



IPH NEWS

Public Health

Excellence in Higher Public Health Education

December 2014

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2014

MISERY

They went to school
and never came back..



2015

HOPE





Breast Feeding

Nadeem Saqib Ch.

Human milk is uniquely suited to the human infant, both in nutritional composition and nutritive bioactive factors that promote survival & healthy development.

STAGES OF LACTATION:

Colostrum is secreted for few days after delivery and is thin yellowish fluid, very rich in immunological components & developmental factors. It has higher protein, sodium, chloride, magnesium content and lesser lactose, calcium & potassium than mature milk. Transitional milk is secreted from 5th day to 2nd week postpartum. Largely mature milk is secreted from 3rd week to 4th week postpartum. Fully mature milk is secreted from 5th to 6th week postpartum onwards.

COMPOSITION:

Human milk is dynamic, bioactive fluid which changes its composition accordingly. Composition of colostrum differs from milk of late lactation. Composition of milk varies within feeds, diurnally, mother to mother, population to population and in preterm & term milk.

The nutrients of human milk are derived from three sources. Some of the nutrients are synthesized in lacto-cytes; some are dietary in origin and some originate from maternal stores.

Human milk contains almost 88% water, 1% protein, 4% fat, & 7% carbohydrates and 0.2% ash. Organic carbohydrates are mainly lactose & proteins are mainly casein, lactalbumin & lactoglobulin.

Human milk protein concentration is not affected by maternal diet but increases with mother weight for height ratio and decreases in mother producing high amount of milk.

Human milk fatty acid profile varies with mother diet, especially LCPUFA (long chain polyunsaturated fatty acid). Fats are the most highly variable macronutrients of milk.

Human milk lactose is least variable but increases in mothers producing higher quantity of milk.

Many micronutrients vary in human milk depending on maternal diet & body stores (Vitamin A, B1, B2, B6, B12, D and Iodine)

BENEFITS

Breastfeeding protects against a variety of diseases and conditions in the infants such as:

- Bacteremia
- Diarrhea
- Respiratory tract infections
- Necrotizing enterocolitis
- Otitis media
- Urinary tract infection
- Late-onset sepsis in preterm infants
- Type 1 and type 2 diabetes
- Lymphoma, leukemia, and Hodgkin's disease
- Childhood overweight and obesity

There are also maternal health benefits to breast feeding such as:

- Decreased postpartum bleeding and more rapid uterine involution
- Decreased menstrual blood loss and increased child spacing (lactational amenorrhea)
- Earlier return to pre-pregnancy weight
- Decreased risk of breast and ovarian cancers

Breast feeding is also a great benefit to the environment and

society. Breastfeeding families are sick less often and the parents miss less work. It does not require the use of energy for manufacturing or create waste or air pollution. There is no risk of contamination and it is always at the right temperature and ready to feed.

ABSOLUTE CONTRAINDICATIONS TO BREAST FEEDING:

- Infants with classical galactosemia
- Infants with classical PKU (Phenylketonuria)
- Mothers infected with HIV having high titre of antigen, human T- cell lymphotropic virus type I or type II, or who have an active herpes lesion on the breast.
- Mothers taking any of the following medication: Radioactive isotopes, cancer chemotherapy agents, such as antimetabolites, and thyrotoxic agents.
- Mother who use illegal drugs.

COMMONLY MISTAKEN AS CONTRAINDICATIONS:

Women who have cesarean deliveries: Initiate breast feeding immediately, using a semi-recumbent position on the side or sitting up.

Women who received vaccination or live with vaccinated children: Neither inactivated nor live vaccines administered to lactating women or other family members affect the safety of breast feeding for the mother and infant.

Women who take medications: Most medications can be taken while breast feeding. Consult product prescribing information.

Women who have hepatitis A: Initiate breast feeding after infant receives immune serum globulin, and then vaccinate at 1 year of age.

Women who have hepatitis B: Initiate breast feeding after infant receives hepatitis B Immune globulin and first dose of the 3-dose Hepatitis B vaccine series.

