



DAILY NEWS BULLETIN

LEADING HEALTH, POPULATION AND FAMILY WELFARE STORIES OF THE DAY
Monday 20240506

Cochlear implant

Cochlear implant: Silence to sound (The Tribune: 20240506)

<https://www.tribuneindia.com/news/health/silence-to-sound-617673>

A cochlear implant offers a near-normal life to the hearing impaired. The surgery provides best results when performed during childhood

Chandigarh-based Omisha Gupta (6) was over two years old when her parents finally realised that she was born with total hearing impairment. “She was such an active and responsive child that it never occurred to us,” says her mother Shweta, a banker. “At 15 months, while going for her vaccination, we did ask a child specialist about her slow speech development, but the paediatrician said that sometimes children start speaking late. We would periodically consult doctors about her delayed speech, but no one ever said anything about a hearing impairment because she would understand whatever we said, communicate about her needs through actions and even dance,” adds Shweta.

A cochlear implant device. ISTOCK

Finally, when Omisha was around two-and-a-half years old, her father, Avnish, suspected that the problem may be related to hearing. “I suggested performing a simple task. We switched on some music, turned the volume to maximum and kept the speaker away so that she couldn’t see its blinking light. I suspected that’s how she could dance when it was on. Omisha did not show any response to the loud music. It was the evening of Independence Day in 2020, and we found an ENT specialist the next day after a lot of effort. After some basic hearing tests, she confirmed my fears. We opted to go to PGI for an exact diagnosis and treatment options,” says Avnish.

Omisha's parents spent the next couple of months consulting specialists at the PGI's ENT department. Doctors at the institute conducted advanced tests, trying out hearing aids for a month, a standard procedure, before Dr Naresh K Panda, HoD, Otolaryngology (ENT), operated upon the child, performing a bilateral cochlear implant (CI) surgery. A bilateral CI surgery can be done simultaneously (both ears together) or sequentially (one ear each, six months to a year apart). The PGI, till date, has performed 30-40 bilateral CI surgeries; nearly 60 per cent of these have been sequential.

Dr Panda, instrumental in starting CI surgery in PGI 20 years back, while recalling his journey, says, "Earlier, when patients with hearing disability would come to us for treatment, I'd get frustrated as we could only prescribe hearing aids. A majority would not respond to these aids in case of a profound hearing loss. This frustration acted as a motivation and my colleague, Dr Anu Nagarkar, and I went to Australia to learn about cochlear implant surgery at the Bionic Institute in Melbourne in October 2002."

A cochlear implant is a small, electronic device surgically placed inside the skin behind the ear. It provides a sense of sound to a profoundly deaf person. The implant consists of an external portion that sits behind the ear and a second portion that is surgically implanted under the skin. Cochlear implants are designed for people with moderate to severe sensorineural hearing loss (due to damage in the inner ear) who have difficulty in interpreting speech even with a hearing aid.

As per WHO estimates, India has approximately 6.36 crore people suffering from significant auditory impairment. A 2018 review article in the 'National Medical Journal of India', however, put these numbers at 10 crore. Another article in the 'Indian Journal of Otology' says that over one lakh babies are born with hearing deficiency every year, while four in every 1,000 children suffer from severe to profound hearing loss. Of these, a large percentage is children between the ages of 0 and 14 years. Hearing impairment, if left undiagnosed, can lead to long-lasting effects on speech, language, cognition and psycho-social development that impacts educational and vocational achievements.

According to Dr Panda, as per the National Programme for Prevention and Control of Deafness (NPPCD), every newborn at the PGI is screened for hearing disability under the Universal Neonatal Hearing Screening Programme; it is also offered by all major hospitals across India. "The earliest the hearing loss is detected, the better it is because a child with a profound hearing disability cannot develop speech and language

The possibility of hearing loss is more in high-risk categories, which include pre-mature and low-birth babies, those who had severe jaundice after birth, new-borns who experienced a lack of oxygen to the brain before or shortly after birth and in case of a family history of deafness, adds Dr Panda. Omisha's case, however, was idiopathic (cause unknown)

The CI implants can be expensive. The cost can vary from Rs 5 lakh to Rs 15 lakh based on the quality of the device used. Three FDA-approved imported implants are being used in CI surgeries at PGI — MED-EL (Austria), Cochlear (Australia) and Advanced Bionics (US), Dr Panda adds. "The waiting period is usually one to two months."

The DRDO is also developing an indigenous CI device. Government programmes, such as the ADIP (Assistance to Disabled Persons for Purchase/Fitting of Aids and Appliances) scheme, provide free CI devices to those with minimum 40 per cent disability and income under Rs 15,000 per month, while those earning between Rs 15,000 and Rs 20,000 are given 50 per cent cost of aid/appliance. The PGI has performed 45-50 such surgeries. Private hospitals like Fortis, Max and Shalby also offer CI surgeries at their various centres, including Mohali.

For Omisha and her parents, life has definitely taken a turnaround, though challenges exist. Her speech and language development is a little slow because of her complete hearing loss in the initial years. After her surgery, her parents initially opted for professional speech therapy, but soon realised that she was more responsive in a homely atmosphere.

Their hard work has paid off. Omisha is now a student of Class I at Carmel Convent. “The school authorities have been quite supportive, providing a special counsellor for her in the initial years.” For Shweta, the fact that her daughter studies along with other ‘normal’ children is a huge pay-off for the efforts she and her husband have been putting in after the surgery. “She even participates in singing and dance programmes with the rest of her class during school functions,” adds the proud mother.

Two decades of CI surgery at PGI

The first-ever cochlear transplant surgery was performed by Dr NK Panda and his team on an adult patient on April 3, 2003, under the mentorship of Padma Shri awardee Dr Mohan Kameshwaran, MD, Madras ENT Research Foundation. Since then, over 600 such surgeries have been performed on children and adults. Mostly performed on infants, toddlers and children, the CI surgery can also be performed on adults and elderly who suffer from hearing loss due to various medical and/or age-related issues. The PGI has done around 75 such surgeries on adults, the oldest being a 78-year-old patient from Ambala. The youngest patient was an 11-month-old from Kaithal.

Inflammatory bowel disease (IBD)

Inflammatory bowel disease (IBD) is often misdiagnosed (The Tribune: 20240506)

Confused with other gastro-intestinal issues, diagnosis of inflammatory bowel disease can get delayed

<https://www.tribuneindia.com/news/health/ibd-is-often-misdiagnosed-617677>

Inflammatory bowel disease (IBD) is often misdiagnosed

At 15 lakh cases, India is believed to have the second largest patient base globally after the US.

Mrs Bela T (47) had been having irregular episodes of bloody diarrhoea for 10 years and would often take antibiotics for it. Two years after the onset of symptoms, she was diagnosed with ulcerative colitis, but stopped treatment after her symptoms improved. When she experienced severe abdominal pain with bleeding, further evaluation showed the presence of disseminated colon cancer due to untreated ulcerative colitis, a subtype of inflammatory bowel disease or IBD.

At 15 lakh cases, India is believed to have the second largest patient base globally after the US. An autoimmune disease of the gut, its numbers are expected to increase in the coming years. While the causes are not entirely clear, it is believed that both genetic and environmental factors result in an autoimmune process that injures the gut and its barrier. Some studies attribute the rising numbers to westernisation of Indian lifestyles, increased intake of fat and carbohydrate-rich diet, reduction in fibre intake and rising use of ultra-processed foods.

Although lumped under a single term 'IBD', the disease is broadly recognised to have two subtypes — ulcerative colitis (largely affecting the large intestine) and Crohn's disease (which may affect both large and small intestines). Besides the intestines, IBD may also have extra-intestinal manifestations resulting in many problems, including those related to joints, skin, liver and various other organs.

