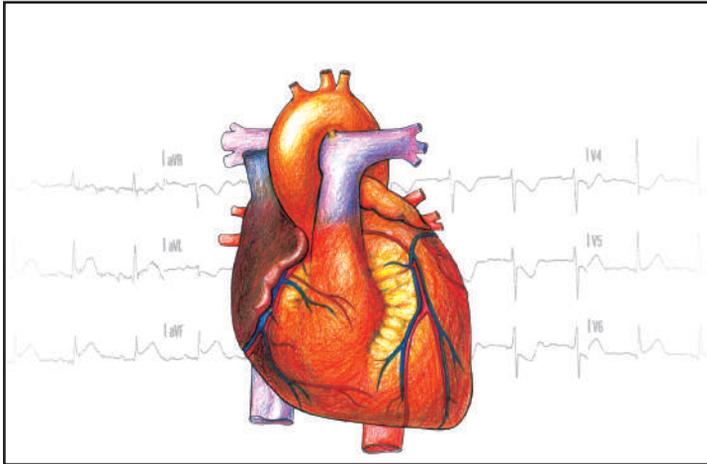


Healthier *Life Style* ♥ *Heart*



Dr. Bharat Rawat

E-mail: drrawat@norvic.wlink.com.np

rawatb67@gmail.com

Healthier *Life Style* *Heart*

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“ Dedicated to all the
Caring and Health Conscious
Women of our Families.”



Norvic International Hospital & Medical College Pvt. Ltd.
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Message

Dr. Bharat Rawat is a known name in the field of Cardiology in Nepal. With his dedication and devotion, he has earned a name not only for himself but also for his institution, Norvic International Hospital.



He has participated in many national and international forum and seminar and has always drawn attention of all the medical fraternity for his commendable research work he had done during last twelve years. He has presented numerous scientific papers in many international forums.

Dr. Rawat is not only a good clinician but also a good writer and poet. He has already written many articles on Life Style modification which have been much appreciated by his readers.

I am quite pleased to know that Dr. Rawat is bringing out second edition of this book. This book carries a lot of medical information relating to Cardiac ailments for the common people to better understand this disease and preventive aspect of it.

I congratulate Dr. Rawat for his new publication and wish him all success for the days to come.

Basant K. Chaudhary

Chairman

Norvic International Hospital & Medical College Pvt. Ltd.



भारतीय राजदूत
काठमाण्डू (नेपाल)
**AMBASSADOR OF INDIA
KATHMANDU (NEPAL)**



Message

Dr. Bharat Rawat needs no introduction; during his stay in Nepal, he has become synonymous with heart care. In addition to being an accomplished doctor, Dr. Rawat is also a good writer as this book testifies. He is able to put his message across simply and convincingly. One of the reasons behind Dr. Rawat's success is his pleasant and smiling demeanour which everybody finds highly reassuring.

This little book is a simple guide but extremely relevant. I compliment Dr. Rawat on his writing and wish him all success and happiness in years to come.



Rakesh Sood

December 8, 2010



Message

Dr. Bharat Rawat was deputed to **Norvic International Hospital**, Kathmandu, Nepal in year 1998 from **Escorts Heart Institute**, New Delhi. I always had a dream to develop a Cardiac centre par excellence in Nepal along with my dear friends, Binod and Basant Chaudhary. Dr. Rawat was selected because of his sincerity and enthusiasm. Over the years, Dr Rawat has made a good name for the Hospital and for himself. I am happy and proud to see him today as a well established name in Nepal. This book on life style highlights the most important aspects that one needs to know and follow to prevent heart diseases. I am happy to see that the language is simple and chapters are to the point. I believe this book will stimulate its readers to stay healthy. I specially want to thank Mrs. Anjali Rawat for her support and contributions to Dr. Rawat. I wish all the best to Dr. Rawat, Norvic International Hospital and the people of Nepal.

Padma Bhushan Dr. Naresh Trehan
Chairman and Managing Director
Medanta The Medicity
Gurgaon
India



नेपाल भारत मैत्री समाज Nepal Bharat Friendship Society



Message

All south Asian countries including India and Nepal are witnessing an epidemic of heart diseases. We need to check our life style to prevent ourselves and our families from developing such deadly diseases. Dr. Rawat has contributed immensely to develop cardiology and healthy living awareness in Nepal. People of Nepal have deep sense of respect for Dr. Rawat. He is the first choice for most Nepalese families whenever there is any medical emergency. I am sure his presence in Nepal has added to the strong relations between the two neighboring countries India and Nepal. Knowing Dr. Rawat personally since many years, I am happy that he has come out with this book for general people as a guide to healthy living.

This book has many practical guidelines to our daily living. The chapters on “Spirituality and Health” and “Health and Festivals” are very interesting and useful.

I congratulate Dr. Rawat and Norvic Hospital for this effort. I wish Dr. and Mrs. Rawat a comfortable stay in Nepal.

Prem Lashkery

President

Nepal- Bharat Friendship Society

Preface and Acknowledgement for First Edition

It is amazing how many things one can learn from various situations and persons in life. I have been extremely lucky to be able to encounter countless such experiences. From inspiration to encouragement, from expectations to thankfulness, every gesture has helped me in establishing my career in this wonderful country.

I have collected few of my simple health related articles in this small book. I hope these tips can help in living a healthy life.

Nepal is a country which is full of love and beauty. Unfortunately, it is also facing a political turmoil. The economy is in doldrums and people are forced to live life in great stress.

Heart disease is the No. 1 killer globally. According to the World Health Organization, heart disease killed 17.5 million people in 2005, and that number is expected to rise to nearly 20 million by 2015.

A country which can't afford a costly disease like heart disease is unfortunately witnessing an epidemic of heart disease including young and old, rich and poor equally.

Right information about heart disease (Coronary Artery Disease) and methods to prevent and treat them need to be spread to general people.

We should know why we need to adopt to a healthier life style and why munching randomly in evening parties is not safe. We should safe-guard ourselves as well as our families. I hope you get motivated and adopt a healthy living from now- from today !

I want to sincerely thank all my colleagues and patients and their relatives who gave me and my wife, Anjali, all the love, confidence and encouragement in this country. My wife's love and support helped me to establish my career in Nepal while also caring for our children and parents in the best way possible.

It's impossible to put the names of all who I wish to thank. The two most important are –Dr. Kirti Swaroop Rawat, my dad, who told me either to do something in life that is worth writing about or write something that is worth reading! I am also thankful to Ms. Pragya Rimal, my secretary, who constantly kept encouraging me and sat with me for long hours to get this book in shape. So this book is here, and I present it to you on World Heart Day.

Stay Healthy and Keep Smiling.

Dr. Bharat Rawat

Kathmandu

Nepal.

September 26th, 2010.

Preface and Acknowledgement for Revised Edition

The best thing about having a first book out in print is that then one sees the product, and can immediately plan to improve it !

In the first book, I wrote about the topics I have been advising on. These are questions my patients had asked me from time to time. Once these were answered, I realised that there is a need to talk about a few more topics very relevant to lifestyle and heart disease.

Smoking and drinking are important health hazards and we need to know basic facts about them. Diabetes is an important common condition that we need to know how to handle. Festivals too can be big challenge to our health ! I have tried to cover this interesting topic with some tips at the end. There are two additional chapters on “Sugar Substitutes” and “Alcohol and Heart”. One should also know how to react while witnessing a suddenly collapsing person. Cardiac Pulmonary Resuscitation (CPR) starts with its basic ABC steps which all of us should know. One very special topic I have added in this edition is “Spirituality and Health”. I think talking about physical health alone is not enough and psychological and even spiritual factors cannot be ignored while trying to adopt a healthy life style. In the last chapter I have summarized how to get best out of your doctor ! .

I do believe that these seven new chapters add greatly to the advise that I offer as a cardiologist and would like to see fewer people turning into patients, when they could have very healthy hearts with a disciplined life style. If you would like to give me any feedback on how I could improve and add to the lifestyle advice given in the book I would be very happy to hear it.

As always, book publication is an endeavour that calls for support.

I want to thank a few persons, especially for this edition: my father Dr. K. S. Rawat, my sister Dr. Smita Premchander, my secretary Ms. Pragma Rimal and my friend, my patient and a great artist Mr. Bishnu Kumar Shrestha. It will not be an exaggeration if I say Dr. Smita is co-author of this book. She encouraged me to write and also reviewed each chapter carefully.

Mr. Basant Kumar Chaudhary, Chairman, Norvic International Hospital has been a great source of encouragement to me since last twelve years since I came to Nepal . His creation of Norvic Hospital has helped me to establish myself in this country and utilise my skills here. I am extremely thankful to him and the entire chaudhary family. Mr. R. P. Mainali is a wonderful, smiling, hardworking and humble person. I thank him for all his support. I also want to thank all my colleagues, co-workers as well as my patients and their family members. I find myself extremely lucky to receive tremendous love respect and encouragement from people of this wonderful country. Mr. Krishna Kayastha and Dr. Mrs. Pratima Kayastha need special mention as they supported on every step from the inception until the printing of this book. I remain thankful to them.

Finally thanks to Anjali Rawat, my wife and my two children-Kavya and Gaurav Rawat. My family allowed me to steal some time from their share to be able to write these chapters, so they have a contribution in this book and now share equally in the pride of it's production.

I do hope this book prompts its readers to live healthy and avoid sudden catastrophes in families.

Dr. Bharat Rawat

Kathmandu

Nepal

5th December, 2010

Publisher's Note

For a person who has grown to be more than a family member, Dr. Bharat Rawat continues to amaze us. Around the dining table, he will just drop the first morsel that he is about to eat when his 24/7 open mobile phone rings. It is an emergency and nothing will prevent him from rushing to the hospital. Every second counts as it is the matter of the Heart, he would say.

From the time we have known Dr. Rawat when he arrived in Kathmandu in 1998, he has grown and merged with the fabric of Nepali society very effortlessly. His fluency in Nepali, endearing personality and kindness that overflows with compassion juxtaposes beautifully his uncompromising professionalism. Many a lives have been saved just in the nick of time.

Whether treating a 23 year old or a 94 year old, Dr. Rawat points out three key parameters that a patient looks for more than anything else. Care, Respect and Time. All three he seems to have in abundance.

Moreover, Dr. Rawat has relentlessly pursued his interest in spreading awareness about healthy life style and stress management among the general people. He cautions that heart diseases are growing in Nepal, especially among people below 40. He welcomes the attention he receives for treating high profile patients to focus on the rise of heart diseases in Nepal and how to combat them.

We are very proud to push Dr. Rawat's agenda in spreading awareness of heart disease and its prevention by humbly publishing his book '**Healthier Life Style: Healthier Heart**'. We are sure many more people will benefit from the pages of his book which discusses how

to detect the first signs of heart disorders, true accounts by patients who survived heart attacks, how to lead a healthy lifestyle in true physical and spiritual sense and how to live life to the full despite an attack.

Next time around the dining table, the family hopes for an uninterrupted meal only to be disturbed by the familiar sound again.

Keep up the good work Dr. Rawat and best wishes.

Krishna C Kayestha

Pratima Kayestha

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CHEST PAIN: A Snake or Just A Rope ?

Almost all of us may experience some sort of chest discomfort sometime or the other. Few of us may dismiss the discomfort completely while others may start worrying too much imagining it to be the sign of the most fatal disaster! Yes indeed, it may be very confusing ... a deadly disease (a snake) or may be just a muscular sprain (a rope) !.

In fact, one of the most common complaint with which people visit hospital emergency rooms or clinics is chest pain. The very idea about the heart being present somewhere beneath the chest makes even the most confident and literate person feel extremely scared and nervous whenever there is a chest discomfort. And if the pain happens to be on the left side of the chest, then it may really take an extraordinary effort from the doctor to convince the patient that it may not be a heart pain! .I

see about a dozen patients everyday with similar complaints in my clinic and at least half of them are just in need of some reassurance. On the other hand, there are patients who take a



cardiac pain as “gastric” and suffer major heart attacks and complications. One needs to understand how a heart (cardiac) pain differs from non heart related (non cardiac) pains.