Women who have hepatitis C: Hepatitis is not a contraindication for breast feeding, but reconsider if nipples are cracked or bleeding.

Women infected with HIV who has low titre of antigen: Mothers with untreated varicella should not feed from the breast, but in most cases pumped milk can be fed to the infant.

Women who had breast surgery: Breast feed frequently to maintain milk supply. If the surgical wound is painful, the other breast can be used but monitor infant growth because milk supply could be insufficient.

ماں کا دودھ

ماں اور بچے کی صحت کا ضامن

Cardiovascular Diseases: A Major Public Health Concern

Surya Fazal Hashmi

IPH Plans Community Intervention for Behavior Modification

Cardiovascular disease (CVD) is caused by disorders of the heart and blood vessels. Coronary heart disease (CHD) is the commonest form of CVD. In CHD, small blood vessels that supply blood to the heart become narrow.

Coronary heart disease is a major public health concern and is the major cause of mortality in the world. Every year, about 17 million deaths are expected to be due to CVDs mostly because of heart attacks and strokes. By 2030, more than 23 million people will die annually from CVD. Worldwide, heart disease is also one of the commonest causes of death in women.

Cardiovascular disease contributes considerably to the health expenditure in both developed and developing countries. Mortality, disability and morbidity of people suffering from CVD especially amongst the working community greatly affect the economic development. This results in a great burden to the society.

There are no gender, geographical or socioeconomic restrictions for CVD. It is estimated that heart disease is also the leading cause of death in developing countries. Nevertheless, no accurate data is available in Pakistan; the burden of cardiovascular disease is expected to be high because of changes in life style. Moreover, many physicians and the majority of the Pakistani people do not have enough knowledge about the prevention and management of CVDs.

In the INTERHEART study, it was concluded that about 90 percent of first heart attack can be prevented by the modification of nine factors including smoking, performing regular exercise, consumption of fruit and vegetables, control of blood pressure, moderate intake of alcohol, prevention of obesity, stress, diabetes mellitus and high cholesterol. Six out of these nine factors are associated with increase the risk for CHD. These risk factors include smoking, high blood pressure, obesity, stress, diabetes mellitus and high cholesterol. Other three factors are regarded as protecting factors for CHD. These protecting

factors include consumption of fruit and vegetables, performing regular exercise and moderate consumption of alcohol.

The American Heart Association in 2010 published a plan with the objective to improve the overall cardiovascular health. The AHA has included seven factors including smoking, physical inactivity, unhealthy diet, obesity, high blood pressure, diabetes mellitus and high cholesterol for appraisal of cardiovascular health. They omitted alcohol intake because its promotion may increase the risk of alcohol abuse. Stress was also excluded because of difficulty in its monitoring.

Burden of CHD can be reduced effectively by prevention. Prevention is possible by adopting a healthy life style. Recognition about risk factors for heart disease is an essential step leading towards adoption of healthy life style.

