

DAILY NEWS BULLETIN

LEADING HEALTH, POPULATION AND FAMILY WELFARE STORIES OF THE DAY Thursday 20220505

बच्चों की जनसंख्या

जापान में तेजी से घट रही है बच्चों की संख्या, देश की कुल आबादी में महज 11.7 फीसदी है 15 साल के कम आयुवर्ग की हिस्सेदारी, जानें क्या है वजह (Dainik Jagran: 20220505)

https://www.jagran.com/world/japan-number-of-children-decreasing-rapidly-in-japan-only-11-percent-of-total-population-of-country-are-under-15-years-of-age-22685261.html?itm_source=website&itm_medium=homepage&itm_campaign=p1_component

जापान में तेजी से घट रही है बच्चों की संख्या

जापान में पिछले 41वर्षों के दरमियान देश की कुल आबादी में बच्चों की हिस्सेदारी सबसे कम आंकी गई है। जापान के आंतरिक मंत्रालय के आंकड़ों के मुताबिक देश में इस वक्त 15 साल के कम उम्र के बच्चों की संख्या करीब 1 करोड़ 46 लाख 50 हजार है।

टोक्यों, एएनआई: जापान में पिछले 41वर्षों के दरमियान देश की कुल आबादी में बच्चों की हिस्सेदारी सबसे कम आंकी गई है। जापान के आंतरिक मंत्रालय के द्वारा जारी किए गए आंकड़ों के मुताबिक देश में इस वक्त 15 साल के कम उम्र के बच्चों की संख्या करीब 1 करोड़ 46 लाख 50 हजार है। जो कि पिछले 41 सालों में सबसे कम है। यह आंकड़ा देश की कुल आबादी का करीब 11.7 फीसदी है।

साल दर साल घट रही है बच्चों की आबादी

बताया जा रहा है कि पिछले करीब 47 वर्षों में देश की कुल जनसंख्या में 15 वर्ष से कम आयु के बच्चों की संख्या में कमी दर्ज की गई है। गुरुवार को बाल दिवस से पहले जारी किए गए आंकड़ों से पता चलता है कि 15 साल से कम उम्र के बच्चों की संख्या में पिछले साल की तुलना में दो लाख 50 हजार की गिरावट आई है। मौजूदा वक्त में देश के 15 साल से कम उम्र के लड़कों की संख्या 75 लाख है और लड़कियों की संख्या करीब 71 लाख 50 हजार है।

वर्ष 1999 से घटी बच्चों की आबादी

जापान के आंतरिक मंत्रालय ने गौर किया है कि इस आयु वर्ग के घटने के साथ-साथ बच्चों की संख्या में गिरावट आई है। देश में सबसे बड़ा आयु वर्ग 12-14 वर्ष के बच्चों की है। जिनकी कुल संख्या करीब 32 लाख 30 हजार है, वहीं सबसे छोटे दो वर्ष से कम आयु वर्ग की संख्या करीब 25 लाख 20 हजार है। देश के सभी 47 प्रान्तों में पिछले वर्ष की तुलना में बच्चों की आबादी में गिरावट देखी गई है। बच्चों की आबादी की संख्या में गिरावट की सिलसिला वर्ष 1999 में पहली बार सामने आया था। जापान टाइम्स की एक रिपोर्ट के मुताबिक देश में बच्चों की उच्चतम आबादी वर्ष 1954 में 2 करोड़ 98 लाख 90 हजार दर्ज की गई थी। जो की साल 1970 तक लगातार बढ़ी, लेकिन 1982 के बाद से बच्चों की आबादी में लगातार गिरावट देखी जा रही है।

कोरोना

10 गुणा तेज फैलता है ये वाला कोरोना, भारत में XE वेरिएंट की पुष्टि; अजीब हैं इसके लक्षण (Dainik Jagran: 20220505)

https://www.jagran.com/jharkhand/ranchi-corona-xe-variant-amid-covid-19-4th-wave-india-arrived-with-omicron-xe-variant-modi-govt-alert-for-covid-19-india-news-as-new-corona-variant-ba2-ba12-and-covid-19-lockdown-22682500.html

कोरोना की चौथी लहर में XE वेरिएंट की पुष्टि हुई है। यह 10 गुणा अधिक संक्रामक है।

कोरोना की चौथी लहर आने के प्रबल संकेत मिल रहे हैं। राष्ट्रीय राजधानी दिल्ली समेत कई राज्यों में कोरोना वायरस संक्रमण के मामले बढ़ रहे हैं। इस बीच भारत में जीनोम सिक्वेंसिंग करने वाली संस्था ने देश में कोरोना के XE वेरिएंट मिलने की पृष्टि की है। रांची, जेएनएन। Omicron XE Variant भारत में कोरोना वायरस के XE वेरिएंट की पुष्टि होने के बाद से तमाम हेल्थ एजेंसी और एक्सपर्ट्स की चिंता बढ़ गई है। इसके अजीब लक्षण ऐसे हैं कि संक्रमित होने के बाद भी मरीज को कुछ पता नहीं चलता। यह वेरिएंट आरटीपीसीआर जांच को भी बायपास करने या धोखा देने में सक्षम है। पेट दर्द, उल्टी से लेकर सिरदर्द भी इसके लक्षण में शामिल है। देश में जीनोम सिक्वेंसिंग को मॉनिटर करने वाली संस्था INSACOG ने XE वेरिएंट मिलने की पुष्टि करे हुए कहा है कि भारत में कोरोना का XE वेरिएंट आ चुका है। यह ओमिक्रॉन वेरिएंट का सब वेरिएंट है, लेकिन ये वाला कोरोना दूसरे वेरिएंट के मुकाबले 10 गुणा तेजी से फैलता है। यह ज्यादा संक्रामक है।