Even though a little more on left side, heart is essentially a central organ chest situated between the two lungs. Most of the heart related pains are in the form of Angina or heart attack. The location of pain or discomfort can be anywhere below the lower jaw down up to the level of belly button. It may even involve the left or right arm.



Occurrence of a **Heart Attack** is often pretty dramatic with severe sudden pain in the centre of the chest (mostly), feeling of heaviness, suffocation associated with uneasiness, nausea, sweating and often a sense of impending doom.

Less severe form of heart pain is called **Angina**. The key symptom is a chest pain or discomfort brought upon by physical exertion. The patient often describes that he feels no pain at rest or on milder forms of exercise, but the feeling of some discomfort starts the moment he tries to pick up speed or exertion. It often occurs while climbing stairs or walking briskly soon after a heavy meal. The discomfort may be very vague and difficult to explain – pain, constriction, suffocation, heaviness, burning and sometimes just a “gas” feeling. It is mandatory that this type of pain is not ignored and medical advice sought.

A person's profile is also important. Few people are clearly more likely than others to have heart related problems. Thus a young girl or a pre-menopausal woman is extremely unlikely to have a chest pain because of heart disease. On the other hand, an adult person with major risk factors like diabetes, high blood pressure, smoking, high cholesterol, or a family history of heart ailments has a much higher likelihood of having heart related problems. Such patients need more detailed evaluation.

Investigations may help. A normal ECG mostly (unfortunately not always) rules out a heart attack but cannot rule out the milder form of heart disease (angina). A Stress Test may help further in most cases. A Coronary Angiogram (injecting dye inside the blood vessels supplying heart muscles and noticing if there is any blockage somewhere) is required as the final test if the diagnosis still remains uncertain.

Pains unlikely to be heart related:

1. Localised to a small area (like a coin area) anywhere over chest.
2. Feels worse or better by putting pressure locally.
3. Becomes better on physical activities.
4. Occurs only while in bed.
5. Occurs only during deep breathing.
6. Occurs only under stress.



HIGH BLOOD PRESSURE: What Do You Need To Know About ?

High Blood Pressure (HBP) or Hypertension is the name of a condition in which blood pressure stays high for a long period of time. Persistent high blood pressure is undesirable because it puts undue stress on the heart, blood vessels and other organs.



Today in urban areas almost one third of adult population already has high blood pressure ! .According to WHO data, millions of people die each year because of high blood pressure (HBP) world wide. The risk increases with each decade of life. High BP increases the risk of stroke, heart attack, as well as damage to kidneys and eyes.

What causes high blood pressure?

Learning what causes hypertension can help realize whether you're at high risk. Even if you currently have normal blood pressure, knowing what contributes to hypertension will allow you to lower the risk with small changes in your lifestyle.

About 5-10 percent of patients have High Blood Pressure (HBP) because of a physical cause such as kidney disease. Treatment of the disease reduces the symptoms of HBP.

For the remaining 90 percent of patients, the exact cause of HBP is unknown. Though age, sex, family history, genetic and other factors cannot be modified, there are many factors which are important and can be suitably altered. Some of the more common contributors to HBP are:

Sedentary lifestyle: Exercise helps maintain normal blood pressure, but very few people take the amount of exercise they require to stay healthy. Normally 40 to 50 min. of brisk walk atleast six days a week should be done.

Smoking: Cigarettes contain nicotine and several many toxic chemicals. These raise blood pressure, making the heart labour to maintain blood flow. Moreover the drugs for decreasing blood pressure will not work well.

Weight gain: Extra weight increases blood pressure. Losing a few pounds is often the patient's first goal after being diagnosed with HBP.

Diet: Fats, cholesterol rich foods and salt can all raise blood pressure. Salt intake should be not more than half tea spoon a day (about 3 gm).

Birth Control: Many women have a slight increase in blood pressure while on birth control pills.

Alcohol: Heavy alcohol consumption has been linked to hypertension.

Stress: Stress is clearly related to elevated blood pressure. Determining stress sources requires you to take a hard look at how you live your life.

Heredity: Family history does play a role in hypertension and cardiovascular diseases. Genetics seem to be one of the important causes of high blood pressure; that's just something we have to live with. While you can't change your genes, you can change your lifestyle!.

Self-monitoring your blood pressure

You can check your own blood pressure at home by purchasing a monitoring device from a drug or department store. Many of the newer gauges are electronic and don't require use of stethoscopes. Periodically check your home readings against those your doctor takes to make sure your instrument is working properly. Prefer something that is put on your arm not the one to be tied on the wrist.

What are the Symptoms of HBP?

Unfortunately a person with HBP doesn't usually see or feel any clearly identifiable hypertension symptoms. That's why high blood pressure is such a dangerous condition. Patients can think that they have perfectly normal blood pressure until hypertension does its damage and they're suddenly confronted with heart problems, or even a stroke.

Although some patients complain of dizziness, headaches or blurred vision, most patients only discover HBP when their blood pressure is checked. By nature, HBP is a silent menace.

Classification of HBP in adults

The Blood pressure reading should be taken on two or more occasions under non-stressful conditions. The person should be fully relaxed and should not have consumed tea or coffee in the last 30 minutes. Blood pressure is measured as systolic pressure, the numerator, over diastolic pressure, the denominator.

	Systolic BP	Diastolic BP
Normal	<120 mm of Hg	<80 mm of Hg
Pre-Hypertension	120-139 mm of Hg	80-89 mm of Hg
Stage I Hypertension	140-159 mm of Hg	90-99 mm of Hg
Stage II Hypertension	=/> 160 mm of Hg	=/> 100 mm of Hg

Many people think it is normal for the elderly to have a blood pressure of 150-160 /90 -100. This is not true. At any age, a blood pressure of 140/90 or above needs proper treatment, often with medications.

Treatment options

In general, the closer your blood pressure is to the figure 120/80 the better it is for your health. Your doctor should decide whether or not you need a pill. First, you should take care of the above-mentioned lifestyle changes and avoid salt rich foods (like papad, chutneys, pickles, potato chips, salted popcorn and cheese). If despite all this your blood pressure remains 140/90, drug therapy is warranted. Certain groups like diabetics or heart disease patients require even more strict control of blood pressure. Many patients may need more than one pill. It is important to quit smoking for these pills to act effectively.

What is the best time to take the pills?

All anti-hypertensive medications should be taken early in the morning. Contrary to popular belief, our blood pressure is at its maximum during the early hours. Most heart attacks and strokes also occur during the early hours.

Side effects of Drugs ?

Patients are often concerned about the side effects of drugs. Fortunately most of the medications are very safe. However, a drug may occasionally cause swollen feet, dry cough or an asthmatic attack. If you do have any of these problems, report to your doctor and he may change the drug.

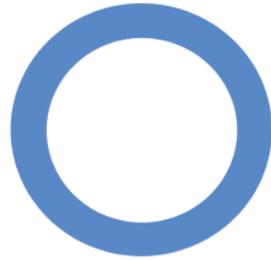
Is low blood pressure a problem?

If you have mild dizziness or weakness and have blood pressure of 90/60 mm Hg, you think it is because of low blood pressure. This may denotes temporary weakness, and can be solved by just lying down or taking some fluids. However, there is really no disease like chronic low blood pressure. This does not need any treatment. There are no drugs to increase your blood pressure !. Most people with low blood pressure are at a lower risk of developing any heart disease and hence, you need not feel anxious about it !



DIABETES: There are sweeter things in life than ugar !

Diabetes is a common disorder about which there are a lot of misconceptions. Many people do not want to accept that they have diabetes. And once they accept, there still persist several misconceptions regarding diet and treatment. Let us address these one by one.



What is Diabetes?

Diabetes is a disorder of the body's ability to use glucose, the main source of energy, which is carried throughout the body by the bloodstream. Normally the body's tissues absorb glucose and use it for energy with the help of insulin, a hormone produced by the pancreas. If the body does not have enough insulin or is unable to use the available insulin properly, glucose may build up to unhealthy levels in the bloodstream. There are two types of diabetes: Type 1 and Type 2.

Type 1 Diabetes is also called insulin-dependent diabetes mellitus (IDDM). This is the uncommon form, seen in young often thin built and always need insulin injections.

Type 2 Diabetes is also called non-insulin-dependent diabetes (NIDDM), a common form of adult onset diabetes. Type 2 diabetes is commonly linked to obesity, physical inactivity and age. People over 45 years are more prone to the disease. Patients with Type 2 Diabetes also may need Insulin injections.

How does Diabetes affect overall health?

People with Diabetes are at increased risk for heart attack, stroke, kidney and eye diseases and at increased risk for nerve damage. Diabetic individuals are more susceptible to other illnesses.

What are the symptoms of diabetes?

High blood glucose levels can lead to a variety of symptoms. The common symptoms are

Increased thirst (Polydypsia)

Increased Appetite (Polyphagia) &

Increased Urination (Polyuria)

Additionally, there may be weight loss, fatigue, blurred vision, slow to heal infections and impotence in men.

A simple urine or blood test can screen for diabetes in any person. Some people with diabetes show no symptoms, so if you are over 45 years of age and overweight or have a family history of diabetes, it is recommended to have blood sugar examinations done periodically.

How is diabetes treated?

The discovery of insulin in 1921 brought great relief to diabetics worldwide. Today diabetes can be managed and controlled with lifestyle modifications, oral medications or insulin, or a combination of the these. Lifestyle modifications for managing and controlling diabetes include maintaining a balanced diet (low in fats and oils, low in sweets, and high in fiber), eating regular meals and light snacks, lowering cholesterol levels, maintaining proper weight and engaging in regular exercise.

It's a common belief that rice and potatoes are totally forbidden for a diabetic person. This is not true. One just needs to avoid simple sugars and ensure that the total calorie content of food is



taken into account. While one should not cheat and stay away from the desserts, let there be no feeling of deprivation: there are sweeter things in life than sugar!

All Diabetes patients should:

1. Check their BP and Blood sugars at least weekly.
2. Check their lipids, eyes and urine at least 6 monthly.
3. See their doctors and get BP and other examinations done at least three to six monthly.
4. Walk for 4 to 5 km in one hour every day.
5. Not cheat on eating. Remember you are only cheating on your health and it can be dangerous!
6. Systematize their daily routine- get up early and have meals on time. Late evening parties and dinner or watching TV in the bedroom for long hours is not healthy living.
7. Do not try too many things to cure or manage your Diabetes by reading books, internet or advice from the TV. Follow things as suggested by your doctor.
8. Remember, your glucometer checks your capillary blood. This value is approx. 15% above the laboratory levels where your venous sample is checked.



SUGAR SUBSTITUTES: ARE THEY SAFE ?

“Sugar in the morning “

“Sugar in the evening”

“Sugar at suppertime....”



This lyric of a song describes well about our cravings! We South Asians may not be far behind from the average of American who consumes the equivalent of 15 to 20 teaspoons of sugar per day. But why all this fuss about the sugary business?

Sugar is necessary for our body. But in excess, sugary foods can take a heavy toll on our heart. Large quantities add up to surplus calories, which can contribute to weight gain. In order to lose weight, the total calories, from foods, especially sugars and fat must be decreased along with increased physical activity.

Sugar Substitutes

Existing studies show that sugars substitutes, also called artificial sweeteners, can help people maintain a weight loss by virtue of their strong sweetness and negligible calories content. Food and Drug Administration in USA has approved four sugars-substitutes: saccharin, aspartame, acesulfame-K, and sucralose- for the use in a variety of foods. However, two approved sugar substitutes, saccharin and aspartame, have

been the subject of ongoing controversy that, in the case of saccharin, dates back more than 20 years.

Aspartame came under fire in recent years from an isolated study which linked the sweetener to brain tumors and other serious disorders. But FDA stands behind its original approval of aspartame, and subsequent evaluations have shown that the product is safe.

The American Heart Association endorses use of saccharin by diabetics and those on weight-loss diets.

