremely personal one, and will be influenced by whether you want to have a baby, your relationship and many other factors.
Apart from sterilisation, all modern contraceptive methods are designed to be fully reversible. While you might notice some effects after stopping, these are typically due to the return of the natural rhythms of the menstrual cycle.

**ASHA workers**

**Serving those who serve: On WHO honour for ASHA workers (The Hindu:20220525)**


Health workers need better remuneration and safety guarantee, not just awards

Recognition very often goes to those at the top of the pecking order, and stays there. Credit seldom trickles down to the worker at the bottom. The World Health Organization’s act of recognising India’s ASHA (accredited social health activists) and the polio workers of Afghanistan is an attempt to right that wrong. It is a rare, and commendable doffing of the hat for workers at the very bottom of the rung, and gives credit where it is due. When WHO Director General Tedros Adhanom Ghebreyesus announced the names of six Global Health Leader awardees at the opening session of the World Health Assembly, over one million ASHAs and eight volunteer polio workers found themselves being counted amidst people leading from the front. The other awardees are Paul Farmer, co-founder of the NGO Partners in Health, Ahmed Hankir, a British-Lebanese psychiatrist, Ludmila Sofia Oliveira Varela, a youth sports advocate, and Yōhei Sasakawa, WHO’s Goodwill Ambassador for Leprosy Elimination. Dr. Tedros who picks the awardees himself, said that the award recognises those who have made an outstanding contribution to protecting and promoting health around the world, at a time when the world is facing an unprecedented convergence of inequity, conflict, food insecurity, climate crisis and a pandemic.

The ASHAs were honoured for their “crucial role in linking the community with the health system, to ensure those living in rural poverty can access primary health care services...” These workers, all women, faced harassment and violence for their work during the pandemic, well documented in the media. While the pandemic rewrote the rules, creating danger where mere routine existed, it must be stressed that in general, their job, which takes them into difficult-to-reach places and hostile communities, confers a measure of privations. Even as they contribute to better health outcomes, this workforce continues to protest across the country, for better remuneration, health benefits and permanent posts. The eight volunteer polio workers of Afghanistan (four of them women) were shot and killed by gunmen in Takhar and Kunduz provinces in February 2022. Their work was crucial in a country where wild polio virus type 1 is still circulating, WHO recorded. Clearly, certain kinds of basic public health work are fraught with perils in several continents across the world. It is the duty of the governmental agencies that employ them to ensure their welfare, safety and security. While cheerleading about the award is rightfully reaching a crescendo, what matters is how the Indian government serves its last mile health workers who are its feet on the ground, once the dust raised by their unexpected recognition has settled down.
Fact check: Don’t fall for this WhatsApp message pushing lemon as cancer cure
Completely false message, says expert; Dr. Vikas Amte, to whom the post was attributed, has denied making the claims(The Hindu:20220525)

https://www.thehindu.com/sci-tech/health/fact-check-dont-fall-for-this-whatsapp-message-pushing-lemon-as-cancer-cure/article65381315.ece

A message attributed to Dr. Vikas Amte, a physician known for his work with Anandwan, an ashram and community rehabilitation centre in Maharashtra, has gone viral on WhatsApp.

The long post, in Marathi, makes a series of claims about the utility of lemon and lemon peel in treating cancer which, The Hindu found, were not borne out

**Ayushman Bharat**

**Ayushman Bharat Health Account app relaunched (The Hindu:20220525)**


ABHA app, previously known as NDHM Health Records app, is available for download from Google Play Store and already has over 4 lakh downloads

The National Health Authority (NHA), under its flagship scheme of Ayushman Bharat Digital Mission (ABDM), on Tuesday announced the launch of a revamped Ayushman Bharat Health Account (ABHA) mobile application.

The ABHA app, previously known as NDHM Health Records app, is available for download from Google Play Store and already has over four lakh downloads
Air pollution

Air pollution linked with more severe COVID-19, study finds (The Hindu:20220525)


The researchers modelled historical exposure to three common air pollutants before the pandemic - fine particulate matter, nitrogen dioxide and ground-level ozone. Common air pollutants, such as small particulate matter and ground-level ozone, are associated with more severe outcomes after COVID-19 infection, including admission to the intensive care unit (ICU), according to a study.

The research, published on May 24 in the Canadian Medical Association Journal, analysed data on 1,51,105 people aged 20 years and older with confirmed SARS-

Health Ministry

Dismayed and concerned, Health Minister tells WHO assembly (The Hindu:20220525)


India’s main grouse has been that the WHO ignored data officially collated by the Centre. Health Minister Mansukh Mandaviya said at the World Health Assembly in Geneva, at the headquarters of the World Health Organization (WHO), that India was “dismayed and concerned” over the WHO’s recent exercise on all cause excess mortality. India’s main grouse has been that the WHO ignored data that was officially collated by the Centre.