कोरोना वायरस के नए XE वेरिएंट की भारत में एंट्री की पुष्टि करते हुए संस्थान ने अपने वीकली बुलेटिन में दावा किया है कि इसका पहला केस 19 जनवरी 2022 को ब्रिटेन में मिला था। इसके बाद वहां बेहद तेजी से संक्रमण फैला। अब भारत में कोरोना का XE वेरिएंट जैसा ज्यादा संक्रामक वेरिएंट मिलने से आने वाले दिनों में संक्रमण के नए मामलों में अधिक तेजी आ सकती है।

विश्व स्वास्थ्य संगठन (WHO) ने कहा है कि XE वेरिएंट ओमिक्रॉन के BA.1 और BA.2 से ही मिलकर बना है। BA.2 के मुकाबले XE वेरिएंट 10 गुणा संक्रामक है। INSACOG के साप्ताहिक बुलेटिन में बताया गया है कि भारत में अभी कोरोना वायरस संक्रमण के जो मामले सामने आ रहे हैं, उनमें ओमिक्रॉन (BA.2) ही ज्यादा प्रभावी है। यह डोमिनेंट वेरिएंट है, जो दिल्ली, उत्तर प्रदेश, हिरयाणा, केरल, कर्नाटक, महाराष्ट्र समेत अन्य राज्यों में लगातार कोरोना संक्रमितों में मिल रहा है। XE वेरिएंट के बारे में हालांकि अबतक इस बात की पुष्टि नहीं हुई है कि यह लोगों को ज्यादा नुकसान पहुंचा रहा है।

XE वेरिएंट के इन लक्षणों को जानें

स्वास्थ्य संगठन का कहना है कि XE के म्यूटेशन को ओमिक्रॉन वेरिएंट की तरह ही ट्रैक किया जा रहा है। फिलहाल XE में कोई खतरनाक या नया लक्षण नहीं देखा गया है। इस वायरस से संक्रमित होने पर बुखार, गले में खरास, खांसी, जुकाम, नाक बहना, शरीर दर्द, सिरदर्द, त्वचा में जलन और पेट दर्द या डायरिया की शिकायत हो सकती है। हालांकि, एक्सपर्ट चेतावनी देते हैं कि एक नया सब वेरिएंट होने के चलते आगे स्थिति बदल भी सकती है। बताया गया है कि ओमिक्रॉन के XE वेरिएंट के म्यूटेशन में बदलाव के चलते यह मजबूत इम्यूनिटी से बच निकलता है। इसकी संक्रामकता भी पहले से ज्यादा बढ़ी है। कोरोना की पहली, दूसरी या तीसरी लहर की चपेट में आए लोगों में यह री-इंफेक्शन का खतरा बढ़ा सकता है।

XE वेरिएंट से कोरोना की चौथी लहर आने का खतरा

भारत में ओमिक्रॉन के BA.2 वेरिएंट के कारण ही कोरोना की तीसरी लहर आई थी। जनवरी 2022 में जब कोरोना पीक पर था, तब साढ़े तीन लाख मामले दर्ज किए गए थे। BA.1 और BA.2 से मिलकर बने XE वेरिएंट के बारे में वैज्ञानिकों का कहना है कि अगर XE वेरिएंट से कोरोना की चौथी लहर आती है, तो कोरोना संक्रमण के नए मामले बह्त तेजी से यथा 10 गुणा तेजी से बढ़ सकते हैं।

मुंबई और गुजरात में मिल चुका है XE वेरिएंट

जानकारी के मुताबिक भारत में कोरोना वायरस के XE वेरिएंट का पहला केस मुंबई में मिला। जबिक एक और मामला गुजरात से सामने आया था। तब बताया गया था कि जिस 50 वर्षीय महिला में XE वेरिएंट की पुष्टि हुई थी, उसने कोरोना वैक्सीन की दोनों डोज ली हुई थी। बावजूद वह कोरोना वायरस से संक्रमित पाई गई। ऐसे में सर्वाधिक चिंता की बात यह है कि कोरोना वैक्सीन की प्रतिरक्षा को भी XE वेरिएंट चकमा दे रहा है। इसलिए हमेशा सतर्क रहें। स्रिक्षित रहें।

दैनिक जागरण आप सब से कोविड प्रोटोकाल संबंधी सुरक्षा एहतियात के अनुपालन का आग्रह करता है। मास्क अनिवार्य तौर पर पहनें। समय-समय पर हाथ धोते रहें। सार्वजनिक जगहों पर शारीरिक दूरी बनाए रखें। अब भी अगर कोरोना का टीका नहीं लिया है, तो सबसे पहले वैक्सीन लगवाएं। संभव हो तो रोग प्रतिरोधक क्षमता की मजबूती के लिए बूस्टर डोज भी लें। हम आपके नीरोग होने की कामना करते हैं।

कोलोरोमीट्रिक सेंसर

दस सेकेंड में पानी की सेहत बता देगा कोलोरोमीट्रिक सेंसर, प्रयोगशाला में परीक्षण के दौरान मिली सफलता (Dainik Jagran: 20220505)

 $\frac{https://www.jagran.com/uttar-pradesh/allahabad-city-colorimetric-sensor-will-tell-the-health-of-water-in-ten-seconds-jagran-special-22683264.html$

प्रयोगशाला में परीक्षण के दौरान प्रोफेसर केएन उत्तम, साथ में युवा विज्ञानी आरती जायसवाल और श्वेता शर्मा। इलाहाबाद केंद्रीय विश्वविद्यालय के भौतिकी विभाग के प्रो. उत्तम ने बताया कि फेरुलिक एसिड कोटेड सिल्वर नैनो कण के निर्माण के लिए टीम ने सबसे पहले सिल्वर नाइट्रेट सोडियम हाइड्रोक्साइड तथा फेरुलिक एसिड को आसुत जल में निश्चित सांद्रता का विलयन बनाया।