Non-specific symptoms

IBD's symptoms are diverse and non-specific. Most patients experience bleeding in stools, long-standing diarrhoea, abdominal pain, intestinal obstruction, weight loss, etc. A diagnostic delay is

well recognised due to the non-specificity of symptoms. Absence of specific clinical features, limited access to diagnostic facilities, confusion with other gastro-intestinal diseases that may mimic IBD, and lack of awareness about this condition remain major factors behind a delayed diagnosis.

In TB-endemic countries such as India, gastrointestinal tuberculosis closely mimics Crohn's disease. Delay in diagnosis may cause complications like intestinal strictures, intestinal obstruction, massive bleeding or even colon cancer.

There is no permanent cure for IBD. The Hindi name 'sangrahani' aptly captures the disease's chronic nature. IBD patients have to take medication throughout their life, making it an expensive affair. Many go through a cycle of denial, searching for a permanent cure, stopping standard therapy and trying alternative therapies, which often result in reactivation of the disease. These flare-ups usually result in increased cost of care, need for hospitalisation and emergency surgery. Managing IBD needs coordinated care between doctors and the patient.

Symptoms often take a toll on patients. Active disease is associated with fatigue, abdominal pain, bloody diarrhoea that may cause low BP, malnutrition, systemic toxicity, etc, endangering a patient's life or necessitating surgery. As it is usually a prolonged problem, it may result in absenteeism from work, loss of job, low self-esteem, inability to do normal activities, travel, etc, as patients need access to clean toilets and hygienic food.

The disease has been recognised to impact the mental health of both patients and caregivers. However, if IBD remains under control, patients can live a near-normal life with routine activities and dietary precautions.

Standard therapy for IBD has been 5-aminosalicylates (routine IBD medication), steroids and immune-modulators. While steroids are cost-effective, have quick action and excellent response rates, their prolonged use is associated with significant adverse effects, including bone loss, risk of diabetes, cataract, deranged lipid profile, etc.

Recent research has identified some specific inflammatory mediators (chemical agents in the body) responsible for IBD. This has made feasible the possibility of targeted therapies that may have less immunosuppression and adverse effects. Unfortunately, some of these therapies are costly and not affordable for many IBD patients. However, advances, including introduction of biosimilars (drug similar to another biological medicine) and generic small molecules, and increasing insurance coverage through private and government insurance schemes, are likely to improve the access to advanced IBD therapies to a large number of patients.

Lifestyle measures for IBD patients

Eat hygienic, well-cooked and balanced diet.

Increase fibre intake. Many studies say fibre plays a significant role in reducing IBD due to its influence on healthy gut bacteria. However, in a subset of patients with narrowing in intestine (intestinal strictures), fibre may be detrimental.

Reduce fried and fast food.

Avoid eating out as hygiene may be a concern.

Have more curd, buttermilk, fruits and vegetables.

Opt for adult vaccinations for preventable diseases, as IBD and certain medications may reduce immunity and result in increased risk or adverse outcomes of infections.

Avoid painkillers and antibiotics unless prescribed.

Be compliant with treatment and regular with follow-up.

When to consult the doctor

Blood in stools

Long-standing or recurrent diarrhoea

Urgency to pass stool and increased frequency of bowel movements

Recurrent pain in abdomen

Intestinal obstruction

Unexplained weight loss or anaemia

Non-healing or complex perianal fistula

— The writer is Additional Professor, Gastroenterology, PGIMER, Chandigarh

New Covid variant ‘FLiRT’

New Covid variant ‘FLiRT’ capable of evading the immune system: Experts (The Tribune: 20240506)

<https://www.tribuneindia.com/news/health/new-covid-variant-flirt-capable-of-evading-the-immune-system-experts-618179>

Symptoms of the new variant are similar to those of other Omicron sub-variants

New Covid variant ‘FLiRT’ capable of evading the immune system: Experts

According to the Infectious Disease Society of America, the nickname ‘FLiRT’ is based on the technical names for their mutations. iStock

The new Covid-19 variant 'FLiRT', which is spreading fast in the US, is capable of evading the immune system due to a trans substitution of amino acids between two spike proteins, the experts said on Sunday.

FLiRT, which belongs to Omicron's JN1 lineage, is rapidly replacing the previous variant, Eris, in the US, the UK, New Zealand, and South Korea, according to Rajeev Gupta, Director of Internal Medicine at the CK Birla Hospital® in Delhi.

"A recent increase in hospitalisation rates in these countries has been attributed to this variant. However, it has remained a relatively small wave. The overall mortality rate has not increased," Gupta said.

According to the Infectious Disease Society of America, the nickname 'FLiRT' is based on the technical names for their mutations.

The World Health Organisation has reclassified it as a variant of interest and advised close monitoring.

According to Dhiren Gupta, a Pediatric Intensivist at Sir Ganga Ram Hospital, these new strains will keep emerging.

"Fortunately, none of the Omicron lineage is able to induce significant lung damage as delta strain did but limited to the upper respiratory tract. The surveillance and vigilance should be kept for major drift in virus," he said.

According to the experts, the increased use of monoclonal antibodies could be driving this mutation.

The symptoms of the new variant are similar to those of other Omicron sub-variants, such as sore throat, cough, fatigue, nasal congestion, runny nose, headache, muscle aches, fever, and possible loss of taste and smell, the experts mentioned.

Covishield vaccine

Karnataka Health Department serves notice to private law college for spreading false rumours about Covishield vaccine (The Hindu: 20240506)

<https://www.thehindu.com/sci-tech/health/health-department-serves-notice-to-private-law-college-for-spreading-false-rumours-about-covishield-vaccine/article68142317.ece>

The Health Department clarified that it had not published any such notification and it has been seen that false rumours are being spread on social media and this is being taken seriously.

The Department of Health and Family Welfare has served a notice to Sri Siddaramaiah Law College, Chickballapur, for allegedly spreading false rumours that people who have been vaccinated with Covishield vaccine suffer from cardiac arrests. The department has told the college to issue a clarification.

The college allegedly claimed that the Health Department said that blood clots and sudden heart attacks are causing deaths as a result of Covishield vaccination taken during the COVID-19 pandemic and issued an instruction that students should not consume cold water, ice cream and soft drinks.

Organ donation rate

Monitor brain stem death cases in ICUs to improve organ donation rate: Centre to states (The Tribune: 20240506)

<https://www.tribuneindia.com/news/health/monitor-brain-stem-death-cases-in-icus-to-improve-organ-donation-rate-centre-to-states-618177>

Poor identification and certification of such cases is keeping the organ donations rate at low levels

Monitor brain stem death cases in ICUs to improve organ donation rate: Centre to states

"One of the key challenges identified in this is poor identification and certification of brain stem death (BSD) cases despite availability of many such potential cases," stated Anil Kumar, Director of National Organ and Tissue Transplant Organization (NOTTO). File Photo

The Centre has asked states to monitor cases of brain stem deaths in ICU patients, saying poor identification and certification of such cases is keeping the organ donations rate at low levels in the country.

The advisory to the states is aimed at augmenting the organ donation rate in the country which is less than one donor per million population.

"The organ donation rate in India continues to be low (less than one donor per million population in a year). One of the key challenges identified in this is poor identification and certification of brain stem death (BSD) cases despite availability of many such potential cases," stated Anil Kumar, Director of National Organ and Tissue Transplant Organization (NOTTO) in the letter to the states.

As per provisions of 'The Transplantation of Human Organs Tissues Act, 1994', it is required to identify potential BSD cases in the ICU.

Further, it is mandatory to enquire whether such potential donors had pledged for organ donation and if not to make the family members aware of the opportunity to donate organs before the heart stops under the law, he said.

The doctor on duty, with the help of transplant coordinator, is required to make the above-mentioned inquiry after certification of such BSD cases, Kumar said in the letter sent to all states and UTs, and directors of regional and state organ and tissue transplant organisation (ROTTOS and SOTTOs) last month.

Kumar said every institution is requested to facilitate and monitor the certification of BSD cases to ensure compliance of provisions of the Act and Rules.