Century old tabletop sweetener

The granddaddy of all sugar substitutes is saccharin. Discovered in 1879, it was used during both world wars to sweeten foods, helping to compensate for sugars shortages and rationing. It is 300 times sweeter than sugar. Studies in 1972 and 1973 of rats fed saccharin raised concerns about the sweetener's role in causing bladder cancer, but data analysis later suggested that impurities, not saccharin, might have caused the tumours.

Saccharin has remained on the market and continues to have fairly large appeal as a tabletop sweetener, particularly in restaurants, where it is available, in single serving packets under trade names such as Sweet'n Low. Because it has a good shelf life, saccharin is used widely in fountain sodas, and its stability at high temperatures makes it an option for sweetening baked goods, unlike aspartame, which degrades when heated. Saccharin is also favored because it can be made inexpensively.

Is Saccharin Safe?

But given saccharin's containing tentative status, should consumers use it?. We know that there are studies suggesting that it may cause cancer in animals, but animal studies do not always predict the behavior of a substance in the human body. The National Cancer Institute, USA states in its "Cancer Facts" documents that "epidemiological studies do not provide clear evidence" of a link to human cancer. American Medical Association, The American Cancer Society and the American Dietetic Association, agree that saccharin use is acceptable.

The Aspartame Controversy

While questions about saccharin may persist, the safety of another artificial sweetener, aspartame is clear cut say FDA officials. Websites with screaming headlines and well-written text attempt to link aspartame consumption to systemic lupus, multiple sclerosis, vision problems headaches, fatigue and even Alzheimer's brain disease.

The FDA, along with many other health organizations such as the American Medical Association, challenges this, saying that there is no "credible evidence", to support, a link between aspartame and multiple sclerosis or systemic lupus. Aspartic acid also has the potential to cause brain damage at very high doses. FDA figures show that most aspartame users only consume about 4 to 7 percent of the acceptable daily intake the agency has set for the sweetener.

Still other reports attempt to link aspartame to seizures and birth defects. Approved in 1981, aspartame is 180 times sweeter than sugar. It is used in products such as beverages, breakfast cereals, desserts, and chewing gum, and also as a tabletop sweetener. Available as NutraSweet and Equal, more than 100 toxicological and clinical studies have reviewed confirmed that aspartame is safe for the general population.

Though sugar substitutes have a long history of controversy, the Calorie Control Council says health conscious the new generation is continually searching for good tasting, low calorie products as part of a healthy lifestyle. Market surveys show that calorie-conscious consumers want more low-calorie foods and beverages. And though artificially sweetened products are not magic foods that will melt pounds away, they can be a helpful part of an overall weight control program that includes exercise and other dietary restrictions.

In general, both saccharin and aspartame are safe when taken in moderation.



CORONARY ARTERY DISEASE: DIAGNOSIS & TREATMENT

Coronary Artery Disease (CAD)

CAD results because of deposition of fats inside the coronary arteries.

Our heart supplies blood to all the organs of our body. To be able to do so, it has powerful muscles which pump about 80 times a minute for our entire life. The muscles of heart themselves need a blood supply to get the required nutrients and oxygen. This blood is supplied through three coronary arteries. If the arteries have blockages, and when the blockage reaches 80-90%, it results into angina (chest discomfort on physical exertion). When there is a sudden complete occlusion of a coronary artery (100% blockage) it results into heart attack. The major risk factors of CAD are high blood pressure, diabetes, tobacco use, and high cholesterol.

Controlling High Blood Pressure

Complications of HBP are stroke, heart failure, renal failure and eye problems. Salt restriction, weight reduction, avoiding tobacco, doing aerobics, increasing intake of fruits and vegetables are advised to reduce BP. BP should be maintained around 120/80mm Hg and the drugs should not be stopped without consulting the physician.

Diabetes and Tobacco:

Diabetes increases the risk of heart failure as well as CAD. Patients with diabetes are two to five times more likely to develop heart attacks and heart failure.

Cigarette smoking is an important risk factor for CAD. The rate

of tobacco users is increasing among adolescents, young adults and women. Even among non-smokers, inhaled smoke, whether from passive exposure or from cigar and pipe consumption increases coronary risk. Cessation of cigarette consumption is the most important intervention in preventive cardiology.

Cholesterol:

Cholesterol is the fat component in the blood. It exerts harmful effect to the body if it's level exceeds the normal range in blood. It gets deposited on the wall (inner side) of the arteries causing narrowing of the affected arteries. If the affected arteries are significantly blocked, it leads to diseases like stroke. Cholesterol can be controlled with regular physical exercise, avoiding fatty, fried foods and eating fresh vegetables and fruits. There are also medicines to lower cholesterol, which should be kept below 200%, LDL below 100 mg%, TG below 150mg % and HDL above 45 mg%.

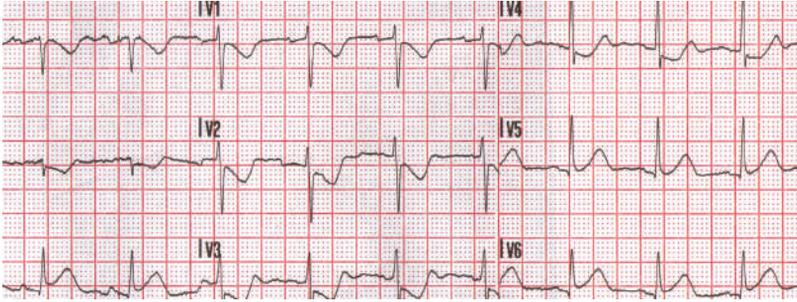
Heart Attack:

Heart is a muscular pump made of a special type of muscle and functions as a very important organ of our body. It pumps out blood received from different organs of our body into the lungs so that blood gets filled with oxygen and receives it back into the heart. The heart then pumps this “oxygen-saturated blood” to the whole body to provide oxygen and nutrition to each and every cell of the body.

When this special muscle of the heart dies suddenly due to lack of blood supply, a “heart attack” takes place. **Chewing two tablets of aspirin is the first-aid treatment for heart attack.**



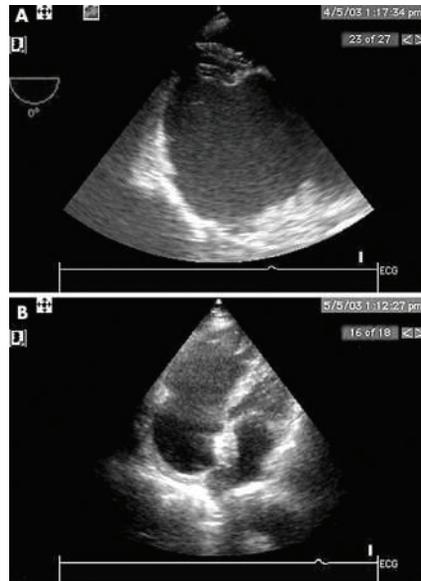
Electrocardiogram (ECG) :



ECG is the basic investigation done for initial evaluation. It immediately tells if there is heart attack or if the heart beat are abnormal. Patients should try to get ECG as soon as they have palpitation or chest pain. Normal ECG however does not rule out Heart Disease. The further investigation ECHO or Stress Test may be required.

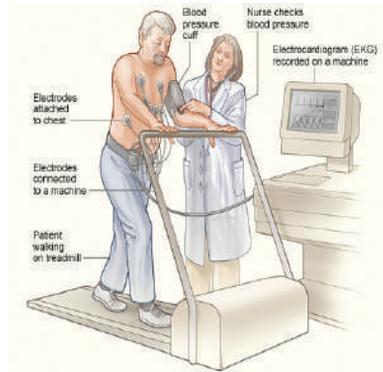
Heart- Echo :

An echocardiography is basically an ultrasound of the heart. It is a painless, non-invasive test to determine the anatomy and functional integrity of the heart. An echocardiogram can give us all the information about anatomical defects in the heart, whether present at birth or acquired later. A cardiac ultrasound is now an essential ingredient of almost all cardiac check-ups.



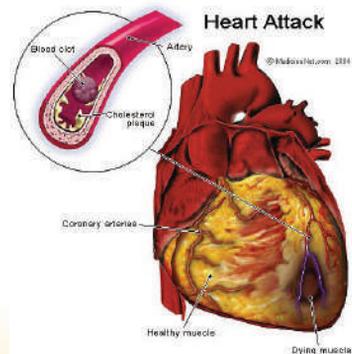
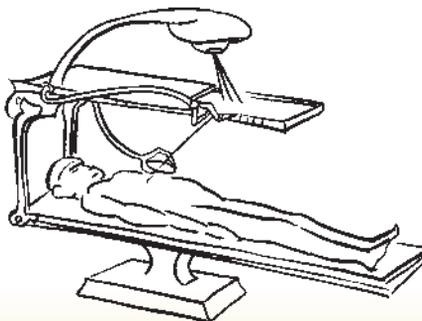
Treadmill Test (TMT) :

A treadmill test is used to determine indirectly whether the coronary arteries are open or not. In this test the patients is made to walk on a treadmill with ECG monitoring. The heart rate of the patient is increased to a certain limit during the exercise and specific ECG changes are duly observed. A TMT is basically a screening test and is not 100% accurate. In case a TMT is positive (i.e. abnormal) then a definitive test like coronary angiography is planned.



Coronary Angiography:

Coronary Angiography is a special x-ray technique where dye is injected into the arteries that lead to the heart (the coronary arteries). The test lets the doctors see the number, exact location and extent of narrowed or blocked coronary arteries. It takes about 15 - 20 minutes. Coronary angiography is routinely done in Nepal and many patients are checked and benefited everyday.



Coronary Angioplasty and stenting :

Coronary Angioplasty is a non-surgical procedure in which a specially designed balloon catheter is used to open a narrowed or blocked artery. The first human plain balloon angioplasty was performed in 1977. Many patients may develop restenosis (reblockage) after balloon angioplasty. Thus metallic coils (stents) were introduced to keep the artery open. The first stent angioplasty was performed in 1986. Stents are now available with a coat of medication; meaning that they emit medicines which prevent reclogging of the artery. The first medicated stent was approved by FDA in 2003. Medicated stents are expensive but now routinely used in Nepal.

Coronary Artery Bypass Grafting:

Coronary Artery Bypass Grafting (CABG) is a surgical method of restoring blood supply to the heart. CABG is performed when the arteries supplying the heart get blocked and it is not feasible to open them with the help of angioplasty. Most commonly a patient would need coronary bypass if he/she has multiple blocks in the arteries, or has blockage at the branching, long blockage or has blockage at the very beginning of the main artery.

The bypass procedure involves creating a conduit as an alternative to the blocked artery, to allow for smooth flow of blood. Usually, the conduits are made from the patient's own body. The most commonly used conduit (tube) is one from inside the chest called the internal mammary artery. Other options are use of artery from the forearm or the veins from the leg. There are different ways of doing CABG. It can be done with the help of a heart-lung machine and stopping the heart completely for the duration of the operation. Alternatively, it can also be done on a beating heart. All methods and techniques of CABG are now available in Nepal with results comparable with international standards.

It is important to remember that operation or angioplasty and

stenting for that matter, does not cure the disease. Patients must continue medicines and strictly modify lifestyle to minimize future events including graft blockage and other complications.

Cardiac Pacemaker:

Cardiac pacemakers are a set of implantable devices used when heart-rate stabilization is needed. Heart rate stabilization is a very crucial part of heart management. Normally heart rate is between 60-100 beats per minute. When heart rate falls below, say, 40 beats per minute, cardiac output falls below the minimum required for the brain to function and fainting (syncope), lassitude, giddiness can occur. If these symptoms occur when we are driving, crossing busy roads or climbing stairs etc., it may have catastrophic results. Cardiac pacemakers stabilize the heart rate by not letting it fall below 60 beats per minute.

Recently, there are certain special cardiac devices developed which are used to treat serious abnormal heart beating (ICDs) and congestive heart failure (biventricular Pacing).



HOW I SURVIVED MY HEART ATTACK ! A True Story



Message

With the extensive and intensive specialization of medical sciences, it has become rare for a man occupying a leading position to manage so much and at the same time provide valuable service to others. Such service demands not only strength, insight and reputation based on solid achievements, but also freedom from prejudice and a devotion to the common ends of all. I have met no one who combines all these qualities in himself so perfectly as Dr. Bharat Rawat. The marvelous thing about the effect of his personality is this: relentless flow of kindness and generosity coupled with a sure and intuitive understanding of people and patient, all blended with the true sense of pragmatism. When Dr. Rawat is in the vicinity, an atmosphere of cooperation and success is invariably created.