गुरदीप त्रिपाठी, प्रयागराज: जल की उपलब्धता के साथ इसका शुद्ध होना भी उतना ही आवश्यक है। पानी में पाई जाने वाली अशुद्धियों में आर्सेनिक प्रमुख है जो मानव के स्वास्थ्य के लिए काफी हानिकारक है। अब इलाहाबाद केंद्रीय विश्वविद्यालय के भौतिकी विभाग में एक ऐसा सेंसर विकसित किया गया है जो 10 सेकेंड में पानी में आर्सेनिक की उपस्थिति का पता लगाएगा। भारत सरकार के वाणिज्य एवं उद्योग मंत्रालय के कोलकाता स्थित कंट्रोलर जनरल आफ पेटेंट्स डिजाइन एंड ट्रेडमार्क से सेंसर के पेटेंट को मन्यता मिलने के बाद इसे बाजार में उतारने की तैयारी है। बाजार में आने के बाद इसके प्रयोग में किसी विशेषज्ञ की आवश्यकता नहीं होगी। अंतरराष्ट्रीय टेलर एंड फ्रांसिस प्रकाशन समूह के अंतरराष्ट्रीय जनरल एनालिटिकल लेटर्स के हालिया अंक में यह शोध प्रकाशित भी हो गया है।

कई स्रोत से पानी में पहुंचता आर्सेनिक: इस सेंसर का विकास युवा विज्ञानी आरती जायसवाल और श्वेता शर्मा ने प्रोफेसर केएन उत्तम के निर्देशन में किया है। इसे कोलोरोमीट्रिक सेंसर नाम दिया गया है। यह पानी में उपस्थित आर्सेनिक प्रदूषण की मात्रा बता देगा। विभाग के प्रयोगशाला में सेंसर का सफल परीक्षण भी कर लिया गया है। प्रो. केएन उत्तम ने बताया कि हिमालय क्षेत्र से चट्टानों की क्षरण प्रक्रिया द्वारा उत्पन्न आर्सेनिक गंगाजल में मिलकर धरातलीय पानी को प्रदूषित कर रहा है। इसके अलवा खनन प्रक्रिया, जीवाश्म ईंधन के उपयोग, कीटनाशकों के उपयोग, अर्धचालकों द्वारा निर्मित युक्तियां एवं उत्पाद भी आर्सेनिक के प्रमुख स्रोत हैं।

नैनौकण बनाकर विकसित किया सेंसर: विभिन्न शोधपत्रों का हवाला देते हुए प्रो. उत्तम ने बताया कि उत्तर प्रदेश के अधिकांश जिले (बिलया, लखीमपुर खीरी, बहराइच, गाजीपुर, गोरखपुर, बरेली, सिद्धार्थनगर, बस्ती, चंदौली, उन्नाव, मुरादाबाद, संत कबीरनगर, संत रिवदास नगर, गोंडा, बिजनौर, मिर्जापुर, शाहजहांपुर, बलरामपुर, मेरठ, रायबरेली आदि) आर्सेनिक प्रदूषण की चपेट में हैं। इस लिहाज से शोधार्थियों ने सिल्वर नाइट्रेट, सोडियम हाइड्रोक्साइड और फेरुलिक एसिड के मिश्रण से प्रयोगशाला में फेरुलिक एसिड कोटेड सिल्वर नैनो कण का निर्माण किया। इसका प्रयोग कर जलीय विलयन व विभिन्न स्रोतों से प्राप्त जल में उपस्थित आर्सेनिक प्रदूषण की जांच के लिए कोलोरोमीट्रिक सेंसर तैयार किया। यह सेंसर दूध, दही और फलों के रस में उपस्थित आर्सेनिक की मात्रा को भी नापने में कारगर है।

प्रयोगशाला में परीक्षण के दौरान सफलता: प्रो. उत्तम ने बताया कि सिल्वर नाइट्रेट घोल में बूंद-बूंद सोडियम हाइड्रोक्साइड तब तक मिलाया गया, जब तक पूरा अवक्षेप प्राप्त नहीं हो जाए। इसके बाद इसमें जलीय अमोनिया बूंद-बूंद कर तब तक मिलाया गया कि पूरा अवशेष पूरी तरह घुलकर पारदर्शी विलयन के रूप में न हो जाए। प्राप्त पारदर्शी विलयन में फेरुलिक एसिड मिलाया गया। फिर इस मिश्रण को लगातार मैग्नेटिक स्टीरर में चलाया गया। फिर प्राप्त जलीय गोल को माइक्रोवेव ओवन में 10 सेकंड तक रखा गया। इससे पीले भूरे रंग का कोलाइडी विलयन प्राप्त हुआ। उसे फेरुलिक एसिड कोटेड सिल्वर नैनो कण का जाम दिया गया। फेरुलिक एसिड कोटेड सिल्वर नैनो कण का उपयोग कर पानी में उपस्थित आर्सेनिक की जांच को कोलोरीमीट्रिक सेंसर का निर्माण किया गया।

आर्सेनिक प्रदूषण के खतरे: मानव स्वास्थ्य के लिए आर्सेनिक अत्यंत हानिकारक है। मानव शरीर में लंबे समय तक आर्सेनिक का लगातार प्रवेश ब्लैक फीट और गैंगरीन जैसी बीमारियों को उत्पन्न करता है। आर्सेनिक की अधिकता त्वचा, फेफड़ा, लिवर और गालब्लैडर के कैंसर का प्रमुख स्रोत है। इसके अलावा आर्सेनिक न्यूरोलाजिकल प्रभाव, याददाश्त और बौद्धिक क्षमता तथा डायबिटीज को भी प्रभावित करने की क्षमता रखता है। त्वचा से संबंधित विकारों जैसे मेलनोसिस एवं केरोटासिस में भी आर्सेनिक की प्रमुख भूमिका होती है।

वर्ल्ड हैंड हाइजीन डे

World Hand Hygiene Day 2022: जानिए हाथों को कब और कितनी देर धोना चाहिए? (Dainik Jagran: 20220505)

 $\underline{https://www.jagran.com/lifestyle/health-world-hand-hygiene-day-2022-when-and-how-to-wash-your-hands-correctly-22683560.html$

जानिए कब और कैसे सही तरीके से हाथ धोना चाहिए?

World Hand Hygiene Day 2022 हर साल 5 मई को वर्ल्ड हैंड हाइजीन डे मनाया जाता है जो नियमित रूप से हाथ धोने के महत्व पर ज़ोर डालता है। तो आइए हाथ धोने के महत्व के बारे में और जानें।

नई दिल्ली, लाइफस्टाइल डेस्क। World Hand Hygiene Day 2022: हर साल 5 मई को वर्ल्ड हैंड हाइजीन डे मनाया जाता है, तािक लोगों को इसके महत्व के बारे में जागरक किया जा सके। सुरक्षित और स्वस्थ रहने के लिए हमारा हाथों को दिन में कई बार धोना बेहद ज़रूरी होता है। कोविड -19 के प्रकोप के बाद से हाथ धोने का महत्व भी दस गुना बढ़ गया है, व्यक्तिगत स्वच्छता आपके समग्र स्वास्थ्य के लिए ज़रूरी है। इसे अपनी दिनचर्या का हिस्सा बनाने से वायरल संक्रमण और फ्लू से बचाव करते हुए कई लोगों की जान बची है।

World Hand Hygiene Day 2022: हाथों को कब धोना चाहिए?

जब आप दिन भर सतहों और वस्तुओं को छूते हैं तो आपके हाथों पर कीटाणु जमा हो जाते हैं। आप इन कीटाणुओं को दूसरों तक फैला सकते हैं या अपनी आंख, नाक या मुंह को छूकर खुद को संक्रमित कर सकते हैं। हालांकि अपने हाथों को रोगाणु मुक्त रखना असंभव है, हाथ धोना विभिन्न बीमारियों के प्रसार से बचाव की पहली पंक्ति है, जिसमें सामान्य सर्दी से लेकर मेनिन्जाइटिस, ब्रोंकियोलाइटिस, फ्लू, हेपेटाइटिस ए और विभिन्न प्रकार के दस्त जैसे गंभीर संक्रमण शामिल हैं।

हमेशा हाथ कब-कब धोना चाहिए:

खाना बनाने और खाने से पहले

अगर आप किसी बीमार व्यक्ति या फिर घायल का इलाज कर रहे हैं

कॉन्टेक्ट लेन्स पहनते और उतारते वक्त

टॉयलेट का इस्तेमाल करने के बाद

छींकने, खांसने आदि के बाद हाथों को ज़रूर धोएं

हाथ धोने का क्या महत्व है?

- 1. वाटरएड के अनुसार, हर साल, पानी से संबंधित बीमारियों और हाथ की स्वच्छता की कमी के कारण दुनिया भर में 443 मिलियन स्कूल के दिन छूट जाते हैं।
- 2. नैशनल हेल्थ मिशन के मुताबिक, भारत में करीब एक लाख बच्चे हर साल दस्त की वजह से अपनी जान गंवा बैठते है। जो UNICEF के मुताबिक, हाथों को स्वच्छ रखने से 40 प्रतिशत कम हो सकता है।
- 3. गैस्ट्रोइंटेस्टाइनल समस्याओं वाले लोगों की संख्या में 29-57% की कमी हो सकती है।

4. कमजोर प्रतिरक्षा प्रणाली वाले लोगों की संख्या को कम कर सकता है।

हाथों को कितनी देर धोना चाहिए?

पानी और साबुन की मदद से हाथों को कम से कम 20 सेकेंड के लिए ज़रूर धोना चाहिए। खासतौर पर टॉयलेट का इस्तेमाल करने के बाद, खाना खाने से पहले, छींकने या खांसने के बाद या जब भी हाथ गंदे दिख रहे हों।

अपने हाथों को कैसे धोना चाहिए?

यह सुनिश्चित करने के लिए कि जीवन भर स्वस्थ रहें, इसके लिए बचपन से ही स्वच्छता की आदत को बना लेना महत्वपूर्ण हो जाता है। कीटाणुओं से छुटकारा पाने के लिए, इन स्टेप्स का पालन करें:

- पानी से हाथों को गीला करें।
- साबुन को अच्छी तरह हाथों पर रगड़कर झाग बना लें।
- फिर 20 मिनट तक हाथों को साफ करें। हाथों के पीछे, कलाई, उंगलियों के बीच में, नाखूनों के अंदर वाले हिस्से को भी स्क्रब करें।
- पानी से अच्छी तरह धो लें।
- साफ तौलिए से हाथों को साफ करें और सुखाएं।
- अगर आपके पास साबुन और पानी से हाथ धोने का विकल्प है तो सेनिटाइज़र से बेहतर है कि पानी और साबुन का इस्तेमाल किया जाए।

Ankylosing Spondylitis

Ankylosing Spondylitis: Causes, symptoms, importance of early diagnosis, treatment (Hindustan Times: 20220505)

https://www.hindustantimes.com/lifestyle/health/ankylosing-spondylitis-symptoms-importance-of-early-diagnosis-treatment-101651719507191.html

World Ankylosing Spondylitis Day 2022: 69% patients are either misdiagnosed or remain unaware of Ankylosing Spondylitis, a type of inflammatory arthritis that predominantly affects the spine and sacroiliac joints, which further worsens their condition. Here's all you need to know about it

To promote awareness of ankylosing spondylitis and mobilise supporters to take action, World Ankylosing Spondylitis Day is observed internationally on the first Saturday of every May, except if the Saturday is May 1st and this year the day will be marked on May 7, 2022. A type of inflammatory arthritis that predominantly affects the spine and sacroiliac joints (where the spine connects to the pelvis), ankylosing spondylitis causes lower back, hip and pelvic pain.

Reports suggest that in India, around 1.65 million people are currently diagnosed with the condition, that is estimated to grow at an annual growth rate of 2.95% as per Global data's recent study and with the lack of understanding around this disease, 69% patients are either misdiagnosed or remain unaware, which further worsens their condition.

Causes:

In an interview with HT Lifestyle, Dr PD Rath, Consultant Rheumatologist, Director and Head of Department Rheumatology at New Delhi's Max Hospital, shared, "There isn't a definite reason behind AS' origination, however it is usually believed to be genetic. A gene called HLA B27 is found in one's body which is triggered by the environmental conditions and lifestyle patterns that can lead up to the disease. It is essential to understand that simply the presence of this gene does not mean that one would suffer from AS."

Symptoms:

Dr Ved Chaturvedi, Vice-President, Asia Pacific League of Associations for Rheumatology (APLAR), revealed, "Due to its auto-inflammatory nature, Ankylosing Spondylitis is seen to be aggravated when inactivity in patients increases. Patients suffering from the condition should be mindful of their lifestyle and focus on inculcating a positive and active lifestyle. Inflammatory low backache and lower limb arthritis are the early symptoms of the diseases, therefore, an early effort must be put towards the remittance of the disease; if one notices these symptoms."

According to Dr PD Rath, "In the condition of Ankylosing Spondylitis, the pain and stiffness in one's back is worse in the morning and night but keeps improving with the progression of the day because of gentle activity." Dr Nilesh Nolkha, Consultant Rheumatologist and Clinical Immunologist, Wockhardt Hospitals Ltd., Mumbai, said, "Experiencing severe pain in the low back and buttocks that makes sleeping at night a discomfort is one of the first key triggers of Ankylosing Spondylitis (AS). Any kind of pain that is instigated through inactivity and resting, before 45 years of age can be termed as the pain of AS."

Importance of early diagnosis:

Highlighting that on an average, patients that are unaware of the condition usually end up delaying their diagnosis by 5-6 years which is a significant amount of time, Dr Nilesh Nolkha pointed out, "Crucial treatment time is lost, as these patients consult with a physiotherapist, orthopedic, or sometimes a neurosurgeon, thinking of AS as a nerve related problem. Additionally, the number of Rheumatologists in India is far from ideal which prolongs the treatment even further. Finding a good general practitioner, or teleconsultation have proven to be significant substitutes."

He added, "A lot of AS patients also report mental health issues since the condition severely affects their everyday lifestyle. In such situations, one can get involved with support groups such as Antardhwani that have a significant presence in India. These support groups spread awareness about the disease, can help understand it, and carry out regular programs."

Treatment:

Dr Ved Chaturvedi stressed, "It is key to consult with a Rheumatologist for accurate treatment to provide any misdiagnosis or delayed diagnosis of the disease, which is set to worsen the condition. These patients are sure to benefit from Biologics that their Rheumatologist would prescribe along with creating a healthier lifestyle. Advance treatments such as Biologics have transformed the face of this disease, my patients have personally seen a great deal of improvement with the intake of this drug."

Echoing the same, Dr PD Rath said, "Patients are advised to stay active and keep their joints and muscles moving throughout the day because it helps reduce inflammation. If someone is suffering from this kind of a pain, it is important for them to consult with a Rheumatologist, because such pain could initiate the condition of AS."

He advised, "Certain lifestyle changes also help build a healthier pattern to live with AS, such as monitoring the C-reactive protein (a marker of systematic inflammation) from time to time, regular exercises, a healthy diet rich in Omega 3, flax seeds, fruits, and green vegetables. In addition to lifestyle changes, along with medications help control the progression of the condition efficiently."

Dr Nilesh Nolkha too asserted that it is important for patients suffering from this lifestyle condition to practice regular workouts and consult a Rheumatologist to find the best fit treatment plan. He said, "There are advanced treatment options available such as Biologics

that help slow down the structural damage progression caused by AS, preventing bone fusion and in many cases preventing new bone formation."

It's important to focus on how one can build a routine to find a way around deficiencies when it comes to health issues - follow through with a strict and healthy diet, and self-monitor your progress to keep your pains in check. Make sure that you consult your Rheumatologist regularly because ankylosing spondylitis is a disease that requires timely intervention, accurate treatment and a carefully managed lifestyle.

Eye Care

Summer eye care regime: 6 tips to protect your eyes from harsh heat waves (Hindustan Times: 20220505)

https://www.hindustantimes.com/lifestyle/health/summer-eye-care-regime-6-tips-to-protect-your-eyes-from-harsh-heat-waves-101651724347197.html

It becomes all the more important to adhere to an eyecare regime during summers because our eyes' tear film gets evaporated due to the direct exposure to sunlight and excessive heat. Here are 6 expert tips to protect your eyes from harsh heat waves in summers

When Samuel Richardson said, "Where words are restrained, the eyes often talk a great deal", we couldn't help but romanticise the body part for its exceptional beauty and with summers here we can't help but take a proactive approach to eye care against the harsh heat waves to maintain their healthy evocativeness in the long run. Summer weather is often a trigger to eye diseases and many studies have linked eye diseases with individual lifestyle factors such as smoking, obesity or hypertension hence, adherence to healthy lifestyle is encouraged in order to prevent this age-related disease which can also be prevented with primary prevention and early detection approaches.

Dr Jimmy Mittal, MS Ophthalmology, Mittal Eye Care Center, shared, "Cornea burn, dry eye, tired eyes, pain and allergies are some of the common ophthalmological issues of the summer season. When people think of sunburns, the focus mostly is on skin but very few are aware of the fact that excessive heat and harmful UV rays can also lead to corneal burns, a condition where one gets blurry vision, dryness and a gritty feeling in the eye. Therefore, it becomes all the more important to adhere to an eyecare regime during summers because our eyes' tear film gets evaporated due to the direct exposure to sunlight and excessive heat."

He listed 6 essential eye care tips one should religiously follow for healthy eyes:

- 1. Wear sunglasses when stepping out As sunscreens are essential for skin, so do the shades for eyes. When you are stepping out in the peak summers, go for oversized shades as it will provide extra protection to your eyes. Shades protect the eyes from cornea burn from the damaging UV rays. Some of the major symptoms of cornea burn are dryness, discomfort and tearing up.
- 2. Remain hydrated Yes, intake of a good volume of fluids is imperative for your better eye health. Since in summers our eyes' tear film often gets evaporated, therefore drinking more water can help your body produce a healthy volume of tears. But one should refrain from having alcohol and caffeine because it leads to dehydration.
- 3. Keep your eyes lubricated with eye drops Sometimes, remaining hydrated is not sufficient. This is when one should keep an eye drop handy (after consulting with an ophthalmologist) because summer paves way to eye dryness and irritation, which often ends up in pain in the eyes or swelling. To bid adieu to this condition it is recommended to use eye drops on prescription. It will lubricate the eyes and eliminate the pain and dryness.
- 4. Be careful when you are applying sunscreen on your face Summer means application of oodles of sunscreen on the face to block the sun damage. But one should be cautious while applying it near and around your eyes and eyelid region. Sunscreens, which are high in SPF, generally cause discomfort to the eyes if they accidentally go inside. Though it won't lead to permanent eye damage, it can cause chemical burns to the surface of the eyes. It can be a little discomforting and painful for a few days.
- 5. Avoid midday sun Restrict your movement in the sun during the later hours of the morning or afternoon, if it's not that essential. This is the time the sun shines bright and UV rays are at peak. Protecting your eyes from dangerous UV rays is essential for optimal eye health and maintaining your vision.
- 6. Always wear eye protection while doing outdoor activities Besides protecting the eyes from the UV rays, one should wear eye protection when involved in outdoor activities like swimming, mowing the garden or doing woodwork outside. Ensure to wear protection like glasses, goggles, helmets or shields, or face shields to guard your eyes and face from potential damage.

In order to keep summer eye issues at bay, one needs to take a proactive approach to eye care. Don't forget to visit your ophthalmologist at regular intervals.

Mental Health

Microaggressions: How and why do they impact health? (Medical News Today: 20220505)

 $\underline{https://www.medicalnewstoday.com/articles/microaggressions-how-and-why-do-they-impact-health}$

People's physical and mental health is influenced by a large and diverse array of factors. But how can the attitudes of other people affect individuals' well-being? In this Special Feature, we examine the impact that microaggressions have on health.

Microaggressions are an insidious form of discrimination. How do they impact health? Photo editing by Steve Kelly; image credit: kkgas/Stocksy.

Prof. Derald Wing Sue — a leading psychologist at Columbia University — and his collaborators give the definition of microaggressions as "the everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, which communicate hostile, derogatory, or negative messages to target persons based solely upon their marginalized group membership."

The origin of the term "microaggression" dates back to the 1970s, and was coined by African American Harvard University psychiatrist Chester Pierce, specifically in relation to race.

Since then it has expanded to include other marginalized groups including women, LGBTQIA+ people, religious minorities, people with disabilities, and those from low socioeconomic backgrounds.

As conceptualized by Prof. Sue and his colleagues, microaggressions can pertain to three distinct categories:

microassaults – the most overt form of microaggressions, which come in the form of slights and insults that can be verbal or behavioral

microinsults — which assert prejudiced stereotypes through insensitive comments that make presumptions about an individual's intelligence, morality, or belonging to an in-group

microinvalidations — comments that have the effect of devaluing or denying the lived experience of marginalized people.

Microaggressions may be a result of conscious bias, but they can also reveal unconscious prejudices. Oftentimes a person may deliver a microaggression without consciously admitting that the attitude expressed by their words or actions is discriminatory.

Emerging research suggests that, like more explicit forms of discrimination, this covert type of discrimination has concrete negative impacts on the health of those at the receiving end.

Chronic exposure to microaggressions can have both a direct impact on health, and an indirect impact when it occurs within a system of healthcare.

Find encouragement and support through one-on-one messaging, live chats led by a guide, and advice from others dealing with depression.

Microaggressions' direct impact on health

When a person experiences stress, it can lead to physiological responses, including elevated blood pressure, increased heart rate, and the secretion of certain hormones, such as cortisol. Discrimination is a social stressor and it acts on the body in the same way.

One impact of this increased stress response was revealed in a studyTrusted Source on racial differences in sleep. African American participants who reported experiencing more discrimination achieved less deep slow-wave sleep — the deep state of sleep associated with rest.

Sleep is critical for the healthy physiological functioning of the body, including the immune system, hormone systems, and mental function.

Two separate 2009 analyses of existing research — one from the Journal of Behavioral Medicine, the other from the Psychological BulletinTrusted Source — examined the link between perceived discrimination and a multitude of physical conditions.

They both concluded that discrimination was a stressor with a negative impact on health and morbidity, particularly hypertension and cardiovascular disease.

Although there is a growing body of scientific literature on the relationships between discrimination and physical health outcomes, more research is needed to show the true impact of different forms of discrimination and discriminatory aggression.

Discrimination is associated with an increased incidence of mental illness, violence, poverty, and inequities in quality of treatment and access to healthcare, all of which have their own impacts on health. Isolating the direct physical impact of microaggressions is challenging when there are so many co-factors at play.

This is compounded by dataTrusted Source suggesting that discrimination increases the likelihood of individuals engaging in unhealthy behaviors such as smoking, drinking, or overeating, which may serve as an immediate stress-reducing strategy but are high-risk factors for disease in the long term.

Among the better-understood impacts of microaggressions are those on mental health.

A 2015 investigationTrusted Source into the relationship between microaggressions and suicidal thoughts focused on 405 students from racial and ethnic minorities at a large

midwestern university. Participants scored the frequency with which they encountered different types of microaggressions alongside answering questions on their mental well-being.

The trend in the data showed that the more often the students experienced microaggressions, the higher the incidence of suicidal ideation for four out of their six categories of microaggressions.

This corroborated the findings of a studyTrusted Source from the previous year across a dataset of 506 adults from various racial groups, which found that higher frequencies of racial microaggressions were a significant predictor of negative mental health amongst the participants, in particular depressive symptoms, anxiety, negative view of the world, and lack of behavioral control.

Microaggressions in healthcare settings

Microaggressions may often be unconscious, but they reveal underlying biases that can impact the treatment of individuals.

A successful relationship between patient and healthcare provider requires trust. When biases are revealed, that trust may be damaged, and the patient may develop a negative association with seeking medical care.

A 2015 studyTrusted Source into the healthcare of American Indian patients with diabetes found that more than one in three of the study's 218 participants had experienced racial microaggressions from their healthcare professionals.

Alongside this, they scored the patients' depressive symptoms, the incidence of heart attacks, and hospitalizations in the past year. A significant positive correlation emerged between the number of microaggressions experienced and each of the study's three measures of health and well-being.

For LGBTQIA+ people, one of the most common forms of microaggressions in healthcare is the assumption that people are heterosexual and cisgender.

It is well documented that these communities are at significantly higher risk of tobacco, alcohol and drug misuseTrusted Source, sexually transmitted diseasesTrusted Source, psychological distressTrusted Source, and suicideTrusted Source as a result of a higher prevalence of discrimination, rejection, and violence.

If healthcare professionals make assumptions as to patients' sexuality and gender, this may block the patients' access to the appropriate health services. Patients may also seek medical attention less readilyTrusted Source as a result.

The same trend occurs in mental healthcare settings, too. According to a 2014 study, over half of counseling clients from marginalized racial and ethnic backgrounds reported that they had been subject to microaggressions from their therapists.

The perception of microaggressions negatively correlated to their satisfaction with their counseling and their relationship with their therapists.

To learn more about how these biases arise, Medical News Today spoke to Dr. Elinor Cleghorn, a scholar of medical humanities and author of the book Unwell Women, which chronicles the history of gender bias in healthcare from Ancient Greece through to present times.

"We have a tendency to think about medicine within the framework of science, which annexes it out to this place of impartiality and objectivity," said Dr. Cleghorn. "In actual fact, the roots of medicine are embedded in society and culture, and because medicine is dealing with the most foundational matters of life and death it has, throughout its history, absorbed and reflected society's ideas about who we are as people."

"[Medicine] has really only become the science we understand it to be — an evidence-based science — over the last century [...] [before that] we had centuries where practitioners of medicine had to rely on assumptions of who people were, what their bodies did and what they were for," she explained.

Yet much of this status quo persists to this day, giving rise to systematic discrimination in healthcare settings.

"It made sense to Ancient Greeks that women existed [only] to procreate [...] that was 'science' to them, it was irrefutable. You begin to create a medical discourse around women's bodies centered around these presumed facts [...] that everything in their health pivoted around their reproductive life," noted Dr. Cleghorn.

"This has been reiterated and reiterated across the centuries because medicine has always been dominated by male practitioners who have tended, in the most part, to uphold these gender divisions," she pointed out.

She went on to describe how this historic context may manifest in microaggressions in a healthcare setting in the present day:

"[Microaggressions] can take so many forms, and they're very intersectional. The microaggressions that [one] might experience as an educated white woman may derive from a historical precedent that those women who worry about their pains must be 'hysterical' [...] whereas for a woman of color, the perception of her pain carries the burden of [a] different historical context, insofar as she might experience racialized microaggressions emerging through."

"The majority of doctors, if called out on this, would say 'of course I don't believe that Black women are invulnerable to pain,' but those attitudes have shaped [medical] culture. It's there because it's gone unchecked, because the mold in which the science has been forged has not been looked at and remade," she emphasized.

How to stop the negative impact

The Institute of MedicineTrusted Source agrees that implicit bias and stereotyping may play a role in the health inequities observed among marginalized groups, and suggests that one strategy to reduce their impact is the recruitment of more healthcare professionals from underrepresented communities.

As with any form of unconscious bias, tackling microaggressions requires critical self-reflection. Training, which increases awareness of one's own biases, and promotes intergroup contact can be an effective toolTrusted Source in improving patient care.

Providing such training also increases the likelihood of workers feeling able to be open about their own sexuality and gender identity amongst their colleagues, further increasing the opportunity for inter-group contact.

Asked what she felt would help, Dr. Cleghorn cited the value of research:

"One step is using testimonies, voices and experiences of women and other marginalized people in a meaningful research context [...] In terms of this issue being studied from a sociological perspective, it's really new. What we've had since the early 2000s are these groundbreaking studies like The Girl Who Cried Pain, which showed that statistically women are much more likely to be prescribed a sedative or an antidepressant when they report chronic pain, whereas men are more likely to be prescribed an analgesic, that women are much more likely to have the cause of pain diagnosed as psychological or emotional, whereas men, [as] physical."

"Studies [like this] exposed how deep-rooted the issue is, but they also showed how it can be studied! Quite often when we talk about things like microaggressions [...] it feels amorphous. To know there are mechanisms by which we can look at these issues critically is really important," she pointed out.

"That study [The Girl Who Cried Pain] was a combination of patient testimonies, but also things like admission records. It was a real qualitative and quantitative exploration. The more we look at this issue as something that can be studied objectively the more we can move towards undoing it," concluded Dr. Cleghorn.

Stroke

Gut microbe strains linked to more severe strokes and poorer post-stroke recovery (Medical News Today: 20220505)

https://www.medicalnewstoday.com/articles/gut-microbe-strains-linked-to-more-severe-strokes-and-poorer-post-stroke-recovery

A study found that specific bacteria in the gut microbiome are linked to more severe stroke and worse post-stroke recovery.

Globally, about 13 million people experience a stroke each year.

Researchers from the Stroke Pharmacogenomics and Genetics Laboratory have linked specific bacteria in the gut microbiome to both stroke severity and recovery.

Scientists believe their findings could aid stroke prevention and improve post-stroke recovery.

Past research links the health of the gut microbiome to various diseases, including inflammatory bowel diseaseTrusted Source, Alzheimer's diseaseTrusted Source, and kidney disease.

Researchers from the Dr. Israel Fernández Cadenas' (PI) Group Stroke Pharmacogenomics and Genetics Laboratory have uncovered a link between certain bacteria in the gut microbiome associated with more severe stroke and negatively affecting post-stroke recovery.

Researchers presented the study on May 4, 2022, at the 2022 European Stroke Organisation Conference (ESOC).

What is the gut microbiome?

The gut microbiome refers to the trillions of bacteria and other microorganisms living within the intestinal tract of humans. ResearchTrusted Source shows these "good" bacteria play an important role in the body's overall health, including boosting immunity and helping with digestion.

If the gut microbiome becomes unbalancedTrusted Source, it can harm the body. Stress, bad eating habits, and antibiotics can disrupt the gut microbiome. When this happens, the body becomes vulnerable to diseases, including those related to inflammationTrusted Source, such as rheumatoid arthritis and heart disease.

What is a stroke?

A strokeTrusted Source happens when blood is not able to reach the brain. If blood flow to the brain becomes blocked, oxygen and vital nutrients cannot get to the brain, which can cause brain cells to die.

Data shows that about 13 million people globallyTrusted Source experience a stroke each year, and about 5.5 million people die from strokes.

There are two main types of strokes:

Most strokes are ischemic strokes, where plaque builds up in the arteries surrounding the brain, halting blood flow to the brain.

A hemorrhagic stroke occurs when an artery near the brain ruptures or leaks, which places extra pressure on brain cells, leading to blood deprivation in the brain.

Identifying stroke-related bacteria

In this new study presented at the 2022 European Stroke Organisation Conference, a research team led by Miquel Lledós, lead researcher and Ph.D. student from the Stroke Pharmacogenomics and Genetics Laboratory Group at the Sant Pau Research Institute in Barcelona, Spain, studied fecal samples from 89 ischemic stroke patients.

"The influence of the gut microbiome ... is a modifiable risk factor associated with the risk of stroke and with post-stroke neurological outcomes," Lledós explains. "However, most research has previously been done in animal models. In this study, we took (fecal) samples — the first samples taken after the event — from 89 humans who'd suffered an (ischemic) stroke. (Compared) with a control group, we were able to identify multiple groups of bacteria that were associated with a higher risk of (ischemic) stroke."

From their research, scientists identified multiple types of bacteria associated with an increased risk for ischemic stroke, including the bacteria FusobacteriumTrusted Source and Lactobacillus. They also found the bacteria Negativibacillus and Lentisphaeria were associated with a more severe stroke in the acute phase. And the bacteria Acidaminococcus led to poor post-stroke recovery after three months.

"Acidaminococcus is an opportunistic pathogen, and this genus has already been related to a higher risk of stroke," Lledós told Medical News Today when asked why Acidaminococcus associates with poor functional outcomes at three months. He added that Acidaminococcus is a member of the family Veillonellaceae, known for producing succinate — a compound linked to increased risk factors for cardiovascular diseaseTrusted Source.

Direct and simple applicability

Based on his team's research, Dr. Lledós said research on gut microbiota could have direct and simple applicability in the clinical field. "If the evolution of patients with stroke is associated with the presence of a certain type of microbial flora, we could carry out clinical trials varying this microbial composition," he explained.

"In other pathologies, clinical trials are being carried out in which researchers replace the intestinal flora through dietary changes or fecal transplantation from healthy individuals — much more consistent in the long term," he continued. "One way to do that is by using lyophilized compounds of microorganisms in capsules that are easy to ingest and that modify the intestinal flora."

And in regards to post-stroke recovery, Dr. Lledós said there are currently no specific neuroprotective treatments to prevent neurological worsening after stroke. "The use of new therapies, such as changes in the microbiome through nutritional changes or fecal transplantation, could be useful to improve post-stroke evolution," he added.

MNT also spoke about this study with Dr. Reza Shahripour, a board certified vascular neurologist at Providence Saint John's Health Center in Santa Monica, CA. He says the label cryptogenic strokeTrusted Source is used for 30 to 35 percent of stroke cases where there is no known cause for the condition.

"We don't know what's the etiology and the patient doesn't have any atherosclerosis diseaseTrusted Source, no cardioembolicTrusted Source source," he explained. "If we believe that inflammation of these kinds of microbes in the gut could be the source of inflammation, we have a reason for that type of stroke."

Additionally, Dr. Shahripour said there are recurrent stroke cases in people taking antiplateletTrusted Source or anticoagulantTrusted Source drugs.

"If there is a risk factor ... of (the) microbiome in the gut, if ... we can address it before another stroke, we can decrease the (recurrence) of stroke in the future," he added.