In his letter, the official attached a template of 'required request display board' that is to be placed outside ICUs, emergency or any other strategic location in the hospital. He also attached a list of information to be collected from the hospitals on a regular monthly basis.

The head of the institution and respective SOTTO should analyse the collected information. The corrective actions must be taken with the aim to maximise organ donation from all potential donors, he said.

Further, all SOTTOs are requested to collect such information as per the list from each registered hospital and send it to the NOTTO by the seventh of every subsequent month, the letter said.

"I seek your cooperation and support for augmenting the organ donation rate in the country so as to achieve self-sufficiency in the field of deceased organ donation," the letter added.

Pesticide

India adopts stringent norms for maximum pesticide residues limit in food items: Government (The Tribune: 20240506)

<https://www.tribuneindia.com/news/health/india-adopts-stringent-norms-for-maximum-pesticide-residues-limit-in-food-items-government-618168>

This practice is aligned with global standards and ensures that MRL revisions are made on a scientifically valid basis

India adopts stringent norms for maximum pesticide residues limit in food items: Government

“Some media reports are claiming that the FSSAI allows 10 times more pesticide residue in herbs and spices,” the ministry said. iStock

The government on Sunday asserted that India has one of the most stringent norms for pesticide residues in food items and rejected reports suggesting that food regulator Food Safety and Standards Authority of India (FSSAI) allows high level of residues in spices and herbs.

The clarification comes amid a ban imposed by the Hong Kong food regulator on certain spice mix of two leading Indian brands, MDH and Everest, on alleged presence of pesticide Ethylene Oxide in their samples. The Singapore food regulator too ordered a recall of one spice product of the Everest brand.

FSSAI is currently collecting samples of branded spices, including that of MDH and Everest, sold in the domestic markets to ensure they comply with its quality norms. It does not regulate the quality of exported spices.

In a statement, the Union Health Ministry clarified that maximum residue limits are different for various food products based on risk assessment.

“Some media reports are claiming that the FSSAI allows 10 times more pesticide residue in herbs and spices. Such reports are false and malicious,” the ministry said.

India has one of the most stringent standards of Maximum Residue Limits (MRLs) in the world, it asserted.

“MRLs of pesticides are fixed differently for different food commodities based on their risk assessments,” the ministry explained.

Pesticides are regulated by the Ministry of Agriculture through the Central Insecticide Board and Registration Committee (CIB & RC) constituted under the Insecticide Act, 1968.

The CIB & RC regulate the manufacturing, import, transport, and storage of pesticides. Accordingly, the pesticides are registered/banned/restricted by CIB & RC.

Explaining the process of fixing pesticides residue limits, the health ministry said that the FSSAI’s scientific panel on pesticides residue examines the data received through CIB & RC and recommends the MRLs after performing risk assessment.

The dietary consumption of the Indian population and health concerns in respect of all age groups are taken into account.

“Total pesticides registered by CIB & RC in India are more than 295, out of which 139 pesticides are registered for use in spices,” the ministry said.

The ministry further said that a pesticide is registered on many food commodities with different MRLs based on risk assessment data.

For instance, the use of Monocrotophos is allowed on many crops with different MRLs such as rice at 0.03 mg/kg, citrus fruits at 0.2 mg/kg, coffee beans at 0.1 mg/kg, cardamom 0.5 mg/kg, and chilli at 0.2 mg/kg.

“The MRL of 0.01 mg/kg was applicable in case of pesticides for which MRLs have not been fixed.

“This limit was increased to 0.1 mg/kg only in cases of spices and is applicable only for those pesticides which are not registered in India by CIB & RC,” the statement said.

This was recommended by the Scientific Panel on Pesticide Residues after considering the adoption of MRLs in the range 0.1 mg/kg and above by Codex Alimentarius Commission on Pesticide Residues on spices during 2021-23 in a phased manner for various spices in the world.

MRLs fixed by CODEX for spices and culinary herbs range from 0.1 to 80 mg/kg.

The ministry further explained that one pesticide/insecticide is used in more than 10 crops with different MRLs.

For example, Flubendiamide is used in brinjal with an MRL of 0.1, whereas for Bengal gram the MRL is 1.0 mg/kg, cabbage 4 mg/kg, tomato 2 mg/kg and tea 50 mg/kg.

Similarly, Monocrotophos used for food grains with MRLs at 0.03 mg/kg, for citrus fruits 0.2 mg/kg, for dried chilli it is 2 mg/kg and for Cardamom 0.5 mg/kg.

The MRLs fixed by CODEX for Myclobutanil used for chilli is 20 mg/kg whereas the limit set by FSSAI is 2mg/kg.

For Spiromesifen, used for chilli, Codex limit is 5 mg/kg, whereas FSSAI limit is 1 mg/kg.

Similarly, Codex standards for Metalaxyl and Metalaxyl-M used for black pepper is 2mg/kg, whereas the limit set by FSSAI is 0.5 mg/kg.

The new Codex MRLs for Dithiocarbamates, Phorate, Triazophos and Profenophos for Fennel is 0.1 mg/kg.

“FSSAI aligns with the updated standards of MRLs set by Codex Alimentarius Commission (an International Food Safety and Quality Standard setting body created by WHO and FAO of UN) and the European Union,” the statement said.

The MRLs are dynamic in nature and are regularly revised based on the scientific data, it added.

This practice is aligned with global standards and ensures that MRL revisions are made on a scientifically valid basis, reflecting the latest findings and international norms.

Transform healthcare

A computer science conundrum that could transform healthcare (The Hindu: 20240506)

<https://www.thehindu.com/sci-tech/health/p-versus-np-transform-healthcare/article68131538.ece>

The P vs NP question is a problem in mathematics and computer science, but that does not mean it will be confined there

Medical equipment on the background of group of health workers in the ICU. Representative image.

Medical equipment on the background of group of health workers in the ICU. Representative image. | Photo Credit: Getty Images/iStockphoto

In the 17th century, a Dutch draper named Anton van Leeuwenhoek used a small handmade microscope to peer into a world previously unseen by the human eye. Thus he discovered microorganisms and gave rise to the field of microbiology. It offered solutions to challenges in healthcare that until then had seemed intractable.

Today, we face a new set of complex problems in healthcare that seem more intractable than others before for their inherent complexity and the constraints they threaten to impose on resources.

Malaria

The Science Quiz | Revisiting malaria and its unique challenges (The Hindu: 20240506)

<https://www.thehindu.com/sci-tech/health/the-science-quiz-revisiting-malaria-and-its-unique-challenges/article68131808.ece>

Image for representational purpose only. File

Image for representational purpose only. File | Photo Credit: Getty Images/iStockphoto

The Science Quiz appears thrice a week in the daily Science page. The page is available to read on all days except Saturday in the epaper.

1. Malaria is caused by parasites transmitted through the bite of this female mosquito, discovered in 1897 by a British doctor. Name the mosquito and the doctor.

Brain death cases

Poor identification of brain death cases impacting organ donations: Health Ministry(The Hindu: 20240506)

Centre issues guidelines to identify each potential brain stem death case admitted in the ICU

<https://www.thehindu.com/sci-tech/health/poor-identification-of-brain-death-cases-impacting-organ-donations-health-ministry/article68135522.ece>

Poor identification and certification of brain stem death or brain death cases is keeping the rate of organ donations at low levels in India, despite the availability of many potential cases, the Union Health Ministry has said.

Expressing concern over the rate of organ donations in the country remaining at less than one donor per million population in a year, the Directorate General of Health Services (DGHS) asked

health authorities in States/Union Territories to identify each potential brain death case admitted in the Intensive Care Unit (ICU) and inquire whether the potential donor had pledged for organ donation. If not, hospital authorities should make family members aware of the opportunity to donate organs before the heart stops.

Essential Programme on Immunisation'

Make EPI an 'Essential Programme on Immunisation' (The Hindu: 20240506)

<https://www.thehindu.com/opinion/lead/make-epi-an-essential-programme-on-immunisation/article68126088.ece>

In the 50 years of the Expanded Programme on Immunization, it is time for another expansion

'The prevailing myths and misconceptions about vaccines must be proactively addressed to tackle vaccine hesitancy'

'The prevailing myths and misconceptions about vaccines must be proactively addressed to tackle vaccine hesitancy' | Photo Credit: Getty Images

The year 2024 marks a significant milestone for immunisation programmes, both globally and in India. It commemorates 50 years since the launch of the Expanded Programme on Immunization (EPI) by the World Health Organization (WHO) in 1974. The EPI was introduced as the eradication of smallpox virus was on the horizon, and a need to leverage the then immunisation infrastructure and a trained workforce was recognised to expand the benefit of available vaccines. Following the announcement, nearly every country across the world initiated its national immunisation programme. India launched the EPI in 1978, which was later renamed as the Universal Immunization Programme (UIP) in 1985. In India, this year is also two decades since the country conducted the last nationwide independent field evaluation of the UIP, in collaboration with international experts. This is an opportune moment to assess the progress made and envision the future.

Globally, and in India, there has been significant progress in terms of the impact of immunisation and vaccines. While in 1974, there were vaccines to prevent six diseases, five decades later, there are vaccines against 13 diseases which are universally recommended; and vaccines against 17 additional diseases are recommended for a context-specific situation. There is research in progress

to develop vaccines against nearly 125 pathogens — many would prevent diseases prevalent in low- and middle-income countries.

Covishield vaccine

Covishield vaccine has had more benefits than risks, says study by Kozhikode doctors (The Hindu: 20240506)

<https://www.thehindu.com/news/national/kerala/covishield-vaccine-has-had-more-benefits-than-risks-says-study-by-kozhikode-doctors/article68139628.ece>

AstraZeneca admitted in High Court of London, United Kingdom, that its vaccine had the potential to cause thrombosis with thrombocytopenia syndrome

At a time when the safety aspects of the Covishield vaccine have kicked up a row, a retrospective study by two doctors from Kozhikode has claimed that its risks are minimal in view of the benefits.

The findings of the study are now being peer-reviewed ahead of their publication in a reputed medical journal. T. Jayakrishnan, head of the Department of Community Medicine, and Sruthi Krishna, senior resident, KMCT Medical College, Kozhikode, are the authors.

Ayurvedic formulation

Expert vouches for this Ayurvedic formulation, says it ‘100 per cent effective in balancing blood sugar, reversing pre-diabetes’ (Indian express: 20240506)

<https://indianexpress.com/article/lifestyle/food-wine/turmeric-amla-blood-sugar-diabetes-benefits-nisha-amalaki-9302836/>

It's important to remember that even though some natural cures seem promising, medical treatment should still be sought at the earliest, said Sushma PS, chief dietitian, Jindal Naturecure Institute

blood sugar How often do you check your blood sugar levels? (Source: Getty Images/Thinkstock)

There are many dos and don'ts when it comes to our health and diet. But making a few small tweaks and adopting certain healthy food habits can help us stay in the pink. Agreeing with this mantra is Ayurvedic practitioner Dr Dixa Bhavsar Savaliya who swears by the benefits of having amla-turmeric, also called Nisha-Amalaki (nisha =turmeric; amalaki = amla), daily.

“This age-old ayurvedic formulation is 100 per cent effective in balancing your blood sugar, reversing pre-diabetes with healthy lifestyle changes, normalising your HbA1C and reducing insulin resistance, and blood cleansing,” Dr Savaliya stated on Instagram, adding that it also improves immunity

Brain function

Can brushing teeth with your non-dominant hand improve brain function? (Indian express: 20240506)

<https://indianexpress.com/article/lifestyle/life-style/can-brushing-teeth-with-your-non-dominant-hand-improve-brain-function-9305627/>

Neha Cadabam, senior psychologist and executive director at Cadabams Hospitals says, “The theory behind this practice lies in neuroplasticity, the brain's ability to adapt and form new neural connections.”

brain, brain function While there's limited evidence for immediate brain fog relief, using the non-dominant hand for daily tasks might offer some long-term benefits. (Source: Freepik)

Have you ever tried brushing your teeth with your non-dominant hand? It might sound strange, but some experts believe that it could help clear up brain fog and improve how our brains work.

Content creator and NHS doctor Dr Karan Rajan explains in his reel, “If you start brushing your teeth with your non-dominant hand, you probably will build some new neuronal connections in your brain.”

Microblading causes autoimmune condition

Microblading causes autoimmune condition, lung problems in 2 women: Should you ditch the treatment? (Indian express: 20240506)

<https://indianexpress.com/article/lifestyle/health/microblading-causes-autoimmune-condition-lung-problems-in-2-women-should-you-ditch-the-treatment-9305746/>

"Even though this appears to be a rare side effect," doctor stated, "patients should be made fully aware of this risk before undergoing the procedure."

microblading Microblading can normally lead to complications such as allergic reactions, infections, scarring. (Source: Freepik)

A new report details a cause for concern in the world of cosmetic procedures. Two women, both 33 years old, developed a serious lung disease called systemic sarcoidosis after undergoing microblading for their eyebrows, reported The Sun.

Microblading is a popular technique that uses tattooing to create the appearance of thicker eyebrows. In these two cases, it appears to be linked to a rare side effect.

Fossil fuels and ultra-processed foods

We think we control our health – but corporations selling forever chemicals, fossil fuels and ultra-processed foods have a much greater role (Indian express: 20240506)

<https://indianexpress.com/article/lifestyle/health/control-our-health-corporations-forever-chemicals-fossil-fuels-ultra-processed-foods-9303033/>

The status quo means corporations can keep selling dangerous or lethal products for much longer than they should

What's on your plate? (Source: Getty Images/Thinkstock)

You go to the gym, eat healthy and walk as much as possible. You wash your hands and get vaccinated. You control your health. This is a common story we tell ourselves. Unfortunately, it's not quite true.

Factors outside our control have huge influence – especially products which can sicken or kill us, made by companies and sold routinely.

For instance, you and your family have been exposed for decades to dangerous forever chemicals, some of which are linked to kidney and testicular cancers. You're almost certainly carrying these chemicals, known as PFAS or forever chemicals, in your body right now.

And that's just the start. We now know exposure to just four classes of product – tobacco, alcohol, ultra-processed foods and fossil fuels – are linked to one out of every three deaths worldwide. That is, they're implicated in 19 of the world's 56 million deaths each year (as of 2019). Pollution – largely from fossil fuels – is now the single largest environmental cause of premature death. Communities of colour and low-income communities experience disproportionate impacts. Over 90% of pollution related deaths occur in low middle income countries.

This means the leading risk factor for disease and death worldwide is corporations who make, market and sell these unhealthy products. Worse, even when these corporations become aware of the harms their products cause, they have often systematically hidden these harms to boost profits at the expense of our health. Major tobacco, oil, food, pharmaceutical and chemical corporations have all applied similar techniques, privatising the profits and spreading the harms.

Profit and loss statements

Festive offer

When companies act to conceal the harm their products do, they prevent us from protecting ourselves and our children. We now have many well-documented cases of corporate wrongdoing, such as asbestos, fossil fuels, pesticides, herbicides sugar, silica, and of course tobacco. In these instances, corporations intentionally manufactured doubt or hid the harms of their products to delay or prevent regulation and maintain profits.

Decades of empirical evidence shows these effective tactics have actually been shared and strategically passed from one industry or company to the next.

For instance, when large tobacco companies Philip Morris and R.J. Reynolds bought food companies Kraft, General Foods and Nabisco in the 1980s, tobacco executives brought across marketing strategies, flavouring and colourings to expand product lines and engineered fatty, sweet

and salty hyperpalatable foods such as cookies, cereals and frozen foods linked to obesity and diet-related diseases. These foods activate our reward circuits and encourage us to consume more.