The secret of his success lies not only in his swift comprehension of the problem at hand, but above all, one feels that his whole heart is amalgamated with that of others, and when he gets to work, he has room for nothing else in his mind.

Dr. Rawat has devoted all his energies to the service of others, microscopically with personal involvement with patients and macroscopically by creating awareness among the community. I can determinedly spell out that this wise, humane, and modest personality, whose unspoken but faithful device of “not only mastery but also dedicated service” will lead others on the true and righteous path. His example contributes to the triumphs of the eternal spirit of service and devotion. His work and his example will have an impact on the inspirations of all those who come across him, and a blessing to all, now and for the generations to come.

If we people know Dr. Rawat as a sublime mind, our admiration and respect for him will be unique. But what I think of him is far more than that. He means more to me personally than anybody else I have met in my lifetime. He was my true savior at the time of dire need. During the period of my unfortunate suffering due to CI, he assembled his team for to perform PTCA. Just as he has command over his discipline of medicine; he has command of himself without effort and strain. He has no illusion of people and their affairs. He is extremely conscientious without allowing anything to assume undue attention and importance; a subtle humor guards him which is reflected in his eyes and smile. It is a great pleasure that someone walks among us at these turbulent and difficult times who opens his arms to all the needy, at all time, and for anything – a true crusader of healthy living and life. I thank him for it and God for the same.

I am happy to share my experiences through this book. It would be a guiding light to all.

Best Wishes !!



Professor Shakti S. Rana

Ph.D., M.B.A., B.E.

South Asian Institute of Management

Mr. Shakti S Rana writes:

5th June 6:00 pm

It was Tuesday, As usual I got on my bicycle and took a trip down town. After about five kilometers of ride, I was on my way home when I started feeling slight discomfort in the chest. The cycling was quite heavy that particular day because it was getting late and some guests had been invited for dinner. It could have been possible that heavy cycling was responsible for the slight discomfort.

6:30 pm

After reaching home, I tried to settle down. Slight discomfort in the chest and slight perspiration – it could have been a consequence of heavy cycling. But then the slight discomfort changed to heavy discomfort and pain, and heavy turned to very heavy, and perspiration began to get profuse. This was something very uncommon. Immediately I explained this to my son who was strumming his guitar nearby. My son immediately passed this information to his grandmother, who was then preparing for the evening prayers. She recognized something very uncommon has occurred and got me to be seated on a bed, provided some drinking water, and fanned cold breeze to comfort the pain, but to no avail.

6:35 pm

My sister, who is a doctor (gynecologist) arrived after being informed and noticed this very unusual situation. She instructed everyone to start our journey to the hospital, the nearest. Meanwhile, my brother -in -law who also arrived, suggested Norvic Hospital, recognizing the chest pain and suspecting some heart problem.

6:40 pm

The journey began from Baneshwor to Norvic Hospital which is a few kilometers away. It was raining heavily due to monsoon and the traffic was moving at snail's speed. The discomfort in the chest was almost unbearable and there was an opinion that some-where nearer would be the only resort. However, adamancy among family members made the journey continue and proceeded to Norvic Hospital.

6:55 pm

It was still raining and I was rushed to emergency. The emergency duty staff nurses, immediately informed the duty doctor, put me on oxygen and did an ECG.

7:05 pm

The doctor saw the ECG and asked me a few questions. A diagnosis of acute heart problem was confirmed. The doctor gave certain tablets (Aspirin) to chew and swallow and put me on oxygen. He then talked to my family members who had also arrived in the hospital, all in confusion, panic and severe stress. I could overhear the duty doctor explaining to my family members that I was having a major heart attack! My family members wanted only to save me. Then Dr. Rawat explained the option of taking me to a special theatre for emergency angioplasty. My family members just wanted the best!

7:20 pm

Soon I was surrounded by 4-5 nurses and doctors!. I was restless with pain and kept asking for immediate help! In next few minutes and I was moved to another room where the staff was there to console me all with smiles on their faces. Some injection was given on my right thigh. As already expected, a major coronary artery was found to be 100% blocked, starving my heart from needed blood supply. I later realized, each minute hundreds of my cardiac muscle cells were dying incapacitating the heart. In the following few minutes (as the doctor explained later) the blocked artery was crossed with a wire and opened with a balloon. Suddenly my pain began to decrease. I was sure of my survival !

7:40 pm

Finally, the pain had totally gone and I felt so comfortable that I told the doctor that I was fine enough to go home! However, he did not listen and I was taken to an intensive care room instead. Soon I was allowed to meet my family. My family members, though all smart, could not hide their eyes full of tears. I saw them thanking the doctor and the other staff for such a prompt and excellent service, and saving my life. It was indeed a rebirth of mine: a happy one!

I was discharged in perfect health on the fifth day. It's already more than two years now and I am physically active doing normal work comfortably.

I and my family have learned the importance of a prompt diagnosis and proper treatment in a situation of heart attack. I am very happy to have got such treatment.

Many of us may develop similar health emergencies. I managed to reach a hospital and I got immediate diagnosis and treatment. I was lucky to recover fast and completely.



ADVANCED TECHNOLOGY: AVAILABLE AND HELPING HEART PATIENTS



Approximately a million people in USA suffer a heart attack each year. And heart attack, world wide, is the leading cause of mortality and morbidity. Yet only few of these patients get proper and timely treatment. Less than half of the hospitals in USA are equipped with a facility of 24 hours emergency angioplasty.

Heart attack is a condition where sudden complete occlusion of a coronary artery occurs. This rapidly leads to death of increasing number of myocardial (heart) cells. More than two-third of heart attack related deaths take place out side the hospital, many within first few hours of the onset of symptoms.

Over last decade, many new technologies have developed in the treatment of heart attack and around the world the treatment strategies have changed. The most proper treatment of heart attack today is immediate administration of two tablets of Aspirin and then opening up of the blocked artery preferably using a balloon catheter and stent (Primary or Emergency angioplasty). The alternative method (which is only half as effective) is to inject some clot dissolving medicine as soon as possible.

Primary Angioplasty is an emergency treatment in which Coronary Angioplasty is done on heart attack patients as soon as they arrive in the hospital. Primary Angioplasty should be done within 90 mins of arrival to the hospital and within 6 to 12 hours of onset of pain for better outcome. Each minute's delay in the procedure may damage hundreds of heart cells.

Immediate angioplasty during a heart attack leads to early opening of the blocked artery without the risk of bleeding or stroke. Also, there is less risk of second heart attack, lesser risk of death, faster recovery and better quality of life later on.

However, Primary Angioplasty is not a practical option to all the patients. This is because it is expensive. Also the facility may not be available in many hospitals. If the facility is not available, the second best option is to give a clot-dissolving medicine.

Even though this technology is expensive, it is now available. It is important that people should know their options. Many patients who can afford it may not get the correct treatment because of the lack of scientific knowledge.



HEART ATTACK: Not the End of the Road ! (As you recover from heart disease)

In the aftermath of a heart attack, the shock and its sudden occurrence loads the patient with fear, anxiety and uncertainties about a normal healthy life. The individual falls into a state of hopelessness and often refrains from conducting life normally.

It is true that going through a heart attack is a big shock but it certainly is not the end of the road !. On the contrary, the patient should view surviving a heart attack as an opportunity. It is another day of promise, the chance to make the most out of the remaining part of your life !. Start by regulating life and help yourself to achieve a better quality of life than you had before!!.

Know about the disease

It is prudent to know all about your health related matters. You should ask your doctor in detail what exactly happened to you. A heart attack results from a sudden complete blockage of one of the coronary arteries supplying the heart muscles. The best remedy for such blockage is immediate opening of the artery using drugs or, even better, balloon angioplasty and stenting. The amount of damage or weakness produced in the heart depends on how rapidly the treatment is provided.

Now that you have survived, change your lifestyle !

Once you have received appropriate treatment for your heart attack, you are already on the road to recovery. To give the heart post-attack support, learn how you can keep away

from avoidable strains and pressures. Develop a regimen of healthy eating and exercising, and also seek advice from your cardiologist on how to keep fit. The more you know, the better you help yourself to carry on with life more positively.

We now know that a number of lifestyle related factors promote the risk of heart attack. Some of these can be altered to lower the risk, while others are not as controllable. Take for example the age or the genetic make up (family history) of individuals. These are some aspects that cannot be changed. But it does little good to lament on these. One should make a conscious effort to change for the better wherever possible.

Smoking, high cholesterol, blood pressure, diabetes, wrong eating habits and stress are factors that you can alter. They all contribute to heart disease. If you smoke, stop immediately. And when you have stopped, you will find that the food you eat tastes better, exercising becomes easier and stress levels subside.

Exercise is a good habit to form. As your body muscles receive better circulation, you'll actually start feeling younger, better, fresher, and lighter. Make light exercising a habit. You need not give up all your favourite culinary delights, but work on modifying eating habits and shun junk food. Go for low cholesterol food, less saturated fats and low-salt diets. Go for skimmed milk instead of full cream milk. Go for butter substitutes. Introduce more vegetables in food. Green leafy vegetables, sprouts, pulses, oats and garlic are some heart friendly foods. Avoid red meat and egg yolks. Egg whites, on the other hand, provide good protein, potassium, riboflavin and iron, and are free of cholesterol.

Appreciate support: It is indeed a family matter!

After a heart attack you start looking at yourself as a heart patient. There may be a situation when you also start feeling sorry for yourself. Remember there is more to life than self pity and that being miserable is also a new form of distress to add to your life.

Continue with a normal life with some regulations. Be independent, but take support where necessary. Remember the misery of your heart disease is not yours alone, but also of those who care about you.

Appreciate that those who are close to you are trying to understand the disease and its implications. They are as eager to accommodate to the new conditions as you are. Welcome them to join you in the process of recovery. Do it together and make a successful recovery program. It is advisable that your doctor should explain the implications of your disease and lifestyle changes required to you as well as to all important family members.

Psychological and philosophical aspects

I notice a huge change in the psychological and philosophical makeup of most patients as they recover from a heart attack or heart treatment.

Your faith in your doctor and yourself will help make the best of your life. Follow-up with your doctor regularly. Avoid discussing your health with too many people. Do not stop any medicine without your doctor's advice. Inspire your golden heart with new ideas and goals. There are



millions of people with heart disease, like you, who now live a fruitful and high quality life. After all, your own survival from the attack makes a good reason to lead a new and positive life

!!Make it a grand success !!!.



BELLY MAY WELL TALLY :

The High Risk of Heart Disease !!

Sick of the numerous, complicated check ups and the never-ending battery of investigations to detect early sign of heart disease? Hold on, there is something easier, simpler and cheaper! The best tool for predicting the risk of heart disease may be just a tape measure. Recent studies presented at a meeting of the American Heart Association emphasized that having a big waist may be a fast route to a heart attack or serious heart disease.

Cardiologists have been routinely checking cholesterol levels, blood pressure, obesity and other tests to measure the risk of heart disease which is by far the number one cause of death in many countries. Smoking and high blood pressure remain the greatest cause of death from heart disease. The next is obesity. Statistics have also started to show clearly that where fat is deposited on the body is an important indicator of risk of heart disease - an “apple” shape with fat in the middle is more dangerous than a bottom heavy “pear” shape.

A study was conducted on 7,000 middle-aged French policemen who died of heart attacks or other sudden heart problems between 1967 and 1984. The study recorded waist circumference and body mass index (BMI) - a ratio of weight to height that has been used globally to tell if someone is overweight or obese. The study revealed that men with pot bellies were more likely to die suddenly. The risk of sudden death increased with abdominal density. People with higher BMI were not any more likely to die suddenly unless they also had a big waist. In the

case of men, a 37-inch (95cm) waist seems to be the dangerous cut-off point. For women the risk starts at 33 inches (83cm).

Another interesting study was done on 2,000 American adults (45 years and older) who were subjected to several measurements of fatness, including waist circumference, neck circumference, body mass index and skin-fold thickness on the arms and waist. This study also confirmed that people who had fat in the center of the body were more likely to have a specific heart condition called left ventricular diastolic dysfunction which is a measure of how well the heart is functioning. On the basis of an analysis of the body profile of the dead over five years, the study found that those with poor diastolic functions and with large waists are at a higher risk of death. It was concluded that “instead of measuring weight, height and body mass index, it may be better to measure waist circumference or even neck circumference”.

A third study completed a few years ago, “Inter Heart Study”, is the largest research project done to assess the risk factors for developing heart attacks. It was conducted in 52 countries including Nepal, with data from Tribhuvan University Teaching Hospital and Norvic International Hospital. It clearly confirmed the importance of the waist hip ratio (rather than simple weight or BMI) in making a person prone to develop a heart attack.

To Measure your Waist Hip ratio

Waist: Measured at the level of umbilicus (the belly button).

Hip: measured around the largest part of your hips.

Desirable Values: males – less than 0.9, Females – less than 0.8

If the ratio is more than the indicated ones for you, then you need to seriously consider starting on a weight control programme.

Manage your weight

You should know your desirable weight for an adult it can usually be acquired by simple equation: Height in centimeters-100= Approx. desirable weight in Kg.

For instance, if you have a height of six feet, which is equal to 183 cms, your weight should be around 83 kg. Now if you weigh 93 kgs, you need to reduce 10 kgs to get to your ideal weight. Similarly, if you are 5 ft tall (152.4 cms), and your weight is 67 kgs, then you need to target weight reduction of about 14 kgs.



Weight management includes eating and activity habits that reduce your risk to certain diseases. Normally, cardiovascular endurance and muscle strength decline after the age of 30. You can slow the speed of decline by being physically active. We do not even realize how inactive we become as we grow. With growth in age, career, and wealth we require to be less physically active in office or at home in our day-to-day life. Thus we need to make a conscious effort to burn calories! This will include an exercise program and an active daily life. Regular exercise can decrease blood cholesterol, triglycerides, blood sugar, and other risk factors for diseases.

Aim to be physically active every day. You can be fit even if you are overweight or obese. In a study of more than 25,000 volunteers, researchers found that a person's fitness level was a stronger predictor of death risk than was body weight itself. In this study, overweight or obese men who were physically fit, had a lower death risk than men who had a healthy weight but were not physically fit.

The recommended activity level for adults is 40 to 50 minutes of physical activity on most days. Eating regular meals is an important part of a healthy diet. Eat at least three to five small meals a day to spread your intake of food throughout the day. Don't skip meals. You will be more likely to overeat during the next meal. Planned timely meals tend to be more balanced than food grabbed on the run.

Types of Food

Eat low-fat foods. A diet with less than 20 percent of calories from fat will help you manage your weight and reduce your risk of heart disease, high blood pressure and diabetes. Don't forget that the total calories you eat are still an important part of managing your weight. Do not indulge in high-fat foods that contain sugar as these only add calories but may not add much nutrition to your diet. Eat food with high iron and calcium content. If you are women of childbearing age, be sure you get plenty of folic acid in your diet to reduce your chances of having a child with birth defects. If you drink alcohol, drink moderate amounts; no more than two drinks a day for a man or one drink a day for a woman. Remember that alcoholic drinks are rich in calories. They have in fact "Empty calories", (meaning, having calories with no vitamins or essential nutrients.). Drinking excess alcohol increases abdominal fat, increasing your risk to heart disease and type-two diabetes.

Change for life

If weight loss is one of your goals to improve your health, it is not necessary to lose all your excess weight to improve your health. Research shows that significant improvements in health can be achieved by losing as little as five to 10 percent of your weight. A reasonable time to plan for losing 10 percent of your body weight is six months. If you are obese, you can reduce your caloric intake by 300 to 500 calories a day and lose up to half a kilogram a week. Losing weight slowly will help retain your reduced weight. After six months of weight loss, you will

likely find that losing additional weight is not as easy. This is because your body has adjusted to the new weight and is conserving more energy. You will need to continue your weight management program else or you may simply gain the weight back!!

Manage stress and prevent relapse

Believe in your ability to change and keep reminding yourself of your new health goals. Monitor the changes you are making in your life. Here are some additional tips to help you be successful in making and maintaining changes that you can follow for the rest of your life.

You may find it helpful to seek professional counseling, especially if you think you have emotional issues or are depressed. A qualified dietician can help you learn more about the food guide pyramid and setting up a healthy food plan for yourself.

Reward yourself for small accomplishments, rather than waiting until you have completely reached your goal. Treat yourself to a movie, new music CD, an afternoon off-work, or an hour of quiet time. Rewarding yourself for small achievements along the way will help stay focused on your goals!

Belly may well tally !

There is enough data to support the fact that abdominal or central obesity has a direct link with heart related problems. May be your tailor knows more about your risk of developing heart attack than your cardiologist does ! .So, pick up a tape now and measure your waist. It should be slimmer than circumference around your hips. If it is not, start working on it from today. After all – prevention is always better than cure !!



SATURATED FATS: Best Avoided !!



Cardiovascular diseases have become an increasingly common cause of deaths in South Asian countries. Apart from diabetes, high blood pressure and smoking, high cholesterol levels are other important causes of early heart attack. Cholesterol is a waxy fat that is present in all human beings.

Good and Bad cholesterol

High levels of Low Density Lipoprotein (LDL) cholesterol (bad cholesterol) have been associated with hardened arteries (atherosclerosis) and coronary artery disease. In contrast, high

levels of High Density Lipoprotein (HDL) cholesterol (good cholesterol) have been shown to reduce some of the harmful effects of LDL cholesterol.

About two-thirds of the adult population coming to Norvic International Hospital & Medical College for their health check up are found to have higher than desired levels of total cholesterol or Triglycerides.

The medical term for an excessive amount of cholesterol in the blood is hypercholesterolemia. It is one of the greatest threats to health. It is not only a major contributor to the development of hardened arteries, but it can also lead to a certain type of chest pain called angina, a heart attack or even a stroke.

Desirable Level

Total Cholesterol	Less than	200 mg%
HDL Cholesterol	More than	40 mg%
LDL Cholesterol	Less than	100 mg%
Triglyceride	Less than	150 mg%

What causes abnormally high cholesterol levels?

The cholesterol value in the human body can rise to abnormally high levels when someone eats a diet high in saturated fats or trans fat – especially when that person is obese and/or rarely exercises.



Trans fats not only increase levels of bad LDL cholesterol but also decrease good HDL levels. This is especially worrisome, because transfats (which prolong the shelf life of processed foods) are common ingredients in potato chips, deep-fried and fast foods and other snack foods.

High cholesterol levels can also be caused by a number of different genetic conditions. The most widespread inherited cholesterol disorder is familial hypercholesterolemia (FH) and people with FH are at a high risk of an early heart attack. If FH is suspected, all family members including young children should have their Lipid profiles checked.

Who should go for screening?

Regular cholesterol screenings are important. The National Cholesterol Education Programme recommends both males and females of adult age have their lipid profile checked regularly. People with diabetes, obesity, or a family history of heart disease and elderly people should be screened annually. Even children can benefit from having their cholesterol checked, because it is one way to identify factors that may adversely affect of their heart's health as they grow. It has been reported that approximately 5 million children in the United States have high cholesterol levels.

Treatment Options:

Research studies have concluded that for every one percent reduction in blood cholesterol level, the risk of coronary heart disease decreases by as much as three percent. Avoiding red meat, egg yolk and dairy products are the main dietary recommendations. One should do regular aerobic exercise for about 40 minutes a day and try to maintain a desirable weight. Still, if blood levels are not optimal, one should seek a doctor's advice regarding the need for medications. Most genetic cases will need long term medications.



LET'S GO VEG !

“The beef industry has contributed to more American deaths than all the wars of this century, all natural disasters and all automobile accidents combined. Dr. N D Barnard, MD, President, Physicians Committee for Responsible Medicine, Washington DC once commented: “If beef is your idea of ‘real food’ you better live real close to a real good hospital.”

A poll survey of more than 5,000 respondents in USA was done in year 2008, and the result was published in the “Vegetarian Times”. It revealed about 8 million people in USA are now vegetarian and another 12 million are “definitely intending” to become vegetarian in future. This study also indicated that over half of vegetarians eat vegetarian diet to improve overall health. Economic concerns were cited by 47%, while 53% cited animal welfare.



Health Concerns

Many people eliminate animal foods from their diet because of health concerns. According to a study in China, the vast majority of cancers, cardiovascular diseases and other forms of degenerative illness can be prevented until very old age simply by adopting a plant-based diet. Study after study has proven that consumption of animal foods has been linked with heart disease, cancer, diabetes, arthritis and other illnesses. Another health hazard is that animals are routinely given growth hormones, antibiotics and even pesticides, which remain in their flesh and are passed on to meat eaters.

All red meat contains saturated fats, and there is no such thing as truly lean meat. Trimming away the edge ring of fat around a steak really does not lower the fat content significantly. People who have red meat as a regular part of their diet suffer in far greater numbers from heart attacks and strokes.

In developing countries like ours the lack of hygiene and improper storage of meat products is another great risk to the consumer's health.

Animal welfare

Many people become vegetarians out of concern for animal welfare. In today's factory farms, animals often spend their entire lives confined to cages or stalls barely larger than their own bodies. Death for these animals doesn't always come quickly or painlessly. Slaughter-house employees often resort to unbelievable brutality. Every year nearly ten billion animals are killed for food in the United States alone.

Reducing health risks and eliminating animal suffering are reasons enough to go the vegetarian way: adopting a plant based diet can also help the environment and feed the hungry.

Ecological Arguments

Not much data is available from Nepal and other developing countries. However in 1996 alone, U.S. Factory farms produced 1.4 billion tons of animal waste, 130 times more than humans did. The waste produced in a single year would fill 6.7 million train boxcar, enough to circle the earth 12 times. Unfortunately, much of this waste ends up in our rivers and streams.

Raising animals for food is also taking its toll on the world's forests. Since 1960 more than one-quarter of the rain forest in Central America has been destroyed to create cattle pastures. Rain forests are vital to the survival of the planet because they are the earth's primary source of oxygen, and scientists are increasingly exploring the use of rain-forests plants in medications to treat and cure human diseases.

“When we kill animals to eat them, they end up killing us because their flesh, which contains cholesterol and saturated fat, was never intended for human beings.” –William C Roberts MD, Editor of the American Journal of Cardiology.

Humanitarian Concerns

Everyday 840 million people around the world, including 200 million children, go hungry. But much of the world's grain harvest, 40 percent, is used to feed livestock, not people. Raising animals for food is much less efficient than growing vegetables, grain or beans. For example, a cow grazing on one acre of land produces enough meat to sustain a person for two and a half months; soybeans grown on that same acre would nourish a person for seven years. Many researchers believe that vegetarianism is the only way to feed a growing human population. A population reference bureau report states, “if everyone adopted a vegetarian diet and no food was wasted, current (food) production would theoretically feed 10 billion people, more than the projected population for the year 2050.”

Future Prediction

One cannot predict the end of all meat eating. Decades from now, cattle will still be raised, perhaps in patches of natural rangeland, for people inclined to eat meat, while others will make exceptions in ceremonial meals on special days like Dashain and Tihar, which link us ritually to our evolutionary and cultural past. But the era of mass-produced animal flesh and its unsustainable cost to human and environmental health should be over before the next century.

Much as we have awakened to the full economic and social cost of cigarettes, we will find we can no longer subsidise or ignore the cost of mass-producing cattle, poultry, pigs, sheep and fish to feed our growing population. This cost includes the hugely inefficient use of fresh water and land, heavy pollution from livestock faeces, rising rates of heart disease and other degenerative illness and spreading destruction of forests on which much of our planet's life depends.

Around the world, as more water is diverted to raising pigs and chickens instead of producing crops for direct consumption, millions of wells are going dry. India, China, North Africa and the US are all running fresh water deficits, pumping more from their aquifers than rain can replenish. As populations in water-scare regions continue to expand, governments will inevitably act to cut these deficits by shifting water to grow food, not feed. The new policies will raise the price of meat to levels unaffordable for any but the rich.

There are lots of things each of us can do to make the world a better place. However, eating vegetables is possibly the most effortless and enjoyable way to have a profound impact every day.

As many far-reaching effects of our foods choices come to light, awareness about eating a vegetarian diet continues to grow. So try veggies for your next meal.

Reasons to go VEG !

- Reduces risk of chronic degenerative diseases such as heart disease, cancer, diabetes, obesity, osteoporosis.
- Greater likelihood of meeting dietary recommendations for percentage of fat, carbohydrate and protein than in a typical omnivorous diet.
- Less exposure to pesticides and other toxins such as dioxins which is usually found in meat products.
- A reduced impact on the environment.
- Life span of vegetarians are longer than non-vegetarians.
- Fewer ketones (protein-digestive substances) formed when vegetable protein is digested.
- Vegetarians have lower cholesterol levels than those who eat meat.
- Animal products are high in sodium which is a major cause of high blood pressure.
- A well balanced vegetarian diet is just as nutritious as any omnivorous diet.
- Vegetables taste better, smell better and look better on a plate than pieces of animals.



PANIC DISORDERS: Let's Not panic !

Many patients visit emergency rooms of various hospitals for something that later turns out to be more of a psychological problem. Panic disorder is one such condition which makes the patient and their family members and sometimes even the emergency room staff worried and confused.



One study found that panic disorder patients sometimes see 10 or more doctors before being properly diagnosed, and that only one out of four patients with this disorder receive the treatment they need. That's why it is important to know what the symptoms are and to make sure you get the right help.

How to identify Panic Disorder?

Panic Disorder is indeed a serious condition that around one out of every 75 people might experience. It usually appears during the teens or early adulthood, and while the exact causes are not clear, there does seem to be a connection with major life transitions that are potentially stressful, such as graduating from college, getting married, having a first child, death of a loved one and so on.

Panic Attacks: The hallmarks of Panic Disorder

A panic attack is a sudden surge of overwhelming fear that comes without warning and without any obvious reason. It is far more intense than the feeling of being 'stressed out' that most people experience. Symptoms of a panic attack include:

- Racing heartbeat
- Difficulty in breathing, feeling as though you can't get enough air'
- Terror that is almost paralyzing
- Dizziness, lightheadedness or nausea
- Trembling, sweating, shaking
- Choking, chest pain
- Hot flushes or sudden chills
- Tingling in fingers or toes ('pins and needles')
- Fear that you're going to go crazy or are about to die

A panic attack is not dangerous, but it can be terrifying, largely because it feels 'crazy' and 'out of control.' Panic disorder is frightening because of the panic attacks associated with it, and also because it often leads to other complications such as phobias, depression, substance abuse, medical complications, and even suicide. Its effects can range from mild social impairment to a total inability to face the outside world.

Many people experience occasional panic attacks, and if you have had one or two such attacks, there probably isn't any reason to worry. The key symptom of panic disorder is the persistent fear of having future panic attacks. If you suffer from repeated (four or more) panic attacks, and especially if you have had a panic attack and are in continued fear of having another, these are signs that you should consider finding a mental health professional who specialises in panic or anxiety disorders.

Can people with Panic Disorder lead normal lives?

The answer to this is a resounding YES – if they receive treatment.

Panic disorder is highly treatable. Many therapies are available, which are extremely effective. However, most people who have successfully completed treatment can continue to experience situational avoidance or anxiety. Further treatment might be necessary in those cases. Once treated, panic disorder doesn't lead to any permanent complications.



LAUGHTER: The Best Medicine !

Osho once said, “You don’t see donkey laughing, you don’t see buffaloes enjoying a joke. It is only man who can enjoy a joke, who can laugh. Your saints are like buffaloes and donkeys! They have fallen below humanity; they have lost something of immense value. Without laughter a man is like a tree without flowers. A sense of humor is one of the very essentials of intelligence.”



Now even medical science says that laughter is one of the strongest medicines nature has provided to man. If you can laugh when you are ill, you will get your health back sooner. If you cannot laugh, even if you are healthy, sooner or later you may lose your health!

Therapeutic benefits of laughter

Dr. Lee Berk and fellow researcher Dr. Stantley Tan of Loma Linda University in California have been studying the effects of laughter on the immune system. To date their published studies have shown that laughing lowers blood pressure, reduces stress hormones and boosts immune function by raising levels of infection-fighting T-cell, disease-fighting proteins called Gamma- interferon and Beta cells, which produces disease-destroying antibodies. Laughter also triggers the release of endorphins, the body’s natural painkillers and produces a general sense of well-being.

Laughter activates the immune system

In Brek's study, the physiological response produced by belly laughter was opposite of what is seen in classical stress, supporting the conclusion that mirthful laughter is state that produces healthy or positive emotion.

Research results indicate that, after exposure to humor, there is a general increase in activity within the immune system and the body remains ready to fight against many diseases and infections.

Laughter decreases "stress" hormones

The result of the study also supported research indicating a general decrease in stress hormones that constrict blood vessels and suppress immune activity.

For example, levels of epinephrine were lower in the group both in anticipation of humor and after exposure to humor. Epinephrine levels remained down throughout the experiment.

In addition, dopamine levels were also decreased. Dopamine is involved in the fight or flight response" and is associated with elevated blood pressure.

Laughing is aerobic, providing a workout for the diaphragm and increasing the body's ability to use oxygen. Laughter brings in positive emotions that can enhance - conventional treatments. Hence, it is another tool available to help fight the disease.

Experts believe that when used as an adjunct to conventional care, laughter reduce pain and aids the healing process. In any case, laughter offers a powerful distraction from pain.

In a study published in the Journal of Holistic Nursing, patients were told one-liners after surgery and before painful medication was administered. Those exposed to humor perceived less pain when compared to patients who didn't get a dose of humor as part of their therapy.

Perhaps, the biggest benefit of laughter is that it is free and has no known negative side effects! So next time someone around you cracks a joke how so ever sick it might be, please do laugh loudly. Loud laughter at least ten times a day will certainly keep you young and healthy.

BE CALM: Leave Anger to Live Longer !

Anger is a normal human emotion; but uncontrolled can be dangerous not just to others but to yourself too. We can all learn to take a 'time out' before expressing our anger. This will not only reduce the incidence of child abuse, domestic violence and other social problems, but can also be good for our health. Research suggests that dealing with anger by either holding it in or, on the other extreme, exploding into a rage can be hazardous to your cardiovascular system.



This article views the available research linking anger to heart attacks and stroke.

Think back on a time when you were really angry. Recall how you felt – was your heart beating faster, your face flushed with fury these are actual physical changes that occur when you are angry. Your heart beats faster, you might clench your teeth or your fists and your blood pressure goes up. All these could be contributing factors to high blood pressure which is a major factor for stroke. Also while you are angry, the arteries supplying oxygen-rich blood to your heart also narrow, and your blood is stickier” (more viscous) and more likely to form

dangerous blood clots. Blood clots could lead to a heart attack or stroke. Thus while you were angry on someone but you might be doing more harm to yourself !.

In addition, chronic anger and/or hostility have been linked to other unhealthy lifestyle habits, such as cigarette smoking, alcohol abuse and poor diet. This only adds to the risk of developing heart disease. Learning anger management techniques could help reduce the stress on your cardiovascular system and ultimately save your life.

Anger and heart attacks

Research suggests that the healthiest way of dealing with anger is to express it calmly, rather than exploding or attempting to conceal it. People more likely to “blow up” over minor inconveniences, or who fell angry almost all the time, appear to be at greater risk of heart disease and/or heart attacks. Research has demonstrated a clear link between anger and cardiovascular health. A recent ground breaking study (completed in year 2004) found that anger and frustration can provoke abnormal heart rhythms (arrhythmia), which can lead to sudden cardiac death. Scientists discovered that mental stress caused arrhythmia more quickly than physical stress (e.g. exercising) in people with an implantable cardioverter defibrillator. This study was the first to show that mental stress alone can trigger arrhythmia, and researchers hope future will help identify personalities at higher risk for developing abnormal cardiac rhythms.

Anger plays a strong role in the gradual development of heart disease. One study found that men who bottled their anger had 75 percent higher chance developing coronary artery disease than men who vented or talked through their anger. Anger was also linked to high blood pressure.

According to some studies, people with the most intense levels of anger had three times greater risk of a heart attack and/or type of chest pain called angina than people with the least intense anger level. The risk was especially high for people who

became angry enough to want to break things or to physically strike out at someone.

The damaging effects of anger may accumulate over time. An year 2002 study found that heart attacks appear to increase in those who respond to stress with high levels of anger, either expressed or concealed. The study was notable because it focused on young men and followed them for 48 years.

Anger and blood pressure

There are many physical changes that accompany anger, including increase heart rate and blood pressure. While these changes are usually temporary, prolonged or frequent periods of anger could, over time, contribute to the development of high blood pressure.

Research has found that people who are generally more hostile seem to experience more intense anger than less hostile people. Also those more hostile people appear to hang on to their anger for longer periods of time. This corresponds to a higher and longer rise in blood pressure while angry for people prone to hostility.

Anger and stroke

Research on anger and strokes suggest that direct and calm expressions of anger may be healthier than chronic anger/hostility or pent-up, unexpressed rage. Other studies suggest that even lower levels of negative behaviour can impact heart and brain health. For instance, a study found a significantly higher risk of heart disease and stroke for people with impatient, irritable and/or dominant personalities (shown by interrupting other people, for example) as compared to more patient personalities.

Doctor's advise: Avoid Anger, stay calm and enjoy life. Live healthy and live longer !



Alcohol and Heart

Every doctor has been asked on several occasions: “Is alcohol good for the heart”?

Several observational studies have shown that people who consume alcohol in moderation have less chance of a heart attack. Many of them were regular consumers of a relatively fixed amount of red wine. It was also



observed that red wine consumption decreases the chance of blood clotting (anti-platelet activity) and increases the blood level of good cholesterol (HDL) which in turn decreases the risk of heart attack. This was the reason why death through heart disease was much lower than expected in France. This applies not only to alcohol but other forms of liquors as well when consumed in moderation !.

Possibly with other forms of liquor, one is less likely to be moderate and more likely to indulge in smoking and fatty snacks. This may be one of the reasons, why people consuming red wine (approx. 150 ml a day) appear to benefit more.

Interestingly, women were found to have more benefits from wine drinking than men. Further studies are needed to test whether women are more responsive to the benefits of wine (or alcohol) or if they are more likely to drink lower amounts, thus taking its maximal advantage.

There are other issues about alcohol. One needs to realize that even if there is a protective role of alcohol on heart, there are other organs too in our body to be taken care of !. Alcohol in excess has deleterious effects on blood pressure, stomach and liver; it increases uric acid as well. If taken in excess, it can cause mental disturbances, behavioral changes, abnormal heart beats and even heart failure. As explained earlier, not many people consume alcohol with salad !. We need fatty and salty snacks with alcohol. Even those who do not smoke otherwise, often tend to smoke when taking alcohol. This package deal may be more harmful than the alcohol itself.

On the whole, there is no reason to advice one to stop alcohol consumption if one is consuming say one or two drinks 4 or 5 days a week and has normal BP, heart and liver functions and has no uric acid or acid peptic (“gastric”) disease . Yet, the American College of Cardiology has advised doctors not to advice alcohol to prevent heart disease.

Alcohol benefits people (and society) in some ways and devastates them in others. It is associated with some 100,000 deaths a year from disease and injury—more than the number of deaths from heart disease that it may prevent !

Should anybody start drinking for heart benefits?

No. There is so much that can be done on other fronts to reduce risk of heart disease. Alcohol can be so addictive that it is not worth the risk of starting !. If you don’t drink, for whatever reason, don’t feel tempted to start for health reasons. There are better ways to prevent heart disease: following a heart-healthy diet, exercising regularly, not smoking, keeping your blood pressure under control, and losing weight if need be. On medical advice, you may also want to take low-dose aspirin and, if necessary, a cholesterol-lowering drug. If you already drink moderately, you are probably getting some additional benefit. But do consider your age, sex, and presence of any preexisting disease history. Remember that “moderation” for a woman means no more than one drink a day, and two for a

man. If you are past 65, you should cut that amount to half. You should avoid drinks if you have any stomach or liver disease.

What are the dangers of drinking too much?

Drinking too much alcohol is one of the most common causes of hospital admission in the UK. Drinking more than the recommended limits can have a harmful effect on the heart. It can cause abnormal heart rhythms, high blood pressure, as well as damage to the heart muscles. It can also lead to other diseases such as stroke, liver problems and some cancers. Alcohol is also high in calories so it can lead to weight gain. The calorie content of different alcoholic drinks is given in the accompanying table.

Calories in selected Alcoholic Beverages

Beverage	Serving volume (One drink)	Approximate Total Calories
Beer (regular)	12oz (360ml)	150
Wine	5oz(150ml)	100
80 proof distilled spirits (gin,rum,vodka,whiskey)	1.5oz(45ml)	100

So if you are trying to lose weight, cut down on alcohol.

How much can I drink?

If you drink alcohol, it is important to keep within the guidelines:

- Men should not drink more than 2 drinks of alcohol in a day.
- Women should not drink more than one drink of alcohol in a day.

These guidelines apply whether you drink every day, once a week or occasionally. If you cannot save up during the week, and have an accumulated number on weekends !.

There is also some support for the speculation that drinking with meals may be more beneficial.

How much is “One Drink” ?

The official definition of a “drink” is 12 ounces of beer, 4 to 5 ounces of wine, and 1.5 ounces of (80-proof) spirits. Moderate intake is no more than one drink per day for a woman or two drinks for a man. Most studies have found that people who drink this much have the lowest overall death rate—lower than nondrinkers, occasional drinkers, and heavy drinkers.

In most parties, hosts do not serve standard-sized drinks, and what is served as one drink actually may be the equivalent of two or even three. Most people are pleased to be served generously. When at home, we mostly serve wine or spirits without measuring. It might be instructive to measure and see how close you come to the standard serving sizes. That will give you some idea, too, of how much you’re getting in parties at other places.

Elderly (above 65years) and women should limit their drink to minimum. Their body cannot process alcohol as well. Elderly also loose their bone density because of alcoholic drinks.

Who all should steer clear of alcohol?

1. If you are pregnant, trying to conceive, or nursing, you should abstain. Alcohol harms the foetus and the nursing infant, and is a leading cause of birth defects and mental retardation.
2. Anyone who is unable to drink moderately. This includes recovering alcoholics and possibly those with a strong family history of alcoholism.
3. Anyone taking sedatives, sleeping pills, antidepressants, or anticonvulsants should get medical advice about

whether these drugs can be safely combined with alcohol. Alcohol can interact with many other medications, too, including over-the-counter pain relievers. When you get a new prescription, ask whether it's okay to drink. With nonprescription medication, read the label carefully and abstain if necessary.

4. Don't drink if you are planning to drive or operate machinery within the next few hours. If you have had a drink, don't get behind the wheel.
5. Don't drink if you have uncontrolled hypertension, high blood levels of triglycerides, abnormal heart rhythms, peptic ulcers, jaundice, habit of heavy snoring or sleep apnea. If diagnosed with any disorder, talk to your doctor about the advisability of drinking.



SMOKING: The Biggest Killer !

Most people associate cigarette smoking with breathing problems and lung cancer. But smoking is also a major cause of cardiovascular (heart and blood vessel) disease. In fact smoking is the number one cause of preventable diseases and deaths !.

Smoking and tobacco use are significant risk factors for a variety of chronic disorders. According to the American Heart Association, cigarette smoking is the most important preventable cause of premature death in the United States.



What's the link between smoking and cardiovascular disease?

Smoking is a major cause of atherosclerosis—a build-up of fatty substances in the arteries. Atherosclerosis occurs when the normal lining of the arteries is diseased, the walls of the arteries thicken, and deposits of fat and plaque block the flow of blood through the arteries. In coronary artery disease, the arteries that supply blood to the heart become severely narrowed, decreasing the supply of oxygen-rich blood to the heart, especially during times of increased activity. Extra strain on the heart may result in chest pain (angina pectoris) and other symptoms. When one or more of the coronary arteries are completely blocked, a heart attack (injury to the heart muscle) may occur.

In peripheral artery disease, atherosclerosis affects the arteries

that carry blood to the arms and legs. As a result, the patients may experience painful cramping of the leg muscles when walking (a condition called intermittent claudication). Peripheral artery disease also increases the risk of stroke.

What's the link between smoking and heart attack ?

A person's risk of heart attack greatly increases with the number of cigarettes s/he smokes. Smokers continue to increase their risk of heart attack the longer they smoke. People who smoke a pack of cigarettes a day have more than twice the risk of heart attack than non-smokers.

What other medical conditions are linked with smoking ?

Cigarettes have multiple poisons, including addictive nicotine, carbon monoxide, tars and hydrogen cyanide. There are 4,000 other chemicals of varying toxicity, including 43 known carcinogens (chemicals that can produce cancers).

Smoking leads to several ill effects. These are:

- Decreased oxygen to the heart and to other tissues in the body
- Decreased exercise tolerance
- Decreased HDL (good) cholesterol
- Increased blood pressure and heart rate
- Damage to cells that line the coronary arteries and other blood vessels
- Increased risk of developing coronary artery disease and heart attack
- Increased risk of developing peripheral artery disease and stroke
- Increased risk of developing lung cancer, throat cancer, chronic asthma, chronic bronchitis and emphysema
- Increased risk of developing diabetes
- Increased risk of developing a variety of other conditions including gum disease and ulcers
- Increased tendency for blood clotting
- Increased risk of failure of bypass surgery or

angioplasty

- Increased risk of becoming sick (especially among children: respiratory infections are more common among children exposed to second-hand smoke)

How does cigarette smoke affect others?

Cigarette smoke does not just affect the smokers themselves. When you smoke, the people around you are also at the risk for developing health problems, especially children. Environmental tobacco smoke (also called passive smoke or second-hand smoke) affects people who are frequently around smokers. Second-hand smoke can cause chronic respiratory conditions, cancer and heart disease. The American Heart Association estimates that each year, about 37,000 to 40,000 people die from heart and blood vessel disease caused by other people's smoke.

The benefits of quitting smoking

Now that you know how smoking can be harmful to your health and the health of those around you, here's how quitting smoking can be helpful. If you quit smoking, you will:

- Prolong your life. According to the American Heart Association, smokers who quit at age of 35 years add an average of six to nine years to their lives. Smokers who quit at age 65 years increase their life expectancy by one to four years.
- Reduce your risk of heart disease and stroke. Quitting smoking reduces the risk of repeat heart attacks and death from heart disease by 50 percent or more. Quitting smoking also reduces your risk of high blood pressure, peripheral artery disease and stroke.
- Reduce your risk of developing a variety of other diseases including diabetes, lung cancer, throat cancer, emphysema, chronic bronchitis, chronic asthma, ulcers, gum disease and many other conditions.

- Feel healthier. After quitting, you won't cough as much, have as many sore throats, and you will increase your energy. Quitting can help you prevent face wrinkles, get rid of stained teeth, improve your skin and even get rid of the stale smell in your clothes and hair. Overtime, cigarette smokers's senses of smell and taste are harmed by smoking.
- Save money !

How can I quit?

There are different ways to quite smoking; no one way to quit exists that works for everyone. To quit smoking, you must be ready emotionally and mentally. You must also want to quit smoking for yourself, and not just to please your friends or family. Plan ahead.



Before you quit: (Check off the items on this list as you accomplish them)

- Pick a date to stop smoking and stick to it.
- Write down your reasons for quitting. Read over the list every day, before and after you quit.
- Write down when you smoke, why you smoke and what you are doing when you smoke to learn your smoking “triggers.”
- Stop smoking in certain situations (such as at your work break or after dinner) before actually quitting.
- Make a list of activities you can do instead of smoking.
- Visualize yourself as a nonsmoker.
- Tell your family and friends about your plans to quit and ask them for their support. Ask your family members who smoke to quit with you.
- Ask your health care provider about using smoking cessation aids to help you quit smoking. Nicotine

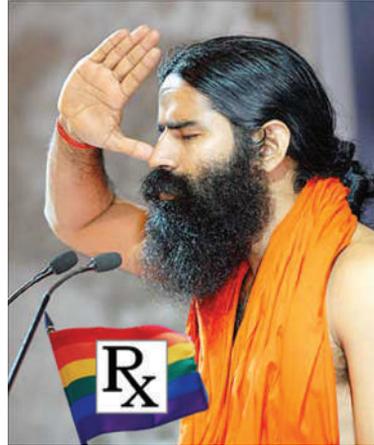
replacement aids include gum, nicotine patches, inhalers, sublingual (under-the-tongue) tablets, lozenges, nasal spray or prescription medications.

When you quit

- Get rid of all the cigarettes that you already have in your bag, home, office drawers, etc.
- Put away all smoking-related objects, such as ash trays.
- If you live with a smoker, ask that person not to smoke in your presence. Better yet, convince them to quit with you.
- Don't focus on your cravings. Remember that what you're feeling is temporary and remind yourself why you want to quit.
- Keep yourself busy! Review your list of activities you can do instead of smoking.
- When you get the urge to smoke, take deep breath. Hold it for ten seconds and release it slowly. Repeat this several times until the urge to smoke is gone.
- Keep your hands busy. Doodle, play with a pencil or straw, or work on a computer.
- Change activities that were connected to smoking. Take a walk or read a book instead of taking a cigarette break.
- When you can, avoid places, people and situations associated with smoking. Hang out with non-smokers or go to places that don't allow smoking.
- Don't substitute food or sugar-based products for cigarettes. Eat low-calorie, healthy food or chew gum when the urge to smoke strikes so you can avoid weight gain.
- Drink plenty of fluids, but limit alcoholic and caffeinated beverages. They can trigger urges to smoke.
- Remind yourself you are a nonsmoker. Nonsmokers don't smoke !!
- Exercise. Exercising has many benefits and will help you relax.

YOGA CAN HELP: But with Good Medical Advice !

Yoga and meditation have been established ways of healthy living since many centuries. Much before allopathic treatment options became available to the general public, people knew that there are simpler and more natural methods to relieve and prevent pain and discomfort due to various diseases.



In any medical science, the main thrust is on the possible advantage v/s disadvantage of a treatment modality. As one gets more aggressive, the chances of side effects tend to increase. On the other hand, something that is pretty innocuous may not bring any significant relief. Thus, more often than not, the effects and side effects go hand in hand.

Another point in establishing any protocol is authenticity. In medical science, huge amount of observational and experimental data is required first on animals and then on human beings in very controlled set ups. Repeated numbers of studies are required with similar and reproducible results before any treatment strategy is considered established and recommended routinely for the mass.

Homeopathy and Ayurveda, for example, have their own strengths and limitations. There are strong claims of getting extremely

successful response in various types of diseases. There are many other ancient types of therapeutic methodologies, which could never become popular because there was never enough scientific data collected on them. Absence of large studies, not clearly understood mode of actions (on the molecular level), and no known ways of monitoring the possible side effects, are the main reasons why these alternative sciences could never be properly utilized.

The urge to look for an alternative to any allopathic method is the possibility of side effects, cost factor as well as its inability to cure many diseases. It would have been so nice if there is a common platform where all experts could actually define which disease could be better managed in which way. Neither the allopathic doctors should have an inaccessible ego nor should other fraternity people exaggerate their achievements without enough scientific data.

Part of the problem lies with the medical fraternity as well as the government strategies. There is clearly a need for more importance to be given to the institutes where alternative sciences are taught. Unless there is a wide spread recognition and awareness, brighter students will never get lured towards these branches, the globally acceptable research will remain minimal and even the previously known facts may slowly get lost. Instead of developing these branches further, we may lose what was already known to our forefathers.

Moreover, the medical industry today is hugely governed by money. There is huge amount of money being spent world-wide in developing new treatment options (drugs as well as invasive procedures like ballooning or stenting for heart patients). As these pharmaceutical companies have huge markets, they are rich enough to help organize many conferences and nurture the allopathic science further. There is always a chance that the results of a particular study might be a bit biased if the study had received any direct or indirect funding from any such source.

Of late, many patients have been telling me their personal benefits in health following Ramdevji's advice on some channels on television. Few confirm that they didn't get any help while few actually end up in emergency rooms. This could also be because of leaving their prior medicines abruptly.

There is absolutely no doubt that Yogic exercises as well as meditation or even mere belief can have some positive effect on one's overall health. What is dangerous is to over emphasize in trying to treating the mass through a one-way communication. The channels should at least provide message strictly warning the viewers not to leave any of their current treatment modality without proper monitoring and their own doctor's advice. No doctor will unnecessarily prescribe medicines for anything if you could bring the normal figures of blood sugar or blood pressure. He will have no option but to decrease or stop the medicines himself. Perhaps he will be impressed enough with your methods and may advise it to others carefully!

The message here is to always follow your doctor's advice. Keep doing regular exercises (like treadmill/walking, etc) and if you have enough time please follow the simple yogic exercises too. Remember these Yogic exercises are complimentary but not a substitute for your current medical prescription. Many patients now like to sit in front of their television sets and have stopped going out for their regular walks. I wonder if it's their faith in alternative treatment or mere laziness!

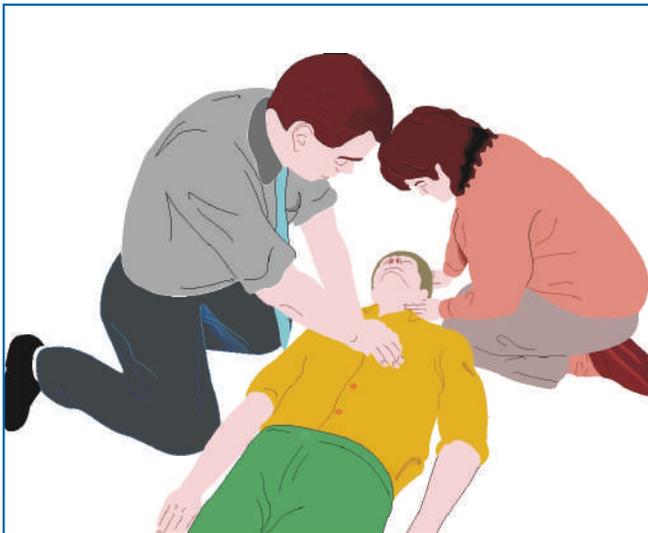
There must be good Homeopaths and Ayurvedic physicians around who can help many patients, but possibly there are many more inadequately trained self-proclaimed experts who are difficult to be caught. There should be clearly defined training programmes before a person is allowed to start giving any type of treatment. This will help those who are actually trained in their fields and want to genuinely promote their science and help people.



CPR: How do we revive a collapsed person ?

Few of you might have heard about the Brazilian football player, Chritiano De Lima collapsing (5 December 2004) while playing a football match in Goa. As destiny would have it, just after another ten days, Lancy Sequeria the fitness consultant of the same club, himself collapsed on the same ground while giving training sessions! He was rushed to the near by hospital but was declared, “Brought dead.”

Everyday many apparently healthy people collapse and are rushed to emergency rooms of various hospitals. Almost always it would take 30 minutes or more to reach an emergency room after the actual collapse. This is often too late since it takes only a few minutes before the brain becomes irreversibly damaged. These events typically occur in the morning hours.



Could some of these deaths have been avoided?

This is a highly debatable question- but yes, the chances of survival would have been greatly increased had there been some one nearby who could have administered the Basic Life Support (BLS) properly. Surely, by the time the patients reach the emergency unit of a hospital, it would be too late for even a hospital with the best facilities to do much. While the intentions of the family members and coworkers are always noble, a lot more could be often done if there was a wide spread awareness about BLS.

World-wide, there are a number of training programmes made for this purpose. Unfortunately not much is being done in our country and the general public is largely unaware of the BLS concept and its utility (Many lives are lost because of in correct applications of Cardio Pulmonary Resuscitation (CPR), a recent issue of the American Medical Association reported.

Two recent studies have confirmed that many care-givers perform CPR incorrectly and fail to restart stopped hearts by not adhering to guidelines in terms of the frequency and force of chest compressions or breaths into the victim's mouth. Studies have suggested poor and outdated training or overly complicated instructions in CPR may be some of the causes.

According to one particular study, when CPR was performed the number of compressions were often applied too quickly (the number should be between 100 and 120 per minute) and more over less than one third of the compressions were done with the requisite force. Also, breaths were often applied too frequently, said the author Lars Wik of Ulleval University Hospital, Oslo.

Learning good CPR techniques takes only a few hours and can make a huge difference between life and death. Equipping ourselves with the necessary skills allows us to be confident responder in the event of an emergency.

Basic Life Support (BLS): As simple as ABC!

1. **A is for airway.** In an unresponsive person the muscles of the body relax completely causing the base of the tongue to fall back and block the airway. Establishing an open airway is achieved by tilting the head back and lifting the chin (methods differ in case of suspected neck injuries.)
2. **B is for breathing.** Establishing an open airway is followed by a breathing check. ‘Look, listen, feel’ approach enables one to see if the chest is rising and falling, listen if the person is breathing and feel the breath on your cheek all at the same time. In the absence of breathing, rescue breaths must be given. To achieve effective rescue breaths, the nose must be pinched shut and your lips must form a good seal over the mouth of the patient. Slow, even, breaths should be administered with time in between to allow exhalation of air.
3. **C is for circulation.** After two initial rescue breaths, a carotid (neck) pulse check is done to ascertain circulation. In the absence of pulse, compressions are started. Correct compression techniques include kneeling next to the patients to ensure correct hand placement and good compression techniques including compression to the correct depth with the correct speed. BLS consists of series of skills (ABC) performed serially.



Chest Compressions

1. The compression rate for adult CPR is approximately 100 per minute.
2. The compressions to ventilation ratio is 15 compression to two ventilation.
3. Chest compression – only CPR is recommended when the rescuer is unwilling or unable to perform mouth-to-mouth rescue breathing.

Chest compressions for CPR are serial, rhythmic applications of pressure over the lower half of the sternum. These compressions create blood flow by increasing intra-thoracic pressure. Blood circulated to lungs by chest compressions, accompanied by properly performed rescue breathing, will most likely deliver adequate oxygen to the brain and other vital organs until more definitive treatment like defibrillation can be performed.

Chest Compression Technique

Proper hand placement is established by identifying the lower half of the sternum. The guidelines below may be used, or one may choose alternative techniques to identify the lower sternum.

1. Place your fingers on the lower margin of the victim's rib cage on the side near you.
2. Slide your fingers up the rib cage to the notch where the ribs meet the lower sternum in the centre of the lower part of the chest.
3. Place the heel of one hand on the lower half of the sternum and the other hand on top of the first, so that the hands are parallel. Be sure the long axis of the heel of your hand is placed on the long axis of the sternum. This will keep the main force of compression on rib fracture. Do not compress over the lowest portion of the base of the sternum

(the xiphoid process).

4. Your fingers may be either extended or interlaced but should be kept off the chest.

Compression-Only CPR

Mouth-to mouth rescue breathing is a safe and effective technique that has saved many lives. Despite decades of experience indicating its safety for victims and rescuers alike, some published surveys have documented reluctance on the part of professional and lay rescuers to perform mouth-to-mouth ventilation for unknown victims of cardiac arrest. This reluctance is related to fear of transmission of infectious disease. If a person is unwilling or unable to perform mouth-to-mouth ventilation for an adult victim, chest compression-only CPR should be provided rather than no attempt of CPR being made at all.

Cough CPR

Self-initiated CPR is possible. However, it is limited to clinical situations in which the patient has a monitored cardiac arrest, the arrest was recognized before loss of consciousness and the patient can cough forcefully. These conditions are typically present only during the first 10-15 seconds of the cardiac arrest. The increase in chest pressure that occurs with coughing will generate blood flow to the brain and maintain consciousness. Thus a ‘collapsing’ person might just recover with forceful coughing!



HEALTH AND SPIRITUALITY !

There is interesting data that I gathered from New Delhi(Escorts Heart Institute) and Kathmandu (Norvic International Hospital): as many as 60 % of adults who came for their routine check, had higher than desired weight, 28% had high BP , 67% had high triglyceride and 70% were not doing enough exercise !

No wonder we Asians (even after immigration) remain the most prone race for developing Coronary Artery Disease. We all feel these tragedies will always come to our neighborhood, never to ourselves, not realizing that that if we don't change our life style, we are equally susceptible!

Statistically, one in 4 of us have already high BP, one in 6 might have diabetes and one in ten may be developing CAD! Is it not alarming ? What are we doing to prevent it? Can we do something? Can we plan to change our lifestyle? Are we ready and willing?

While we have so many discussions planning about our children, education, settlement, jobs, money etc. what about discussion and planning for our health? A sound health should certainly be our priority. All the more, if we are married, family persons !! Let us ask ourselves what is going to be important to us when we are sixty or seventy years of age?

The list can be long but following might of great importance:

1. Our relation with ourselves (self satisfaction/ memories)
2. Our relation with our family / friends (mainly spouse !)
3. Our and our family members health.

Thus health remains an important aspect of our overall comfort and peaceful life.

A healthy family/society can concentrate on more useful/constructive activities rather than spending all the time, money and energy in hospitals leave apart the mental agony of sickness.

Aspects of sound health

Sound health has three aspects:

1. Physical well being
2. Mental well being
3. Spiritual well being.

We mostly talk and restrict ourselves to physical wellbeing. Mental and spiritual factors may be even more important. Lack of emotional and mental peace might be the actual cause of faulty life style which in turn may then result into HBP, diabetes, heart diseases, strokes and many other diseases.

Are we prepared to get diseased?

Can we make ourselves ready to face a sudden devastating disease? No amount of planning, bank deposits or health insurance can be enough. All what we have done and all what we accumulated in our life may come to no use. Thus anything that is achieved at the expense of our psychological and /or physical health is certainly not worth it.

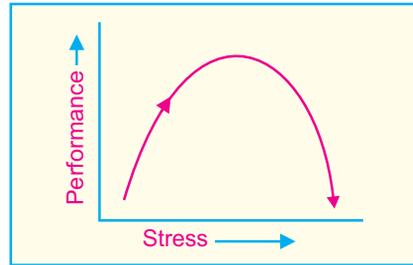
Cardiac diseases are Life style diseases

With more and more globalization a forceful, artificial, unnecessary competitive life has become the main reason of our poor time management and loss of understanding of life's priorities. This results in stressful life, addictions, lack of enthusiasm for exercise or doing anything that doesn't make money! Thus the main cause of lifestyle diseases like Diabetes, Stroke and heart diseases is unhealthy lifestyle, which in turn is largely due to undue stress. By default, we are trained only to give

importance to things which may be measured like temperature, wealth, weight, BP, sugar etc. What about stress, happiness, quality of sleep and possibly many other biochemical markers which we may not know at present. No wonder we see almost daily many patients who do develop heart attacks without the presence of any of the recognized risk factors!

What is Stress?

Stress can be described as any stimulus such as fear or pain that disturbs or interferes with the normal performance of a person. To some extent, stress seems unavoidable and even unnecessary to perform



well. Beyond a level, however, the performance can fall. Thus we need to discover, define and enjoy the optimal level of stress that allow us to perform optimally. We need to enjoy our work with maximal level of efficiency! While acute stress can be thrilling and exciting, chronic stress can cause lot of physical, behavioral effects.

Effects of Stress

Stress has several effects on our body and behavior.

- Physical Effects
 - Raised heart rate
 - Increased sweating
 - Headaches/dizziness/blurred vision
 - Aching neck and shoulders skin rashes/lowered resistance to infection
- Behavioural Effects
 - