Monkeypox

21-day surveillance of asymptomatic arrivals from monkeypox-reporting nations

Government has asked states to maintain caution and prepare ahead (The Tribune: 20220601)


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With monkeypox cases rising in non-endemic nations, the government on Tuesday issued guidelines to states and UTs for case management asking for asymptomatic arrivals from countries reporting the disease to be observed for 21 days for the development of any potential symptoms. The disease presents itself between six and 21 days.

Samples from symptomatic cases would need to be collected upon arrival and sent to apex lab ICMR- National Institute of Virology Pune for confirmation. India has no reported case of monkeypox so far. The government has, however, asked states to maintain caution and prepare ahead.

WHO has confirmed transmission of monkeypox in non-endemic Europe with no epidemiological links to West or Central Africa where monkeypox is usually found.

Cases are being reported in endemic Cameroon, Central African Republic, Cote d’Ivoire, Democratic Republic of the Congo, Gabon, Liberia, Nigeria, Republic of the Congo, and Sierra Leone and also non-endemic USA, UK Belgium, France, Germany, Italy, Netherlands, Portugal, Spain, Sweden, Australia, Canada, Austria, Canary Islands, Israel and Switzerland.
“Asymptomatic travellers from outbreak, endemic or community transmission region be observed for the development of any signs and symptoms for 21 days post exposure. If signs and symptoms develop, collect specimens,” guidelines to states and UTs say.

A suspected case has been defined as a person of any age having a history of travel to affected countries within the last 21 days presenting with an unexplained acute rash and one or more of the following symptoms -- swollen lymph nodes, fever, headache, body aches, profound weakness.

Probable case is a person meeting the case definition for a suspected case, and one who has face-to-face exposure, including healthcare workers without appropriate personal protective equipment; direct physical contact with skin or skin lesions, including sexual contact; or contact with contaminated materials such as clothing, bedding or utensils is suggestive of a strong epidemiological link.

A confirmed case is laboratory confirmed for monkeypox virus by detection of unique sequences of viral DNA either by polymerase chain reaction or sequencing.

Monkeypox is usually a self-limited disease with the symptoms lasting from 2 to 4 weeks. Severe cases occur more commonly among children. In recent times, the case fatality ratio has been around 3 to 6 pc, guidelines said asking people to avoid contact with any material of the sick person.

About Monkeypox

Monkeypox (MPX) is a viral zoonotic disease with symptoms similar to smallpox, although with less clinical severity. Monkeypox virus primarily occurs in Central and West Africa. In 2003, the first monkeypox outbreak outside of Africa was reported in the US which was linked to contact with infected pet prairie dogs. These pets had been housed with Gambian pouched rats and dormice that had been imported into the country from Ghana. The disease is managed and has no specific treatment.
Healthcare workers

Government preparing exhaustive database of healthcare workers

Portal will include all categories of healthcare professionals and mention the country where they wish to render their services (The Tribune: 20220601)


To project India as a global source in the health sector, the Centre is developing an online repository of all categories of healthcare professionals, including doctors, nurses and pharmacists that also mentions the country where they wish to render their services.

The portal, being developed by the National Health Authority (NHA) under the Ayushman Bharat Digital Mission (ABDM) as part of the government's 'Heal by India' initiative, is likely to be launched on August 15, official sources told PTI.

It will be voluntary for all healthcare professionals to provide their information to the portal and all steps are being taken to ensure data security. The personal information provided will be authenticated by UIDAI while registration details will be verified by the respective councils, the sources said.

"The portal will be ready by June 15 after which healthcare professionals will be able to register themselves in it."

"They will have the option to mention their preferred country where they want to work, languages they know, visa, country-specific qualifying exam details besides their usual background information," an official said.

It will enable a seamless experience for those accessing such information on the portal, the official added.
healthcare professionals

The healthcare professionals who can register themselves in the portal include practitioners of modern medicine as well as the traditional system of medicine, dentists, nurses, pharmacists and 56 categories of allied health professionals.

The NHA has already started collating data of healthcare professionals in collaboration with various regulatory bodies such National Medical Commission, Dental Council of India, National Commission for Indian System of Medicine, National Commission for Homoeopathy, Indian Nursing Council, Pharmacy Council of India and National Commission for Allied and Healthcare Professions.

A Health Professional Registry for doctors from all systems of medicines and nurses developed by NHA is already in place. So far, 32,059 doctors and 3,527 nurses have registered on it and of them credentials of 15531 doctors and 687 nurses have been verified. The data from this registry will also be sourced for the new portal, the official said.

"Once the portal goes live, external stakeholders such as patients and recruiters from India or abroad will be able to search for a required professional based on the speciality or system of medicine, languages known and the country they prefer work in," the official told PTI.

According to another official, despite recent efforts at standardized quantification, information on India's diverse health workforce is fragmented and unreliable.

There is currently no comprehensive official source on the health workforce data that cover all categories of related professionals in the country, the official said.

Information on only certain categories of professionals is currently maintained.

"For instance, doctors have specialised councils at the state and national levels that govern these professionals and therefore maintain data only related to these professionals but not community health workers, the official said.

Moreover, the way these registers, both in terms of digital systems and processes, varies considerably, he said. The official said the portal being developed under ABDM will globally promote the visibility of the Indian healthcare professionals and the services they provide.

It will also act as a bridge between the Indian healthcare professionals and the external stakeholders requiring healthcare services, the official added.

'6.5 lakh deaths in India every year due to smoking'

Terming tobacco smoking as a giant killer, chest specialist and chairman of the Punjab chapter of Association of Chest Physicians Dr HJ Singh on Monday organised an awareness event a day ahead of World No Tobacco Day.
MD of Ranjit Hospital, Dr Singh revealed that tobacco use is the leading cause of preventable diseases and death in India. He said that recent studies observed that smoking already accounts for nearly 6.5 lakh deaths per year in India and warned that without action, the death toll from smoking could climb still further. He predicted smoking could soon account for 25 per cent of all male deaths and 10 per cent of all female deaths between the age of 30 and 70 years.

Dr Singh said smoking not only lead to lung, breast, colon, head, neck, cervix and bladder cancers but also lead to very serious disease known as Chronic Obstructive Pulmonary Disease (COPD). It is a chronic and preventable disease mainly caused by smoking and is major cause of death. In Asia, 15 per cent population is suffering from permanent bronchitis and 25 per cent of COPD, he quoted some studies.

Dr Singh also pointed out that the surveys have shown that majority smokers want to stop smoking, but the quit rate remained very low. He said that will power vs chemical dependency is a difficult fight.

“People who want to quit smoking /tobacco need proper motivation and effective medication that they can make their lives worth living”, he said further adding passive smoking is as dangerous as active smoking. He concluded with a one liner, “Let us say ‘no to tobacco’ and crush the crave!”

World No Tobacco Day is observed around the world every year on May 31. The aim of the day is to inform the public on the dangers of using tobacco, the business practices of tobacco companies and what the WHO is doing to fight against the use of tobacco.

**Previous Covid infection**

**Previous Covid infection does not protect kids from Omicron: Study**

**All the samples were taken during 2020 and early 2021, before the emergence of Omicron variant(The Tribune: 20220601)**


Previous Covid infection does not protect kids from Omicron: Study

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Children who previously had COVID-19 or the inflammatory condition MIS-C are not protected against the Omicron variant of coronavirus, according to a study which found vaccination, however, does afford protection.
The findings of the study, published recently in the journal Nature Communications, are similar to those found in adults.

“I hear parents say, ‘Oh, my kid had COVID last year,’” said Adrienne Randolph, of Boston Children’s Hospital, US, senior author of the research paper.

“But we found that antibodies produced by prior infections in children don’t neutralise Omicron, meaning that unvaccinated children remain susceptible to Omicron,” Randolph said.

The researchers, including Surender Khurana, from the US Food and Drug Administration obtained blood samples from 62 children and adolescents hospitalised with severe COVID-19.

They also used data from 65 children and adolescents hospitalised with MIS-C, and 50 outpatients who had recovered from mild COVID-19.

All the samples were taken during 2020 and early 2021, before the emergence of the Omicron variant.

In the laboratory, the researchers exposed the samples to a pseudovirus, and measured how well antibodies in the samples were able to neutralise five different SARS-CoV-2 variants of concern: Alpha, Beta, Gamma, Delta, and Omicron.

A pseudovirus is derived from SARS-CoV-2, but stripped of its virulence.

Overall, children and adolescents showed some loss of antibody cross-neutralisation against all five variants, but the loss was most pronounced for Omicron, the researchers said.

“Omicron is very different from previous variants, with many mutations on the spike protein, and this work confirms that it is able to evade the antibody response,” said Randolph.

“Unvaccinated children remain susceptible,” the researcher said.

In contrast, children who had received two doses of COVID-19 vaccine showed higher neutralising antibody titers against the five variants, including Omicron.

The researchers hope these findings will encourage parents to have their children and teens vaccinated.
Healthy eating:

Healthy eating: What you need to know about ‘feeling of fullness’

We do not know about the feeling of fullness and hence either end up eating way too much, or way too less, said nutritionist (The Indian Express: 20220601)


feeling of fullness, digestive health, feeling full, how much to eat, when to know you are full, eating capacity, indian express news

Feeling of fullness is a feeling of satiety, of feeling full energy, and not finding it difficult to move. (Photo: Getty/Thinkstock)

Often, when we eat, we are not aware of when to stop. Then, we end up feeling sluggish. At other times, we end up eating too little and lack the energy to go on with our day.

Nutritionist Nmami Agarwal took to Instagram to explain the meaning of a very important term: ‘feeling of fullness’.

She wrote in the caption, “It is so important to know when to stop while having your meal or even when indulging in your favorites. But most of us are not aware of our ‘feeling of fullness’ and we either end up eating too little or too much.”

Try this ‘miracle tea’ to keep summer headache, bloating, uneasiness, abdominal pain and heaviness at bay

She continued, “Reaching the feeling of satisfaction by the stomach and the brain both will help you feel good and reach satiety.”

In the accompanying video, the expert explained that besides energy, our meals also provide us with vitamins, minerals and other nutrients. “We do not know about the feeling of fullness and hence either end up eating way too much, or way too less.”

She added that feeling of fullness is a feeling of satiety, of feeling full energy, and not feeling lethargic or finding it difficult to move after a particularly heavy meal.

She advised on eating as per 80 to 90 per cent of the body’s capacity for better digestion.
World No Tobacco Day 2022

World No Tobacco Day 2022: Effects of long-term exposure to passive smoking on heart

While many link passive smoking only with lung cancer, it is actually much more likely to cause heart disease or stroke, according to (The Indian Express: 20220601)


Many stay away from smoking but still end up getting exposed to other people smoking in their surroundings. (Source: Getty Images/Thinkstock)

Every year, May 31 is observed as World No Tobacco Day in a bid to inform the public about the dangers of consuming tobacco. This year, it is being observed with the theme ‘Tobacco is killing us and our planet’.

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Tobacco smoke, consisting of harmful substances like benzopyrene, lead, carbon, monoxide arsenic and formaldehyde, is extremely injurious to health. As such, many stay away from smoking. They, however, still end up getting exposed to passive smoking. While many link passive smoking only with lung cancer, it is actually much more likely to cause heart disease or stroke, according to Dr Pankaj Batra, Senior Consultant, Cardiology, Fortis Escorts Hospital, Faridabad.

ALSO READ | Dementia metaphors help describe the condition, but can also perpetuate stigma and hinder treatment

“Passive smoking refers to the involuntary inhalation of smoke from cigarettes or other tobacco products smoked by other people. The definition includes exposure to both secondhand and thirdhand smoke, as well as in-utero exposure of a fetus due to the presence of tobacco toxins in the mother’s blood. Secondhand smoke is the combination of smoke
from the burning end of a cigarette and the smoke breathed out by smokers. Secondhand smoke contains more than 7,000 chemicals,” he said.

While everyone is at risk when exposed to passive smoking, those who already have heart disease are more prone to suffering adverse effects (File)

Quoting a CDC (Centers for Disease Control and Prevention) report, he said, “Secondhand smoke is thought to cause 34,000 deaths from heart disease and 8,000 deaths from strokes in non-smokers in the United States each year, with numbers even higher being reported by the World Health Organization.”

Dr Batra highlighted the worrying increase in heart ailments due to passive smoking. “Passive smoking raises the risk of heart disease by 25 to 30 per cent and the risk of stroke by 20 to 30 per cent. The risk of peripheral arterial disease is increased as well. People are actually 15 times more likely to die from heart disease due to passive smoking than lung cancer.”

While everyone is at risk when exposed to passive smoking, those who already have heart disease are more prone to suffering adverse effects and should take special precautions to avoid even brief exposures, the expert said. “Even exposures of less than 30 minutes can cause detectable changes in blood vessels that are associated with heart disease, so again, no level of exposure is safe.”

Alzheimer’s

Cutting Edge: An early warning system for Alzheimer’s?

The Gujarat Biotechnology Research Centre has found a correlation between a protein coding gene variant and the disease in a small cohort of 43 DNA samples. If a significant causation is linked through future large-scale studies, it would be a breakthrough of sorts, says Sohini Ghosh. (The Indian Express: 20220601)


An early warning system for Alzheimer’s? Alzheimer’s disease, a progressive neurodegenerative disorder, is classified into two broad groups. (Express Photo)

Can we detect Alzheimer’s early enough through gene coding? A Gujarat Biotechnology Research Centre (GBRC) study has found a variation in the AChE gene that could be linked
to early onset but needs further investigation to be recognised as a definitive diagnostic module.

As part of the Gandhinagar-based Gujarat Biotechnology Research Centre’s (GBRC) broader scope of work towards developing an early diagnostic kit for Alzheimer’s disease, a study of a small cohort of 43 DNA samples has found a correlation between a protein-coding gene variant and the disease. However, given the small sample size of the study by GBRC, the Hospital of Mental Health and the Institute of Mental Health in Ahmedabad — 32 diagnosed Alzheimer’s disease patients and 11 healthy individuals as control group — the correlation may not be equated to causation at this stage.

If a significant causation is linked through future large-scale studies, it would be a breakthrough of sorts. For it would mean that if an individual’s genetic coding shows the AChE variation, he/she may run the risk of Alzheimer’s. This could then be useful as an early warning system.

Alzheimer’s disease, a progressive neuro-degenerative disorder, is classified into two broad groups. Early onset happens in people aged below 65, usually between 40s and 50s. Late onset is seen in the 65-plus age group.

The pre-print paper, which has not been peer-reviewed yet, took DNA samples from 32 patients diagnosed with Alzheimer’s with no family history of dementia from various mental health hospitals of Gujarat, namely, Hospital of Mental Health in Ahmedabad, Bhuj and Vadodara. The average age of the patient sample was 68.11 years, test cases ranging from 52 to 79 years. DNA samples from 11 other healthy individuals were also taken as a control group. All 43 DNA samples were sequenced and analysed.

The study notes that three genes — amyloid precursor protein (APP), which is expressed in tissues and is concentrated in synapses of neurons, presenilin1 (PSEN1), and presenilin2 (PSEN2) — have been linked with early onset autosomal dominant Alzheimer disease. But the next generation sequencing now suggests that the “frequency of mutations in these genes varies dramatically among populations, with genetic background playing a profound impact in this variance.”

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Because of a lack of data and studies from the Indian context in this regard, on how the genetic mutations may vary in the Indian and Gujarat’s population, the study established a basic association using targetted sequencing of 94 genes, which were identified on existing literature review.
The single nucleotide polymorphism analysis, which looks at variation in a genetic sequence that affects only one of the four basic building blocks of DNA, found that the AChE gene, which encodes an enzyme that is responsible for breakdown of neurotransmitters, has a link with Alzheimer’s Disease. This, the authors of the paper claim, is a first, as according to them, “There is currently no literature on AChE and its variants that have a role in Alzheimer’s disease.”

GBRC director, Prof Chaitanya Joshi, who is a co-author of the study, told The Indian Express that it is too early to say whether the correlation is associated with early or late onset of the disease. He also noted sample size as one of the limitations of the study. “We need to increase the number of patients in the study, and if the same AChE variation is seen then, we can say this result is significant.”

Also Read | Liver transplant: New hope for patients as doctors overcome blood group hurdle

Senior genetic counsellor at Apollo Hospitals in Ahmedabad Reena Trivedi said that genetic testing is not par for the course in Alzheimer’s diagnosis, especially in late onset cases which are generally age-related. She added that even for early onset, a mutational variation need not be indicative of an individual’s vulnerability to one specific disorder. “It is not a common practice among neurologists to get genetic testing done for Alzheimer’s. Perhaps when someone young shows signs, genetic testing is done. Generally, when a disease has an early onset, we assume it is inherited, possibly due to a genetic mutation that may be running in the family. Alzheimer’s is usually clinically identified and is symptomatically treated. But if there is a genetic mutation that has been discovered early and then they find out it is running in the family, then the offspring and siblings of the patient are also tested for the mutation. However, any change is not diagnostic or suggestive of any perfect disorder-causing variant. The mutation can also be due to a normal change in the (genetic coding) of the population, or in people of a particular group. In terms of genetic study done worldwide so far, we have discovered 22,000 genes, covered 88,000 clinically relevant genes and know about 8,000 disorders which are caused by those,” said Trivedi.

Tobacco consumption and infertility

Understanding the link between tobacco consumption and infertility in women

World No Tobacco Day is observed on May 31 every year, and the theme for this year – “tobacco is killing us and our planet” – highlights how it is not only deteriorating our lives but also altering our future generations(The Indian Express: 20220601)
infertility
It becomes imperative that females limit or discontinue using tobacco, keeping their health in mind (Source: Getty Images/Thinkstock)

The impact of intoxicants, such as tobacco, on both male and female health has been reported widely. Irrespective of the quantity or frequency of consumption, it can affect the lungs, heart, neck and throat and become a breeding ground for cancerous cells. Subsequently, however, more parts of the body can also begin to get impacted.

Also Read | Simple strategies to quit the unhealthy habit

World No Tobacco Day is observed on May 31 every year, and the theme for this year – “tobacco is killing us and our planet” – highlights how it is not only deteriorating our lives but also altering our future generations. This is because tobacco consumption has a close association with infertility, said Dr Kshitiz Murdia, CEO and co-founder, Indira IVF.

“In females, final tobacco products and the chemicals contained therein can negatively influence reproductive function. This can result in an early menopause, infertility, subfertility, as well as disorders related to the menstrual cycle,” said Dr Murdia.

How does tobacco affect fertility?

One of the ways that tobacco does this is by possibly affecting hormonal production in females by targeting glands such as hypothalamus, thyroid, pituitary, and adrenal. It’s consumption has been associated with higher levels of circulating androgens or male hormones such as testosterone in the body as well as cortisol levels of hormones such as oestrogen, progesterone, prolactin, and anti-Müllerian hormone (AMH).

Such imbalances can then further lead to conditions such as polycystic ovary syndrome (PCOS) that is known for causing complications at the time of conceiving. The American Society for Reproductive Medicine has found that the rate of infertility among females who consume tobacco is two-times more than that in those who don’t. In females, age plays a role in determining fertility since the number of eggs available for a pregnancy is associated with it. This can be attributed to the damaging effects of certain chemicals found in cigarettes such as nicotine and carbon monoxide on the genetic material in eggs. It is known that when the genetic material in gametes is compromised, the rate for miscarriage is more, as well as the risk of children with genetic anomalies such as Down’s syndrome, Turner syndrome, and Klinefelter syndrome is increased.
Also Read | Expert answers common questions on smoking and its effect on male & female fertility

Such damage to eggs speeds up the rate at which they age, leading to their accelerated loss and hence, an early menopause. It has also been found that incidences of ectopic pregnancies and a pre-term birth are more among females who consume tobacco. The impact of tobacco is not limited to negative consequences in the female’s health but also on the child they may conceive. It’s intake during pregnancy compromises the child’s growth inside the uterus by influencing their weight at the time of birth and health complications they develop later in life such as asthma, cardiovascular disease, obesity, and diabetes, said Dr Murdia.

health, health and lifestyle, Smoking, smoking in pregnancy, smoking mothers, harms of smoking during pregnancy, latest on smoking, smoking research, Indian express, Indian express news Pregnant women, say no to smoking! (Source: Getty Images/ThinkStock)

Tips to quit smoking

It becomes imperative that females limit or discontinue using tobacco, keeping their health in mind. One can also temporarily opt for nicotine gum or patches, and prescription medicine to aid the process of quitting. This helps improve fertility parameters in females by manifold and preserve the undamaged eggs. However, in certain cases, a natural pregnancy may still be difficult to achieve. In such circumstances, assisted reproductive technology (ART) procedures such as in vitro fertilisation (IVF) and intracytoplasmic sperm injection (ICSI) can provide a solution. It should be kept in mind that although ART treatment can be a helping hand, the success rate can be impacted by the damage caused by tobacco on their body and their overall health.

Menstrual pain

Why Zheng Qinwen fell to menstrual pain

The young Chinese tennis player fell in a heap during the French Open because of severe menstrual cramps. Dr Ranjana Sharma, Senior Consultant, Obstetrics and Gynaecology, at Indraprastha Apollo Hospitals, Delhi, suggests ways and means to manage the condition (The Indian Express: 20220601)

China's Qinwen Zheng wipes her face as she plays Poland's Iga Swiatek during their fourth round match of the French Open tennis tournament at the Roland Garros stadium, Paris. (AP)

Zheng Qinwen was that close to a shock French Open win against world number one Iga Swiatek on Monday. But midway through her game, the debutante at Roland Garros crumbled in pain, clutching her stomach. "It's just the girl thing," the 19-year-old said in reference to her menstrual pain.

Menstrual pain, particular the Day 2 kind, is a reality among young women. But increasingly cramping is worsening in the younger population and pain management is becoming a necessary healthcare protocol. “This may look like a recent medical condition but the fact of the matter is that the increasing awareness about menstrual health has encouraged conversation on cramping,” says Dr Ranjana Sharma, Senior Consultant, Obstetrics and Gynaecology at Indraprastha Apollo Hospitals, Delhi.

What is menstrual cramping?

It is a throbbing and restrictive pain that can manifest as a dull tightness or sharp jabs, in your lower torso, back and inner thighs. Cramps usually begin a day or two before your periods, peaking on the second day of onset. They last up to three days. “So far, the tendency was to look at genetic factors for severe cases, understanding if their mothers suffered the same way. But there are several causes that may lead to debilitating conditions. And if the pain lasts longer than three days, consult a gynaecologist,” says Dr Sharma. “Hormone-like substances or prostaglandins trigger the muscle contractions that expel the uterine wall during periods. Higher levels of prostaglandins lead to severe menstrual cramps,” she adds.

According to Dr Sharma, “Endometriosis is a common cause. This condition happens when the tissue similar to the lining of the uterus grows outside it, most commonly on fallopian tubes, ovaries or pelvis. Then there is adenomyosis, which is a thickening of the uterus. It occurs when the endometrial tissue that lines your uterus grows into the muscles of your uterus. These tissues also bleed, may be not as much, but cause extreme pain. During periods, tissues surrounding the uterus may undergo changes and are responsible for several degrees of cramping.” Adenomyosis, when worse, can even lead to prolonged menstrual bleeding.

Some women have a condition called cervical stenosis, where the small opening of their cervix impedes menstrual flow, causing a painful increase of pressure within the uterus. “At other times, you must watch out for fibroids and cysts close to the bleeding spot. They range in size from as small as a seed to large masses that can enlarge and inflame the uterus. This causes pelvic pressure, lower back pain, leg pain and heavy periods. There may be a pelvic congestion of blood clots or may be even pelvic inflammation that constricts flow,” says Dr Sharma.

There’s also a small risk of an intra-uterine device (IUD) perforating your uterus during insertion or bacteria entering your uterus during insertion, causing pelvic congestion. Sometimes the device may move out of place, causing extreme discomfort.
How can you manage the pain

Severe menstrual cramps cannot be treated as such but they can be eased with the following tips, says Dr Sharma.

(1) Get regular exercise. No matter how severe your pain, do not stop physical activity. Curling up in a static position may, in fact, aggravate your pain.

(2) You can use painkillers that are safe and recommended by your doctor. Do not attempt OTC drugs because they do not completely eliminate pain. You can use a heating pad on your lower abdomen for relief.

(3) Manage your stress and performance pressure when menstruating. They can trigger anxiety and pain.

(4) Take a hot bath as it soothes your lower abdomen and back.

(5) Have a proper diet, include a lot of fibres. Constipation can worsen your menstrual pain;

(6) Follow the advice of your doctor who may recommend tests to identify the trigger. If there is a hormone issue or imbalance, you might be put on oral contraceptives or related medication.

(7) Drink hot teas to relax the nerves.

Cancer cases

A surge in oral cancer cases due to tobacco consumption, say doctors

World No Tobacco Day: Oral cancer is one of the most common noncommunicable diseases around the world. Tobacco is one of the well-known factors of oral cancer which is preventable(The Indian Express: 20220601)


smokeless tobacco causes oral cancer, what is smokeless tobacco, gutkha causes cancer, mouth cancer risks, inidanexpress.com, indianexpressonline, indianexpressnews, World NO Tobacco Day 2019, World No Tobacco Day, indianexpress, oral cancer risks, daivam wellness, Dr Alok Chopra, Chewing tobacco harms health, chewing tobacco leaves harmful, gum recession, bad breath problems chewing tobacco, types of smokeless tobacco,Studies
indicate that chewing tobacco is associated with an increased risk for oral cancer. (Source: Getty Images/Thinkstock)

Oral cancer cases are rising at an alarming rate in the country. Tobacco consumption including smokeless tobacco, betel-quid chewing, excessive alcohol consumption, and unhygienic oral conditions are some of the risks for a higher incidence of oral cancer. Early detection is important to lower the mortality rate of patients with oral cancer. Regular dental check-ups and quitting tobacco will aid in timely diagnosis and prompt treatment, doctors say in the wake of World No Tobacco Day that is observed every year on May 31.

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What is oral cancer?

Oral cancer is an abnormal growth of tissues in the mouth that turn into cancer. It can spread from mouth to nose, neck area, and other parts of the body. In the beginning, the signs can be white or red spots in the mouth, sores on the tongue, lip, or mouth, bleeding in the mouth, swelling in the oral area, and difficulty in swallowing. It is an important health issue in India as it is one of the most common types of cancer affecting a large population, Dr Suhas Aagre, Oncologist and Hemato-Oncologist at Asian Cancer Institute said.

Tobacco consumption has been the predominant factor causing oral cancer. The use of tobacco in various forms such as gutka, zarda, mawa, kharra, khaini, cigarettes, bidi, and hookah is a major cause of tumour development in the oral cavity in both young and adults. Dr Aagre mentioned, “Mouth cancer is one of several types of cancers falling in the category of head and neck cancers. Tobacco is the prime cause of the occurrence of oral cancer in all age groups. All tobacco products, including cigarettes, cigars, pipe tobacco, chewing tobacco, and snuff, contain poisonous substances (toxins), cancer-causing agents (carcinogens), and nicotine, an addictive substance. There are at least 70 dangerous chemicals found in cigarettes and other forms of tobacco products, getting exposed to these chemicals will lead to oral cancer.”

Important for all to quit tobacco use (Source: Getty Images/Thinkstock)
Despite widespread knowledge of the risk of tobacco exposure and use, it is responsible for a plethora of diseases, an alarming death rate, economic burden, and reduced quality of life,” said Dr Adwait Gore, medical oncologist, Zen Multi Speciality Hospital, Chembur.

Symptoms

Chewing tobacco, and keeping it for a long time in your mouth can cause a higher risk. If you have been consuming tobacco for a long time and notice symptoms like mouth pain, lip sores, or inability to swallow, non-healing ulcers, bleeding from ulcer, development of neck swelling, change in voice, difficulty in swallowing, then immediately see a doctor and get the required check-ups done. Other risk factors of oral cancer are poor oral hygiene, dental irritation, Human Papilloma viral infection, diabetes, and extensive usage of immunosuppressive medicines. “Cases are not just rising in rural areas, but in urban areas as well. Nowadays, there is a shocking trend seen wherein youngsters in the age group of 20-30 are affected with oral cancer,” Dr Aagre noted.

Dr Khozema Fatehi, head and neck, oral oncosurgeon, SRV Hospital, Chembur highlighted that India has a huge burden of oral cancer cases as the use of tobacco is directly associated with approximately 80 per cent of oral cancers in men and women. “Youngsters are increasingly consuming smokeless tobacco either due to imitation and/or peer pressure. The lack of awareness about early oral cancer symptoms is the main reason for cancer being detected at later stages. Early detection improves the chances of survival,” Dr Fatehi said.

Treatment

The treatment of oral cancer includes surgery, radiation, and chemotherapy.

Prevention

Oral cancer itself is preventable. Quitting tobacco and other steps can ensure cancer prevention.

“To keep oral cancer at bay, one will have to give up on tobacco. Avoid smoking by opting for a smoking cessation therapy, get enough rest, and eat a well-balanced diet inclusive of
fresh fruits, vegetables, whole grains, legumes, and pulses. Cut down on spicy, junk, oily, and processed foods, seek support and encouragement from family, and friends, and don’t miss your regular dental check-ups and regular follow-ups,” concluded Dr Aagre.

“Most people with oral cancer have a history of smoking or other tobacco exposure, like chewing tobacco. Oral tobacco products (snuff, dip, spit, chew, or dissolvable tobacco) are associated with the cancers of the cheek, gums, floor of the mouth (under the tongue), and the inner surface of lips. A large number of people chew gutka, which is a mixture of betel quid and tobacco, and are prone to cancer of the mouth.

**Covid-19 in babies – here’s what to expect**

*It's still really important to continue breastfeeding (if you do so already) and there is no need to separate mother and baby*(The Indian Express: 20220601)


The good news is, most babies experience mild illness (Source: Getty Images/Thinkstock)

Parents are understandably worried about what would happen if their infant caught COVID-19. Babies may be considered vulnerable due to immature immune systems, and are also not eligible for most of the treatments and vaccinations available for older children and adults.

The good news is, most babies experience mild illness. Here’s what to expect if your baby tests positive.

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If you test positive, and have a newborn or infant at home, there are some protective steps you can take. These include hand-washing before providing care, and wearing a mask when breastfeeding or in close contact. Current evidence suggests COVID-19 cannot be spread through breastmilk.
It’s still really important to continue breastfeeding (if you do so already) and there is no need to separate mother and baby.

Transmission from older siblings and other close contacts may also be reduced by vaccination. Vaccination of parents and caregivers will also reduce their chance of severe disease, thereby minimising the risks and interruptions for mother and baby.

Dementia metaphors help describe the condition, but can also perpetuate stigma and hinder treatment.

Testing your baby is similar to testing yourself. Babies can often get PCR tests in the same places where you will be tested, or you can use a rapid antigen test (RAT) on them.

If you are using a RAT it’s important to check it’s for the correct age group, as not all RATs can be used on children. It will say on the packet whether it is suitable. Otherwise ask your pharmacist for the correct test for your child’s age.

It’s also important to follow the specific instructions for the test you have purchased, as not all will be the same.

Throughout the pandemic, children of all ages have been less likely to experience severe disease compared with adults. The likelihood of severe disease also appears to be lower with Omicron compared with previous variants, although the transmission of later variants has been higher.

From our clinical experience, and international research, babies with COVID-19 have mostly had mild disease.

The need for hospitalisation or intensive care is extremely uncommon. Babies may be at higher risk if they are premature or have another underlying serious illness or condition. Studies describing COVID-19 in newborns reflect that similar to other respiratory viruses like influenza and RSV, deaths are very rare.

A range of immune differences in newborns have been proposed to explain why babies usually get less severe disease. While there is no vaccine for infants, antibodies transfer from mothers who have been vaccinated while pregnant to newborns, which may offer protection.

Babies may exhibit a range of symptoms when they have COVID-19 that are typical of other respiratory viruses. Up to 25 per cent of babies may have no symptoms.

Fever, nasal congestion, feeding difficulties and cough are more common symptoms.

Breathing difficulties, lethargy and persistent fever may be signs of severe disease.
You can give your baby paracetamol or ibuprofen if there is fever or discomfort, and nasal saline drops can ease congestion. If you are considering giving medication to an infant under three months of age, please consult your GP.

ALSO READ | Why is your child a fussy eater and how can you deal with it

Talk to your doctor if your baby has any of the following: difficulty breathing; persistent fever feeding difficulties impacting hydration or causing less than 50 per cent of normal number of nappies.

It is important to note any fever in a newborn up to three months of age requires a medical review, regardless of whether the baby has COVID.

Anything else I should know?

Especially as we enter winter, protecting against other common circulating viruses which can affect babies, such as influenza, is also important. Children above six months of age can receive the influenza vaccine.

**Surrogacy and assisted reproduction**

**Explained: The new laws relating to surrogacy and assisted reproduction, and related challenges (The Indian Express: 20220601)**


A couple from Britain whose baby was born on Oct. 17 by a surrogate pose their baby for a photo in Anand, India on Nov. 5, 2015

A couple has moved the Bombay High Court in a case related to the Surrogacy Act enacted in December last year

On May 18, the Bombay High Court sought Mumbai-based Hinduja Hospital’s reply after a couple moved the court seeking to complete a surrogacy procedure, which commenced before Parliament passed the Assisted Reproductive Technologies (ART) Act and the Surrogacy Act in December 2021.
The couple had approached the hospital in October 2021 to undergo surrogacy after the wife had lost both her children and could no longer naturally give birth due to a medical issue. After completing fertilization, the embryos were cryopreserved at Thane.

Later, after the two laws mentioned above came into force in January 2022, the hospital told the couple that they could not transfer the embryos to the surrogate carrier as the new law prohibited it from treating the surrogate carrier. In response, the couple moved the Bombay High Court seeking transfer of the embryos to any other ART clinic.

The hospital argued that under the new law, such issues were to be solved by a national or state board which had to be set up within 90 days of the implementation of the ART Act. On the other hand, the couple pointed out that no such board has not been constituted as yet. Hence, keeping the lifespan of the embryos in mind, the couple argued that they had to move the Bombay HC as a last resort.

What are the provisions of the ART Act & Surrogacy Act?

**Surrogacy (Regulation) Act:**

First introduced in the Lok Sabha on July 15, 2019, the Surrogacy (Regulation) Bill was sent to a select committee. After a thorough revision of the Bill, the report was tabled before the standing committee on February 5, 2020. Later, during the 2021 winter session of the Parliament, both houses passed the Bill. It was signed by the President and came into force in January 2022.

**What is surrogacy?**

The Act defines surrogacy as a practice where a woman gives birth to a child for an intending couple with the intention to hand it over to them after the birth. It is permitted only for altruistic purposes or for couples who suffer proven infertility or disease. Surrogacy is prohibited for commercial purposes including for sale, prostitution or any other forms of exploitation.

Moreover, once the child is born, it will be deemed to be the biological child of the couple for all intents and purposes. Abortion of such a fetus is allowed only with the consent of the
surrogate mother and the authorities and must adhere to the provisions of the Medical Termination of Pregnancy Act.

Who can avail of surrogacy?

Under the Act, a couple should procure certificates of eligibility and essentiality in order to have a child via surrogacy.

The couple is deemed ‘eligible’ if they have been married for five years, the wife is aged between 25-50 years and the husband is between 26-55 years. The couple must not have any living child (biological, adopted or surrogate.) A child with mental or physical disabilities, or one suffering from a life-threatening disorder or illness has been exempted from the above criterion.

The couple can get an ‘essential’ certificate if suffering from proven infertility of either partner certified by a District Medical Board, and an order of parentage and custody of the surrogate child, passed by a Magistrate’s court. They must also have insurance coverage for 16 months for the surrogate mother, covering any postpartum complications.

Who can be a surrogate?

A surrogate mother has to be a close relative of the couple, a married woman with a child of her own, aged between 25-35 years, who has been a surrogate only once in her life. She must also possess a certificate of medical and psychological fitness for surrogacy.

Who regulates surrogacy?

The Centre and State governments are expected to constitute a National Surrogacy Board (NSB) and State Surrogacy Boards (SSB) respectively, within 90 days of the passing of the Act. This body is tasked with enforcing standards for surrogacy clinics, investigating breaches and recommending modifications. Further, surrogacy clinics need to apply for registration within 60 days of the appointment of the appropriate authority.
Offences under the Act include commercial surrogacy, selling of embryos, exploiting, abandoning a surrogate child etc. These may invite up to 10 years of imprisonment and a fine of up to Rs. 10 lakh.

Assisted Reproductive Technology (ART) Act:

The ART Act was introduced in Lok Sabha in September 2020 and was sent to a Standing Committee for revisions. Later, along with the Surrogacy Act, it was passed in both Houses during the winter session of Parliament in December 2021. This law too came in force in January 2022.

What is ART?

ART is defined as all techniques used to obtain a pregnancy by handling the sperm or egg cell outside the human body and transferring the embryo into the woman’s reproductive tract. These include – sperm donation, in-vitro-fertilisation (IVF) (where the sperm is fertilized in a lab), and gestational surrogacy (child is not biologically related to surrogate).

Rules for ART clinics & banks

Every ART clinic and bank must be registered under the National Registry of Banks and Clinics of India which will maintain a central database with details of such institutions. The registration of such clinics and banks is valid for five years and can be renewed for another five years. It may be cancelled or suspended if the institution violates the provisions of the Act.

Clinics are not allowed to provide a child of pre-determined sex and must check for genetic diseases before an embryo is implanted in a woman’s body.

Conditions for sperm donation & ART services

A registered ART bank can screen, collect and store semen from men aged between 21 and 55 years. It can also store eggs from women aged between 23 and 35 years. Under the Act, female donors need to be married with at least one child of their own, aged at least three. A
woman can donate up to seven eggs only once in her life. A bank cannot supply the semen of one donor to more than one couple.

Such ART procedures require the written informed consent of both the couple and the donor. The couple seeking an ART procedure must provide insurance coverage for the female donor in case of loss, damage or death of the donor.

As mentioned above, clinics and banks are prohibited from advertising or offering sex-selective ART. Such an offence is punishable with imprisonment ranging between 5 to 10 years or/and a fine of Rs 10 to 25 lakhs.

A child born via an ART procedure will be deemed to be the couple’s biological child in the eyes of the law and is entitled all such rights. The donor does not retain any parental rights over the child.

Regulation of ART processes

The National and State Board formed under the Surrogacy Act are also expected to regulate ART services. These boards are to advise the government on policy, review and monitor implementation of the law, and formulate a code of conduct for ART clinics and banks.

Offences

Offences under this Act include abandoning or exploiting children born through ART; sale, purchase, or trade of embryos; exploiting the couple or donor in any form; and transfer of an embryo into a male or an animal. Such offences may attract a fine of Rs 5 to 10 lakhs for the first time. Subsequent offences are punishable with imprisonment for 8 to 12 years and a fine of Rs 10 to 20 lakhs.

What were the issues raised against these Bills?

Opposition law-makers argued that the ban on commercial surrogacy showed the Centre was ‘out-of-touch with ground realities.’ During the discussions in Parliament about the Bill, the
Opposition also stated its belief that the Bill curtailed the rights of women surrogates under the garb of curbing exploitation.

Moreover, several villages in Gujarat are known for commercial surrogacy. As per reports, Anand, known for Amul’s dairy factory, has also acquired fame as India’s ‘surrogacy capital,’ offering lucrative monetary opportunities for impoverished women.

Dr. Nayana Patel, who runs the Akanksha Infertility Clinic in Anand, says, “A surrogate makes anywhere between Rs. 3 to 5 lakhs per pregnancy, depending on the commissioning parents, and the total cost of “making a baby” is roughly Rs. 10 lakhs.”

Similarly in Hyderabad, IVF, surrogacy and egg donation have become a thriving business. Aspiring surrogate mothers are flocking to Hyderabad from places such as Rajahmundry, Srikakulam, Mahabubnagar, West Godavari and Visakhapatnam. In Mumbai, couples pay Rs. 12 to 15 lakh for one surrogacy, of which the surrogate mother earns Rs. 3 to 4.5 lakhs.

**Infection**

विश्व में मंकीपाक्स के बढ़ते मामलों पर केंद्र सरकार सक्रिय, राज्यों के लिए जारी की गाइडलाइन (Dainik Jagran: 20220601)


मंकीपाक्स रोग के प्रबंधन पर राज्यों और केंद्र शासित प्रदेशों को नया दिशा-निर्देश जारी किया है।

Monkeypox Alert गैर स्थानिक देशों में मंकीपाक्स के बढ़ते मामलों को देखते हुए सरकार सक्रिय हो गई है। सरकार ने एक दिशानिर्देश जारी किया जिसमें निगरानी तेजी से पहचान और आइसोलेशन पर जोर दिया गया है। हालांकि भारत में अभी मंकीपाक्स का कोई मामला सामने नहीं आया है।

नई दिल्ली, प्रेट्र। गैर स्थानिक देशों में मंकीपाक्स के बढ़ते मामलों को देखते हुए सरकार सक्रिय हो गई है। सरकार ने मंगलवार को एक दिशानिर्देश जारी किया, जिसमें निगरानी, तेजी से पहचान और
आइसोलेशन पर जोर दिया गया है। हालांकि, भारत में अभी मंकीपाक्स का कोई मामला सामने नहीं आया है। गैर स्थानिक से मतलब ऐसे देशों से हैं जहां यह बीमारी पैदा नहीं हुई है, बल्कि बाहर से आई है। इसमें अमेरिका और यूरोप के कई देश शामिल हैं। पिछले दिनों डब्ल्यूएचओ ने ऐसे देशों की संख्या 20 बताई थी, जहां मंकीपाक्स के दो सौ से ज्यादा मामले पाए जा चुके हैं।

राज्यों और केंद्र शासित प्रदेशों को जारी दिशानिर्देश

राज्यों और केंद्र शासित प्रदेशों को जारी दिशानिर्देश में केंद्रीय स्वास्थ्य मंत्रालय ने इस बीमारी के संभावित प्रसार को रोकने के लिए सार्वजनिक स्वास्थ्य उपाय के तहत नए मामलों की निगरानी और तेजी से पहचान करने पर जोर दिया है। मंत्रालय ने कहा है कि भले ही देश में मंकीपाक्स का कोई मामला सामने नहीं आया है, लेकिन गैर स्थानिक देशों में इसके बढ़ते मामलों को देखते हुए तैयार रहने की जरूरत है। इसमें संक्रमण की संभावना वाले क्षेत्रों और संक्रमण के स्नोट वाले क्षेत्रों में निगरानी और तेजी से मामलों की पहचान पर विशेष जोर दिया गया है। कोई मामला मिलने पर मरीज को तत्काल आइसोलेशन में रखने और संपर्क में दूसरे लोगों को लेकर भी जानकारी दी गई है। यह भी कहा गया है कि संदिग्ध पाए जाने वाले मामलों के नमूने को जल्द से जल्द आइसीएणआर के पुणे स्थित एनआइवी प्रयोगशाला भेजने की जरूरत है।

मंकीपाक्स

वास्तव में मंकीपाक्स चेक की तरह होने वाला एक दुर्लभ वायरल संक्रमण है। यह पहली बार 1958 में अनुसंधान के लिए रखे गए बंदरों में खोजा गया था। चूंकि एक बार बंदर के बीच यह बीमारी फैली थी, इसलिए इसका नाम मंकीपाक्स रखा गया। मानव में मंकीपाक्स का पहला मामला 1970 में सामने आया था। यह रोग मुख्य रूप से मध्य और पश्चिम अफ्रीका के उष्णकटिबंधीय वर्षा वन क्षेत्रों में होता है। यह वायरस पाक्सविरिड परिवार से संबंधित है, जिसमें चेहरे रोग पैदा करने वाले वायरस भी शामिल हैं।

Smoking

क्या आप जानते हैं सिगरेट बनाने के लिए दुनिया में हर साल शेष चढ़ते हैं छह मिलियन पेड़ (Dainik Jagran: 20220601)

22 बिलियन टन पानी होता है सिगरेट बनाने में प्रयोग, विश्व में हर साल 80 लाख मौत का जिस्मेदार कैंसर

केवल सिगरेट बनाने के लिए हर साल दुनिया में छह मिलियन पेड बादाम जाते हैं। दबल्यूएसबी की ओर से अधिकारिक तौर पर ऐसा दावा किया गया है। चीजियाई चिकित्सक डा. सुनीला राठी के अनुसार इस बार विश्व तंबाकू निषेध दिवस की थीम भी पर्यावरण बनाएं रखी गई थी।

जागरण संवाददाता, रोहतक : जब आपको पता लगेगा कि केवल सिगरेट बनाने के लिए हर साल दुनिया में छह मिलियन पेड काटे जाते हैं तो आपको अचरज होगा। विश्व स्वास्थ्य संगठन की ओर से अधिकारिक तौर पर ऐसा दावा किया गया है। पंडित भगवत दयाल शर्मा स्वास्थ्य विज्ञान विश्व विद्यालय के मान्सिक स्वास्थ्य विभाग की चिकित्सक डा. सुनीला राठी के अनुसार पेड काटने को ध्यान में रखते हुए ही इस बार विश्व तंबाकू निषेध दिवस की थीम भी पर्यावरण बनाएं रखी गई थी।

डा. राठी के अनुसार विश्व स्वास्थ्य संगठन का दावा है कि पेड ही नहीं पानी भी बड़ी मात्रा में इस पर खर्च होता है। शोध के अनुसार 22 बिलियन टन पानी की सिगरेट बनाने में हर साल खपत होती है। यह केवल स्मोकिंग के जरिए ही नहीं बल्कि दूसरे तरीके से भी पर्यावरण के लिए खतरनाक है। पर्यावरण पर तंबाकू उद्योग का हानिकारक प्रभाव बहुत बड़ा है और हमारे यह के पहले से ही दुर्लभ संसाधनों और नाजुक पारिस्थितिक तत्त्व पर अनावश्यक दबाव बढ़ा रहा है।

-80 लाख मौत का जिस्मेदार कैंसर

डा. सुनीला राठी के अनुसार विश्व में हर साल 80 लाख लोगों की मौत तंबाकू के सेवन से होने वाली बीमारियों के द्वारा होती है। तंबाकू हमारी सेहत के साथ-साथ हमारे वातावरण को भी काफी नुकसान पहुंचा रहा है। डा. राठी के अनुसार कहा कि अधिकतर लोग 13 से 14 साल के उम्र में तंबाकू सेवन शुरू करते हैं। डा. राठी ने बताया कि फेफड़ों की बीमारी को कम करने का सबसे अच्छा तरीका यही है कि धूम्रपान का सेवन किसी भी रूप में कम से कम हो।

उन्होंने इस बात पर बल दिया कि तंबाकू से ना केवल इस्तेमाल करने वाले को नुकसान होता है, परंतु अन्य वाले पीढियों भी बहुत प्रभावित होती हैं। एक अनुसंधान के अनुसार हर साल लगभग 100 लाख लोग उद्योग 84 बेगान्बन तक कार्बन डाईोक्साइड उत्पन्न करते हैं। तंबाकू के द्वारा हमारा पानी, भूत, समुद्र तट, शहर की सड़कें, हमारी हवा, सबकुछ कहीं ना कहीं प्रभावित हो रहा है।
61 फीसदी आबादी अब नहीं पचाया पाती दूध व उसके उत्पाद (Hindustan: 20220601)


विश्व दूध दिवस आज लखनऊ। वरिष्ठ संवाददाता हड्डडयों की मजबूती के लिए रोज दूध...

विश्व दूध दिवस आज
हड्डडयों की मजबूती के लिए रोज दूध पिएं। तंदुरुती के लिए दूध का सेवन जरूरी है। यह सब पुरानी बात हो गई है। अब दूध को लोग पचा नहीं पा रहे हैं। करीब 61 फीसदी आबादी को दूध पीने के बाद पेट दर्द, गैस बनना, उल्टी व डायररया जैसी समस्या हो जाती है। चिंता की बात यह है कि यह समस्या ताजम रहती है।

एक साल बच्चों से लेकर बड़ों तक में दूध व उसके उत्पादों को लेकर समस्या देखने को मिल रही है। दो तरह की परेशानी लोगों को घेर रही है। पीजीआई बाल रोग विभाग की डॉ. पियाली भड्डाचायाय के मुताबिक पहला एलजी और दूसरा लैक्टोज इंटॉलरेंस। उन्होंने बताया कि एलजी उम्र के किसी भी पड़ताल में हो सकती है। ऐसी दशा में व्यक्ति जब दूध पीता है तो उसका पेट गड़बड़ हो जाता है। पेट दर्द, मरोड़ शुरू हो जाता है। ऐसे लोगों को दूध या उसके उत्पादों का सेवन न करने की सलाह दी जाती है। वहीं लैक्टोज इंटॉलरेंस एक साल से अधिक उम्र के बच्चों में देखने को मिलती है।

आंतों में हो जाता है संक्रमण
डॉ. पियाली भड्डाचायाय ने बताया कि आंतों में खास तरह का संक्रमण हो जाता है। इसकी वजह से आंतों की स्वस्थ्य कोशिकाएं नष्ट हो जाती हैं। नतीजतन व्यक्ति दूध नहीं पचाया पाते हैं। यह कोशिकाएं दोबारा 15 दिन में दुर्स्त होती हैं। इस दौरान दूध या संक्रमण के लिए जिम्मेदारी दूसरी वस्तुओं के सेवन से लैरा चाहिए। उन्होंने बताया कि दूध पिलाने की बोतलों के उपयोग या समय से पहले
जन्म के बाद जहां आंतों के विली अपने लेक्टेज एंजाइम को खो देते हैं। जो दूध को चमका है। उन्होंने बताया की वयस्कों में दूध न पचा पाने की एक वजह एलसीिी जीन भी हो सकता है।

Drugs

प्रतिबंधित दवाएं बेचने से पहले लेना होगा मरीज का आधार कार्ड, डॉक्टर की मोहर लगी वर्षी (Dainik Jagran: 20220601)


दवा विक्रेता किसी भी तरह की प्रतिबंधित दवाएं बिना डॉक्टर की मोहर लगी पर्ची से नहीं बेचेंगे।

Banned Medicine दवा विक्रेता किसी भी तरह की प्रतिबंधित दवाएं बिना डॉक्टर की मोहर लगी पर्ची से नहीं बेचेंगे। साथ ही खरीदने वाले का आधार कार्ड का नंबर अपने पास लिखें। यह बात ऑसिस्टेंट ड्रग कंट्रोलर कमलेश नायक ने जिला के दवा विक्रेताओं के साथ आयोजित बैठक में कही।

मंडी, जागरण संवाददाता। Banned Medicine, जिला के दवा विक्रेता किसी भी तरह की प्रतिबंधित दवाएं बिना डॉक्टर की मोहर लगी पर्ची से नहीं बेचेंगे। साथ ही खरीदने वाले का आधार कार्ड का नंबर अपने पास लिखें। यह बात ऑसिस्टेंट ड्रग कंट्रोलर कमलेश नायक ने जिला के दवा विक्रेताओं के साथ आयोजित बैठक में कही। उन्होंने कहा कि विभाग की टीमें मेडिकल स्टोरों में दबिश दे रही हैं। दवा विक्रेताओं से आया है कि बिना फार्मासिस्ट के दवा न बेची जाए। प्रतिबंधित दवाओं का पूरा रिकार्ड रखना अनिवार्य होगा। नशे पर रोकथाम लगाने में मेडिकल स्टोर संचालकों की भी अहम भूमिका रहती है।

उन्होंने कहा कि तथाकथित डॉक्टरों पर लगाम करने के लिए अब उन्हें जो लोग दवाएं सप्लाई करते हैं उन पर कार्रवाई होगी। यह आवश्यक है कि दवाएं सप्लाई करने से पहले यह देख लें कि जिस डॉक्टर को दवाएं दी जा रही हें, वह मानक पूरी करता है या नहीं। बैठक में मेडिकल एंड ड्रग्सिस्ट एसोसिएशन के अध्यक्ष योगेश सहित अन्य पदाधिकारी मौजूद रहे।
पूर्व में विभाग की ओर से कुल्लू व सुंदरनगर के सिविल सप्लाई की दुकानों में फार्मासिस्ट नियमानुसार न होने पर जारी किए गए नोटिस के बाद अब वहां पर अतिरिक्त फार्मासिस्ट तैनात कर दिए गए हैं।