Or consider how ‘forever chemicals’ became so widespread. A team of scientists (including this article’s co-author) investigated previously secret internal industry documents from 3M and DuPont, the largest makers of forever chemicals PFOA and PFOS.

The documents showed both 3M and DuPont used tactics from the tobacco industry’s playbook, such as suppressing unfavourable research and distorting public debate. Like Big Tobacco, 3M and DuPont had a financial interest in suppressing scientific evidence of the harms of their products, while publicly declaring in-demand products such as Teflon were safe.

For decades, forever chemicals PFOA and PFOS have been used to make Teflon pans, Scotchgard, firefighting foam and other non-stick materials. By the early 2000s, one of these, PFOS, ended up in our blood at 20 times the level its manufacturer, 3M, considered safe.

As early as 1961, the chief toxicologist at DuPont’s Teflon subsidiary reported the company’s wonder-material had “the ability to increase the size of the liver of rats at low doses”, and recommended the chemicals be handled “with extreme care”. According to a 1970 internal memo, the DuPont-funded Haskell Laboratory found the chemical class C8 (now known as PFOA/PFOS) was “highly toxic when inhaled and moderately toxic when ingested”.

Both 3M and DuPont did extensive internal research on the risks their products posed to humans, but they shared little of it. The risks of PFOA including pregnancy-induced hypertension, kidney and testicular cancers, and ulcerative colitis was not publicly established until 2011.

Now, 60 years after DuPont first learned of the harms these products could cause, many countries are facing the human and environmental consequences and a very expensive cleanup.

Even though the production of PFOA and PFOS is being phased out, forever chemicals are easily stored in the body and take decades to break down. Worse, PFOA and PFOS are just two of over 15,000 different PFAS chemicals, most of which are still in use.

How can we prevent corporate injury to our health?

My co-author and I work in the field known as commercial determinants of health, which is to say, the damage corporations can do to us.

One of the key ways companies have been able to avoid regulation and lawsuits is by hiding the evidence. Internal studies showing harm can be easily hidden. External studies can be influenced, either by corporate funding, business-friendly scientists, legal action or lobbying policymakers to avoid regulation.

Here are three ways to prevent this happening again:

- 1) Require corporations to adhere to the same standards of data sharing and open science as independent scientists do.

If a corporation wants to bring a new product to market, they should have to register and publicly release every study they plan to conduct on its harms so the public can see the results of the study.

2) Sever the financial links between industry and researchers or policymakers.

Many large corporations will spend money on public studies to try to get favourable outcomes for their own interests. To cut these financial ties means boosting public health research, either through government funding or alternatives such as a tax on corporate marketing. It would also mean capping corporate political donations and bringing lobbying under control by restricting corporate access and spending to policymakers and increasing transparency. And it would mean stopping the revolving door where government employees or policymakers work for the industry they used to regulate once they leave office.

3) Mandate public transparency of corporate funding to researchers and policymakers.

In 2010, the United States introduced laws to enforce transparency on how much medical and pharmaceutical companies were spending to influence the products doctors chose to use. Research using the data unearthed by these laws has shown the problem is pervasive. We need this model for other industries so we can clearly see where corporate money is going. Registries should be detailed, permanent and easy to search.

These steps would not be easy. But the status quo means corporations can keep selling dangerous or lethal products for much longer than they should.

In doing so, they have become one of the largest influences on our health and will continue to harm generations to come – in ways hard to counter with yoga and willpower. And your health is more important than corporate profits.

New Covid variant 'FLiRT'

New Covid variant 'FLiRT' capable of evading the immune system: Experts (New Kerala:20240506)

<https://www.newkerala.com/news/2024/25832.htm>

The new Covid-19 variant 'FLiRT', which is spreading fast in the US, is capable of evading the immune system due to a trans substitution of amino acids between two spike proteins, the experts said on Sunday.

New Covid variant 'FLiRT' capable of evading the immune system: Experts

FLiRT, which belongs to Omicron's JN.1 lineage, is rapidly replacing the previous variant, Eris, in the US, the UK, New Zealand, and South Korea, according to Rajeev Gupta, Director of Internal Medicine at the CK Birla Hospital (R), Delhi.

"A recent increase in hospitalisation rates in these countries has been attributed to this variant; however, it has remained a relatively small wave. The overall mortality rate has not increased," Gupta told IANS.

According to the Infectious Disease Society of America, the nickname 'FLiRT' is based on the technical names for their mutations.

The World Health Organisation (WHO) has reclassified it as a variant of interest and advised close monitoring.

According to Dhiren Gupta, a Pediatric Intensivist at Sir Ganga Ram Hospital, these new strains will keep emerging.

"Fortunately, none of the Omicron lineage is able to induce significant lung damage as delta strain did but limited to the upper respiratory tract. The surveillance and vigilance should be kept for major drift in virus," he said.

According to the experts, the increased use of monoclonal antibodies could be driving this mutation.

The symptoms of the new variant are similar to those of other Omicron subvariants, such as sore throat, cough, fatigue, nasal congestion, runny nose, headache, muscle aches, fever, and possible loss of taste and smell, the experts mentioned.

Neuroblastoma treatment

Study gives more insight into neuroblastoma treatment (New Kerala:20240506)

<https://www.newkerala.com/news/2024/25727.htm>

Developing nerve cells outside the brain is where neuroblastoma, a common childhood disease, starts. Over 40 per cent of patients with high-risk neuroblastoma currently do not survive, despite the fact that patient's chances of survival have increased with more aggressive treatments.

New treatment strategy for neuroblastoma may involve focusing on RNA

alterations linked to the condition, according to recent study from the University of Chicago. Researchers have shown in a new study that was published in Cell Reports that the proliferation

of neuroblastoma cells was inhibited by a pharmacological molecule that is intended to block proteins that modify RNA transcripts. The medication appeared to be a promising therapeutic approach, as it also inhibited the growth of neuroblastoma tumors in mice models.

"High risk neuroblastoma remains very difficult to cure with current approaches, and survivors are at high-risk for treatment-related toxicities, including severe chronic health conditions and second cancers," said Susan Cohn, MD, Professor of Pediatrics, and senior author of the new study. "We are testing a completely different therapeutic strategy using drugs that change gene expression by inhibiting RNA modifying proteins. If future studies validate our findings, this strategy may transform our approach for treating neuroblastoma patients."

Advances in genetic sequencing, data analysis, and chemical biology have identified countless genetic links to cancer, yet DNA doesn't tell the whole story. Sometimes, molecules are added to DNA bases and RNA transcripts, affecting the way genes are expressed or how they get translated into proteins. These modifications to DNA and RNA act as molecular switches, determining whether a gene is turned on or off, thus influencing cellular processes, tissue development, and disease progression.

Cohn and her team partnered with Chuan He, PhD, the John T. Wilson Distinguished Service Professor of Chemistry and Professor of Biochemistry and Molecular Biology at UChicago, to study these effects in neuroblastoma. He is a pioneer in the fields of RNA and DNA modification research, known as epitranscriptomics and epigenetics, respectively. His lab has uncovered new regulatory pathways through RNA methylation.

One of the most common messenger RNA modifications is N6-methyladenosine (m6A), which gets added to an RNA transcript by "writer" proteins, including a complex formed between methyltransferase-like 3 (METTL3) and methyltransferase-like 14 (METTL14). High levels of METTL3 and METTL14 are known to drive the growth of many adult cancers, so Cohn and He wanted to look at its effects in neuroblastoma.

The team, led by Monica M. Pomaville, MD, a former pediatric resident who trained with Cohn and He and is now a fellow at the Children's Hospital of Philadelphia, showed that high levels of METTL3 expression in neuroblastoma tumors were associated with significantly lower survival rates in patients. This suggests that METTL3 may drive tumor growth.

To investigate how METTL3 affects neuroblastoma, the team created a genetically modified version of neuroblastoma cells in which METTL3 expression was knocked down, or diminished. They also tested an inhibitor called STM2457 that inhibits the function of METTL3, synthesized by He's team based on a published molecule structure.

Both approaches decreased neuroblastoma cell growth. METTL3 inhibition also increased the expression of genes that regulate the differentiation of neurons, or development into mature cells. They even saw this increased the extension of neurites, which eventually develop into axons and dendrites, a hallmark of neuroblastoma differentiation. The team also tested the STM2457

inhibitor in mouse models with neuroblastoma and found that it decreased tumor growth there as well.

Recently, inhibitors of METTL3 have been shown to enhance the anti-tumor effects of immunotherapy in adult cancers by promoting tumor infiltration of immune cells. When tumors are infiltrated with immune cells, they become inflamed, or "hot." Neuroblastoma is a non-T cell inflamed, or "cold," tumor that is resistant to immunotherapy like check point blockade drugs.

Obesity, poor diet & physical inactivity driving early onset of cancers

Obesity, poor diet & physical inactivity driving early onset of cancers: Health expert (New Kerala:20240506)

<https://www.newkerala.com/news/2024/25706.htm>

Obesity, poor diet, and physical inactivity are driving the onset of several cancers including gallbladder, colon, kidney, and pancreas, according to a top health expert from the University of Sydney, Australia on Saturday.

Obesity, poor diet & physical inactivity driving early onset of cancers: Health expert

Once known to affect the elderly, the last three decades have seen an enormous surge in early onset of cancer, occurring even before people turning 40 or 50.

Various studies have provided evidence that the cancer surge seen globally, including in India, is driven by an unhealthy lifestyle, including high consumption of junk food rich in sugar, salt, and fat combined with a lack of exercise, among others.

"Globally there has been a significant rise in some types of cancer in younger people. For instance, in the 30- to 39-year-old age group in the period 1991 to 2021, the rate of cancers of the gallbladder has increased by 200 per cent, uterine by 158 per cent, colorectal by 153 per cent, kidney by 89 per cent, and pancreas by 83 per cent," said Robyn Ward, Executive Dean and Pro Vice-Chancellor Medicine and Health at the University of Sydney, told IANS.

"The reasons proposed for this increase include obesity, poor diet, and physical inactivity," she added, noting that "young millennial adults are three times more likely to get cancer than the same age group born in the 1940s".

Who is more at risk?

Robyn noted that "overall, the incidence is higher in men than women and men are more likely to die".

Cancer incidence does vary by organ type, for example, prostate, lung, and colorectal cancer occur the most in males, while breast, lung, and colorectal cancer are predominant in females, the Professor noted.

What are the commonly occurring 'early' cancers? How to prevent it?

In the majority of cancers like cervical, and colorectal, the chance of cure increases with early detection. But for some like brain cancer, early detection makes no difference.

The best proof of prevention is cervical cancer and colorectal (bowel) cancer, said Robyn.

Cervical cancer is preventable through vaccination and treatable if detected early. Infection with specific strains of human papillomavirus (HPV) is the primary driver (95 per cent) of cervical cancer, which is preventable by vaccination.

On the other hand, increasing screening national screening programmes for breast, cervical, and colorectal (colon) cancers can help boost treatment as well as a decline in mortality rates.

"For the right cancers, early screening will assist, for example cervical, bowel, and breast. But the current screening programmes for these population-based programmes are based on age not risk," the professor told IANS.

Some younger people may be at higher risk of cancer while elderly may not. So age-based screening programmes may not help, but modern technologies like genomics, big data, and artificial intelligence (AI) may play an important role.

"A huge opportunity with modern technologies like genomics, big data, and AI is to develop genetic stratification, incorporated with health records to develop risk-based screening. This helps create personalised screening programmes," she said.

Home Remedies For Piles:

Home Remedies For Piles: सर्जरी की जरूरत ही नहीं! बवासीर की जड़ काट देंगे 6 देसी नुस्खे, पुरानी कब्ज भी होगी ठीक (Navbharat Times :20240506)

<https://navbharattimes.indiatimes.com/lifestyle/health/ayurvedic-dotor-told-effective-home-remedies-for-piles-know-what-to-eat-and-avoid-in-piles/articleshow/109870115.cms?story=1>

बवासीर एक आम समस्या है, जिसका सामना कई लोगों को कभी न कभी करना पड़ता है। पर ये काफी तकलीफदेह हो सकती है। आयुर्वेद में बवासीर के लिए कई घरेलू उपचार बताए गए हैं, जो राहत दिलाने में मददगार हो सकते हैं।

ayurvedic doctor told effective home remedies for piles know what to eat and avoid in piles

Home Remedies For Piles: सर्जरी की जरूरत ही नहीं! बवासीर की जड़ काट देंगे 6 देसी नुस्खे, पुरानी कब्ज भी होगी ठीक

स्मार्टफोन के टॉप ब्रैंड्स पर अमेज़ॉन समर सेल का ताबड़तोड़ डिस्काउंट।

डील देखें

स्मार्टफोन के टॉप ब्रैंड्स पर अमेज़ॉन समर सेल का ताबड़तोड़ डिस्काउंट।

अमेज़ॉन ग्रेट समर सेल पर लैपटॉप पर शानदार डिस्काउंट- 75% तक की छूट

डील देखें

अमेज़ॉन ग्रेट समर सेल पर लैपटॉप पर शानदार डिस्काउंट- 75% तक की छूट

क्या आप iPhone 15 जीतने के लिए लकी ड्रॉ का हिस्सा बनना चाहेंगे?

डील देखें

क्या आप iPhone 15 जीतने के लिए लकी ड्रॉ का हिस्सा बनना चाहेंगे?

पाइल्स (Piles) यानी बवासीर एक आम समस्या है जो किसी को भी हो सकती है। आमतौर पर यह समस्या उन लोगों को में ज्यादा पाई जाती है, जो ज्यादा मसालेदार, काम फाइबर वाला खाना, कम पानी पीना और बहुत कम फिजिकल एक्टिविटी करते हैं। इस रोग में गुदा के अंदर और बाहर मस्से हो जाते हैं जिनमें गंभीर दर्द होता है।

बवासीर का दर्द खतरनाक होता है जिसमें उठना-बैठना यहां तक कि चलना-फिरना भी मुश्किल हो जाता है। समस्या बढ़ने पर मल त्याग के समय खून भी आ सकता है। आयुर्वेद एक्सपर्ट डॉक्टर रोबिन शर्मा का मानना है कि यह समस्या पुरानी होने पर आपके पाचन तंत्र को खोखला बनाना शुरू कर देती है।

बवासीर का इलाज और घरेलू उपाय क्या हैं? बवासीर के लिए मेडिकल में दवाओं से लेकर सर्जरी तक कई इलाज हैं लेकिन इस समस्या को कुछ घरेलू उपायों से जरिए भी खत्म किया जा सकता है। चलिए जानते हैं कि बवासीर का आयुर्वेदिक इलाज क्या है।

बवासीर में क्या नहीं खाना चाहिए

बवासीर में क्या नहीं खाना चाहिए

डॉक्टर के अनुसार, बवासीर में अधिक मसालेदार, देर से पचने वाले खाद्य पदार्थ जैसे आलू, बैंगन या बहुत ज्यादा मीठे खाद्य पदार्थ या बहुत ज्यादा नमकीन चीजों से दूरी बना लेनी चाहिए।

Lungs Infection Symptoms:

खांसी-जुकाम कहीं बन न जाए फेफड़ों में इन्फेक्शन का कारण, इन लक्षणों से करें पहचान

Lungs Infection Symptoms: शरीर के बाकी अंगों की तरह फफड़ का हेल्दी होना भी काफी जरूरी है। अगर आपको बार-बार खांसी हो रही है तो ये भी समस्या का कारण बन (Hindustan: 20240506)

सकती है। यहां जानिए फेफड़ों में इन्फेक्शन के लक्षण

<https://www.livehindustan.com/lifestyle/health/story-lungs-infection-common-symptoms-in-hindi-9928646.html>

ज्यादातर लोगों को अक्सर सर्दी-जुकाम की समस्या होती रहती है। लेकिन अगर ये दिक्कत बार-बार होती है तो ये लंग्स इन्फेक्शन का कारण भी हो सकता है।

फेफड़े शरीर के सबसे नाजुक और जरूरी अंगों में एक है। ऐसे में जब इन्फेक्शन होता है तो आपको कई तरह के लक्षण दिख सकते हैं। ऐसे में जरूरी है की

समय रहते इन लक्षणों की पहचान हो जाए, ताकी इलाज हो सके। यहां जानिए फेफड़ों के इन्फेक्शन के कुछ लक्षण।

विज्ञापन

ऐप पर पढ़ें

ई- पेपर शहर चुनें

होम NCR देश जीते iPhone NEW लोकसभा 2024 IPL लाइव स्कोर मनोरंजन करियर वेब स्टोरी बिजनेस विदेश ध

5/6/24, 11:09 AM Lungs Infection Common Symptoms in Hindi - खांसी-जुकाम कहीं बन न जाए फेफड़ों में इन्फेक्शन का कारण, इन लक्षणों से करें पहचान, हेल्थ न्यूज

<https://www.livehindustan.com/lifestyle/health/story-lungs-infection-common-symptoms-in-hindi-9928646.html> 1/5

फेफड़ों में इन्फेक्शन के लक्षण

सीने में दर्द

सीने में अगर तेज दर्द है, तो ये फेफड़ों के संक्रमण का लक्षण हो सकता है। खांसते समय या गहरी सांस लेते समय सीने में दर्द बढ़ जाता है। इसके अलावा कभी-

कभी आपकी पीठ के ऊपरी हिस्से में तेज दर्द महसूस हो सकता है।

बुखार

बुखार तब होता है जब आपका शरीर संक्रमण से लड़ने की कोशिश करता है। अगर फेफड़ों में इन्फेक्शन है, तो आपका बुखार तेजी से बढ़ सकता है। हालांकि,

बुखार आना किसी और बीमारी का लक्षण भी हो सकता है। इसलिए घबराएं नहीं और एक्सपर्ट की सलाह लें।

शरीर में दर्द

फेफड़ों में इन्फेक्शन होने पर आपकी मांसपेशियों और पीठ में दर्द हो सकता है। इसके अलावा कभी-कभी आपकी मांसपेशियों में सूजन आ सकती है।

बहती नाक

वैसे तो बहती नाक और दूसरे फ्लू जैसी समस्या का लक्षण हो सकता है। वहीं कफ होने के कारण अक्सर इन्फेक्शन में नाक बहने की समस्या होती है।

खांसी या जुखाम

गाढ़े कफ वाली खांसी और जुखाम इन्फेक्शन का संकेत हो सकता है। ऐसे में कफ के रंग पर ध्यान दें।

सांस लेने में मुश्किल

इन्फेक्शन से पीड़ित लोगों को सांस लेने में मुश्किल हो सकती है। अगर आपको सांस लेने में परेशानी हो रही है तो आपको तुरंत डॉक्टर को दिखाना चाहिए।

थकान

जब आपका शरीर किसी संक्रमण से लड़ रहा होता है तो आपको सुस्ती और थकान महसूस हो सकती है। इस दौरान आराम जरूरी है।

घरघराहट

जब आप सांस छोड़ते हैं, तो आपको तेज सीटी की आवाज सुनाई दे सकती है जिसे घरघराहट के रूप में जाना जाता है। यह संकुचित वायुमार्ग या सूजन के कारण होती है।

ऐप पर पढ़ें

5/6/24, 11:09 AM Lungs Infection Common Symptoms in Hindi - खां सी-जुका म कहीं बन न जा ए फेफड़ों में इंफेक्शन का कारण, इन लक्षणों से करें पहचान, हेल्थ न्यूज

<https://www.livehindustan.com/lifestyle/health/story-lungs-infection-common-symptoms-in-hindi-9928646.html> 2/5

Health Tips

JAC 12th result लेटेस्ट Hindi News ,उत्तराखंड बोर्ड रिजल्ट , लोकसभा चुनाव 2024, बॉलीवुड न्यूज, बिजनेस न्यूज, टेक, ऑटो, करियर ,और

राशिफल, पढ़ने के लिए Live Hindustan App डाउनलोड करें।

त्वचा या होठों का नीला पड़ना

ऑक्सीजन की कमी के कारण आपके होंठों या नाखून हल्के नीले रंग के दिखाई देने लग सकते हैं।

आपके फेफड़ों में कर्कश या घरघराहट जैसी आवाजें

फेफड़ों के संक्रमण के दौरान ज्यादातर लोगों को सीने से कर्कश आवाज आ सकती है, जिसे बिबासिलर क्रैकल्स के रूप में भी जाना जाता है।

डिस्क्लेमर: इस आर्टिकल में बताई विधि, तरीकों व दावों को केवल सुझाव के रूप में लें। इस तरह के किसी भी उपचार/दवा/डाइट और सुझाव पर

अमल करने से पहले डॉक्टर या एक्सपर्ट से सलाह लें।

सेहत को पूरी तरह से खराब कर देती हैं खाने की ये चीजें, घर लेकर आने से बचें

Diet In Fever

Diet In Fever: बुखार होने पर इन चीजों को खाने से मिलती है राहत(Hindustan: 20240506)

<https://www.livehindustan.com/lifestyle/health/story-what-to-eat-what-not-to-eat-during-fever-9922020.html>

Diet In Fever: बुखार होने पर शरीर कमजोर और गर्म हो जाता है। ऐसे वक्त में जरूरी कि डाइट का पूरा ध्यान रखा जाए। जिससे बुखार को उतरने में मदद मिले। वायरल फीवर में

डाइट में मामले में ये सावधानी जरूरी है।

Aparajita लाइव हिन्दुस्तान, नई दिल्ली

Sun, 05 May 2024 10:28 AM

हमें फॉलो करें

आमतौर पर बुखार होने पर लोग समझ नहीं पाते कि क्या खाएं और क्या नहीं। हीं ऐसे में जानना जरूरी है कि बुखार के वक्त खास तरह की डाइट को ही फॉलो

करना चाहिए। सामान्य सर्दी-जुकाम या वायरल ही वजह से होने वाले बुखार में भी सही डाइट की जरूरत होती है। इसलिए बुखार में खाते वक्त इन 3 गलतियों को

बिल्कुल भी ना करें।

विज्ञापन

ऐप पर पढ़ें

ई-पेपर शहर चुनें

होम NCR देश जीतें iPhone NEW लोकसभा 2024 IPL लाइव स्कोर मनोरंजन करियर वेब स्टोरी बिजनेस विदेश थ

5/6/24, 11:11 AM what to eat what not to eat during fever - Diet In Fever: बुखार होने पर इन चीजों को खाने से मिलती है राहत, हेल्थ न्यूज

<https://www.livehindustan.com/lifestyle/health/story-what-to-eat-what-not-to-eat-during-fever-9922020.html> 1/4

हैवी और ज्यादा फूड ना खाएं

बुखार होने पर बहुत ज्यादा डाइजेस्ट होने में हैवी और ज्यादा मात्रा में खाना नहीं खाना चाहिए। क्योंकि कियों पहले से ही बॉडी शरीर में पड़े हैवी मील्स और

अनडाइजेस्ट वेस्टेज को निकालने के बॉडी टेम्परेचर को बढ़ाती है। जिससे कि पोर्स से निकल रहे पसीने और यूरिन के जरिए ये सारे टॉक्सिंस बाहर निकल जाएं।

ऐसे में और भी ज्यादा हैवी फूड खाना बुखार को बढ़ा देता है।

बुखार में उपवास करना अच्छा होता है

बच्चों को छोड़कर बड़े लोगों को बुखार होने पर कम से कम खाना चाहिए। जरूरी है कि कम से कम 24 घंटे का उपवास किया जाए। साथ में ढेर सारा लिक्विड

लें। जिससे ज्यादा से ज्यादा यूरिन के जरिए टॉक्सिंस बाहर निकल सकें।

शहद को भूलकर भी ना खाएं

बुखार होने पर शहद को भूलकर भी ना खाएं। शहद शरीर में जाकर टॉक्सिक हो सकता है क्योंकिक्यों बुखार में शरीर का तापमान ज्यादा होता है। शहद को केवल

शरीर के नॉर्मल टेंपरेचर में ही लेना चाहिए।

एसी और कूलर में बैठने की गलती ना करें

बुखार होने पर पसीने के जरिए टॉक्सिंस बाहर निकलते हैं। ऐसे में एसी या पंखा चलाकर बैठने शरीर का तापमान कम हो जाता है और पसीना निकलना बंद हो

जाता है। जिससे पोर्स से टॉक्सिंस बाहर नहीं निकल पाते हैं। ध्यान रहे कि बुखार होने पर हैवी मील्स, एसी, कूलर और शहद जैसी चीजों को पूरी तरह से अवॉएड

करें।

डिस्कलैमर: यह लेख मात्र सामान्य जानकारी के लिए है। इस लेख को किसी विशेषज्ञ की राय के तौर पर ना लें।

ऐप पर पढ़ें

5/6/24, 11:11 AM what to eat what not to eat during fever - Diet In Fever: बुखार होने पर इन चीजों को खाने से मिलाती है राहत, हेल्थ न्यूज

<https://www.livehindustan.com/lifestyle/health/story-what-to-eat-what-not-to-eat-during-fever-9922020.html> 2/4

Fever Health Tips In Hindi

JAC 12th result लेटेस्ट Hindi News ,उत्तराखंड बोर्ड रिजल्ट , लोकसभा चुनाव 2024, बॉलीवुड न्यूज, बिजनेस न्यूज, टेक, ऑटो, करियर ,और

राशिफल, पढ़ने के लिए Live Hindustan App डाउनलोड करें।

Latest News in Hindi

BJP MLA, न्यूज एडिटर और हिंदू नेता के मर्डर का प्लान बना रहा था मौलवी Live: आज PBKS वर्सेस CSK, 'किंग्स' की लड़ाई में प्लेऑफ के 'ताज' पर नजर

कपिल के शो पर छलके सनी देओल और बॉबी देओल के आंसू, कहा- अचानक की घर में एक साथ... मार्केट में बवाल मचाएगा मोटोरोला का नया फोन, मिलेगा 50MP का सेल्फी कैमरा

मायावती ने फेक वीडियो पर किया सावधान, राशन के बदले वोट पर BJP को घेरा बुखार हो रहा तो जानें कैसी डाइट देगी आराम

राहुल गांधी की घेराबंदी, ब्रिटिश नागरिक बता पर्चा खारिज करने की मांग चिकित्सा शिक्षा निदेशालय में ट्यूटर के 158 पदों पर भर्ती, देखिए डिटेल

RJD को झटका, लालू के खास प्रभूनाथ सिंह के पुत्र बागी; JDU में जाएंगे लूटपाट पर उतर आया हमास, बैंकों की तिजोरियों पर 580 करोड़ का डाका

Fast Food

सेहत को पूरी तरह से खराब कर देती हैं खाने की ये चीजें, घर लेकर आने से बचें

Food Item You Should Never Bring Home: पैकेट वाली खाने की चीजों के अलावा पिज्जा, बर्गर,केक और कुकीज जैसी खाने की चीजों को अन्हेल्दी माना जाता है। इन चीजों को

से कई तरह की हेल्थ प्रॉब्लम हो सकती हैं।(Hindustan: 20240506)

https://www.livehindustan.com/lifestyle/health/story-food-items-you-should-never-bring-at-your-home-as-per-expert-9921591.html#google_vignette

पिज्जा, बर्गर, फ्रेंच फ्राइज, केक और कुकीज जैसी खाने की चीजों को अन्हेल्दी माना जाता है।क्योंकिक्यों इस तरह की खाने की चीजों को खाकर कई गंभीर बीमारियां

हो सकती हैं। ज्यादातर लोग ग्रासरी शॉपिंग के लिए शॉपिंग मार्ट्स में जाते हैं और इस दौरान वह खाने पीने की ऐसी चीजें लेते हैं जिनसे उन्हें बचना चाहिए।हॉर्मोन

कोच पूर्णिमा पेरी ने अपने इंस्टाग्राम पोस्ट पर कुछ ऐसी खाने की चीजें बताई हैं जो सेहत को गंभीर नुकसान पहुंचात हैं और उन्हें खाने से बचना चाहिए।

विज्ञापन

ऐप पर पढ़ें

ई- पेपर शहर चुनें

होम NCR देश जीतें iPhone NEW लोकसभा 2024 IPL लाइव स्कोर मनोरंजन करियर वेब स्टोरी बिजनेस विदेश ध

5/6/24, 11:12 AM food items you should never bring at your home as per Expert - सेहत को पूरी तरह से खराब कर देती हैं खाने की ये चीजें, घर लेकर आने से ब...

<https://www.livehindustan.com/lifestyle/health/story-food-items-you-should-never-bring-at-your-home-as-per-expert-9921591.html> 1/4

6 खाने की चीजें जिन्हें घर लेकर आने से बचना चाहिए

1) आलू के चिप्स- पैकेज्ड या बेकरी चिप्स, दोनों ही रिफाइंड तेल में तले जाते हैं और ट्रांस फैट से भरपूर होते हैं। ये कोलेस्ट्रॉल और दिल की सेहत के लिए बहुत

हानिकारक होते हैं।

2) इंस्टेंट नूडल्स- ये नूडल्स सादा मैदा है जिसमें कोई फाइबर, प्रोटीन और जरूरी मिनरल्स नहीं होते हैं। इनमें पाम ऑयल होता है जो खराब ट्रांस फैट से भरा

होता है।

3) फ्रूट जूस- मार्केट में कई ऐसे जूस हैं जो '100%' फलों के अर्क होने का दावा करते हैं। हालांकि, उनमें सबसे ज्यादा चीनी, प्रिजरवेटिव और एक्सट्रा फ्लेवर

होता है। जो आपके ब्लड शुगर के स्तर को बढ़ाने के लिए पर्याप्त हैं।

4) सोडा ड्रिंक्स- यह चीनी और सोडा से भरपूर है और ये सेहत के लिए सबसे ज्यादा खराब होती हैं। इसकी वजह से मोटापा, ब्लड शुगर के लेवल बढ़ना, हाई

कोलेस्ट्रॉल और डायबिटीज जैसी समस्या हो सकती है।

5) चॉकलेट अनाज- मार्केट में आजकल ब्रेकफास्ट के लिए कई फ्लेवर वाले अनाज मिलते हैं। चॉकलेट सेरेल्स उनमें से एक है। इन अनाजों को ताड़ के तेल में

तला जाता है, इसलिए इनमें चॉकलेट, स्ट्रॉ बेरी या केले के एक्सट्रा फ्लेवर के साथ अनहेल्दी फैट होता है।

6) डाइजेस्टिव बिस्कुट- डाइजेस्टिव बिस्कुट खाने के बजाय घर पर कुकीज बनाएं या हफ्ते में एक बार अपने पसंदीदा बिस्किट कम मात्रा में खाएं। डाइजेस्टिव

बिस्कुट सामान्य बिस्कुट से कम नहीं हैं, क्योंकिक्यों उनमें फाइबर और प्रोटीन की मात्रा बहुत कम होती है और ट्रांस फैट की मात्रा ज्यादा होती है।

सेहत के लिए फायदेमंद है शहद, क्या आप जानते हैं इसे खाने का सही तरीका?