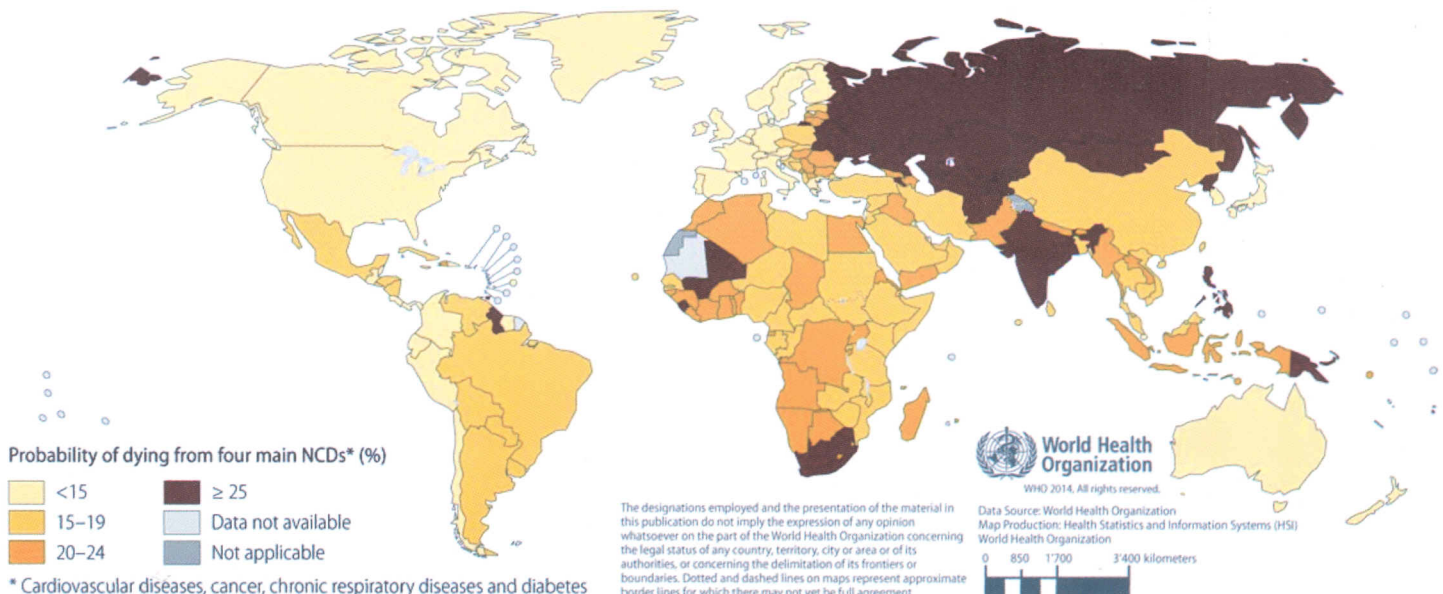
Secondary prevention of CHD is possible by modification of risk factors involving life style practices. It reduces deaths, decreases subsequent heart attacks and improves the quality of life.

Worldwide, there is growing concern for healthy heart programs. These programs use health education methods for health promotion. By promoting healthy lifestyle, these methods will help people to decrease their risks for heart disease. These programs should be evidence-based. Different approaches should be used for different communities. These approaches should be pre-tested before implementation.

Increase burden of cardiovascular disease in Pakistan is mainly attributed to lack of awareness about risk factors. Incidence of disease can be reduced through prevention by educating people about risk factors. IPH is planning for community intervention for modification of lifestyle. This project may help to design useful communication strategies to promote public health programs for prevention thus reducing the burden of disease.

Attached below is the map showing probability of dying from four main noncommunicable diseases, (namely CVD, Cancer, Chronic Respiratory Diseases and Diabetes) between the ages of 30 & 70 years, for the year 2012 by WHO

World map showing probability of dying from four main noncommunicable diseases, (namely CVD, Cancer, Chronic Respiratory Diseases and Diabetes) between the ages of 30 & 70 yrs,



Glimpses of IPH 2014



14th August



School Visits



Dental Week



Visiting Gr



Working with mosquitoes



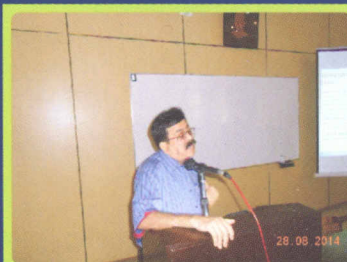
Dog Bite Victims Clinic



District Attachment



Ghaibana



Guest Speakers



CME



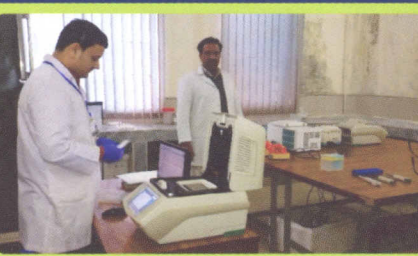
PG Class of 2014



Hands on Tr



Mother & Child Health



PCR Labs



Christmas Gathering



Nursing



SatScan Review



Field Work



MERs Guidelines Review Alert Generation



Water Testing Lab



Post Graduate Education



Medical Education Deptt.



Field Research



Vector Training



TB Reference Lab



Day Care Centre



Ghaz Janaza



Seminars



Official Meetings



Workshops



Focus Group Discussions



Visitors from outside Punjab



Dengue SOP Meeting



Antenatal Services



Occupational Health



Training



Joint Ventures



Larval Research



Field Workers Training



Dengue Walk



Meeting



British Delegate



High Level Health Advisory



Family Planning



Nutrition Lab at Work



WHO Delegate on Ebola



APWA College Lecture



Environment Inspectors



BCC



Awareness Moots

IPH Mourns the Peshawar Incident

Heart-shredding Peshawar incident on 16th December left every human being grieved. Only a few incidents of similar gravity are recorded in the human history. The most condem-



nable act of terrorism attacking school children made everyone cry all around the world regardless of religion, caste or origin. Memorizing those innocent souls who had been martyred that day, IPH paid tribute in the form of Ghaibana Namaz-e-Janaza on Thursday 18th December here at IPH central lawn. Dean IPH along with all the faculty and staff prayed to bless the martyred souls, early recovery of the injured and safe and progressive future of Pakistan. **Reported by Hafiz Shahid Latif**

IPH Beefs Up Security To Defy Terror



Terrorist attacks on Army Public School Peshawar and the potential threat to other academic institutes for similar cowardly acts obligated the government to close all academic institutions till the achievement of satisfactory security measures. A strict security up gradation plan has been devised by the government of Punjab for all the public and private sector institutions. In compliance with the orders of secretary health, the following measures have been taken on priority basis:



- Up gradation of the staff and student's record and issuance of new identity cards
- Issuance of the parking stickers for staff and students' vehicles
- Installation of the walk-through-gate & block concrete barriers
- Repair and wire-topping of the boundary walls and installation of metal grills
- Hiring of new armed security staff
- Installation of surveillance (CCTV) cameras

Reported by Hafiz Shahid Latif

"The Visit Enhanced Our Knowledge" LHV's visit MCH Department

Students of Public Health School of Nursing visited the



Maternal & Child Health department here at IPH on 2nd December 2014. Dr Humaira Zareen (Assistant Professor)



facilitated the visitors by apprising them of the functionality, organization and administration of the MCH work. The activity served to enhance the related knowledge of 120 students and their tutors during the visit. **Reported by Humaira Zareen**

IPH Celebrates Christmas



Promoting the Inter-religious harmony, IPH held a gift distribution ceremony for the Christian employees of IPH on 23rd December in the context of upcoming Christmas. The event



was chaired by Dean IPH along with the Estate Officer and the Chief Sanitary Inspector. Prof. Maaz said that the Christian employees of the institute were an asset and their happiness was most desirable. The employees thanked the administration for making this Christmas a memorable event. **Reported by Mian Mahmood**

Post Graduate Students Visit Sheikhpura For District Attachment

Students of MPH, MHM and MMCH are required to visit the health setup at district level as part of their training. This year, the students were attached with District Sheikhpura. More than 20 visits to various sections of health setups in Sheikhpura were visited and their working was observed. All students



are expected to furnish a detailed report on each and every health establishment and will be examined by University of Health Sciences for award of masters degree. **Reported by Muhammad Hussain Cheema**

Nutrition Lab Conducts More than 2500 tests in 2014

The Department of Nutrition & Dietetics in IPH, Lahore has been running the nutrition lab (Diagnostic Biochemical Lab) since the establishment of this institution and has been conducting related investigations for research and clinical purposes. In the past the lab functioning was repeatedly interrupted due to lack of financial support. However, in 2014 the process was regularized and the services were extended to the masses without break. **Reported by Farrukh Alvi**

SR.NO	TEST	QUANTITY
1	Blood Sugar (F)	260
2	Blood Sugar (R)	438
3	Urine Sugar	613
4	Urine C/E	205
5	HB	162
6	ESR	63
7	TLC	58
8	DLC	58
9	S.Bilirubin	65
10	SGOT	65
11	SGPT	65
12	S.Alk. Phosphates	65
13	Blood Urea	80
14	S.Uric Acid	60
15	S.Creatinine	78
16	S.Cholesterol	55
17	S.Triglycerides	38
18	HDL	16
19	LDL	0
20	Blood Group	84

Total Patients: 573, TOTAL TESTS: 2520

Umar Farooq Dar Passes FCPS



Dr. Umar Farooq Dar, Demonstrator Infectious Diseases Department and post graduate trainee for FCPS Community Medicine cleared the examination in first attempt, held in December 2014. The Research & Publication Cell congratulates him on this auspicious achievement and wishes him good luck in future. **Reported by M. Azeem Malik**

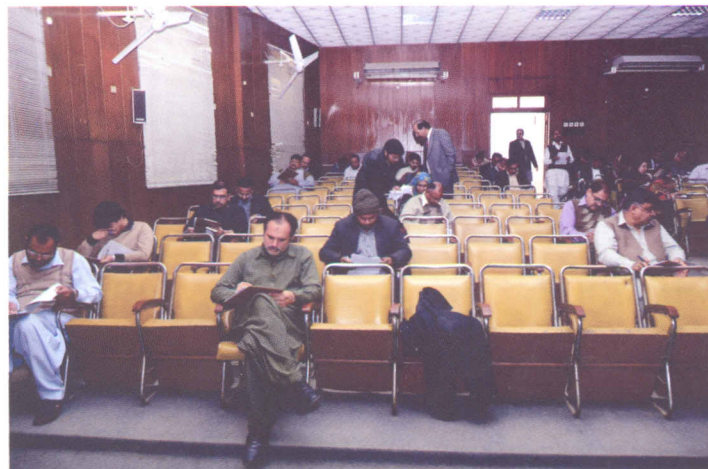
IPH Demonstrators Become Faculty

Three of the IPH demonstrators have recently been selected through Punjab Public Service Commission and have been appointed as Assistant Professors of Community Medicine. Dr. Saima Ayub working as demonstrator in Bacteriology Department has joined Fatima Jinnah Medical College Lahore. Dr. M. Tauseef Javaid, senior demonstrator in Infectious Diseases Department joined Services Institute of Medical Sciences Lahore. Dr. Syed Razi Haider Zaidi, also working as demonstrator in Infectious Diseases Department joined Ameeruddin Medical College Lahore. These promotions and postings are a matter of great pride and prestige for the institute. The Research & Publication Cell congratulates them and wishes them good luck in future. **Reported by M. Azeem Malik**



IPH Conducts Entry Test For Admission In Session 2015

IPH conducts post graduate courses namely MPH, MHM, MMCH and MPhil Community Medicine and offers admission each year. The entry test holds more than 40% marks in the admission merit and is a well-organized activity. This year the test was held on 07 December 2014 (Sunday from 9am to 10 am) in which more than 150 candidates participated. The activity was supervised by Dr. Tanveer Bharwana (Director Medical Education) along with 25 other staff members. The merit lists will be displayed in the midst of January 2015. **Reported by Zahid Ali**



Routine IPH Activities During December 2014

Activities	No.
Vector surveillance of parks with ovitraps in Lahore	50
Dengue PCR performed	386
Ongoing research projects on dengue	10
Small group discussions on dengue	25
Dengue virus tests performed (IgM, IgG, NS1)	05
Clients receiving family planning services	46
Expectant mothers receiving antenatal care	64
Mothers receiving post natal care	09
Patients utilising public dental health services	144
International polio vaccination	113
Children receiving vaccination of :	
BCG	15
Pneumococcal	53
Pentavalent	53
Tetanus Toxoid	14
Oral Polio	113
Measles	18
Anti-Rabies vaccination given to dog bite victims	2435
Patients having sputum tested for AFB	463
Patients having sputum cultured for AFB	487
Tests for Hepatitis B	10
Tests for Hepatitis C	10
HCV PCR tests performed	226
CBC tests performed	24
Infants & children receiving health care	191
Adults receiving health care	259
Research methodology sessions	17
Computer training sessions	17
Water samples tested for faecal contamination	66
Daily report on dengue disease & surveillance	31

پولیو کے دو قطرے ہر بچہ ہر بار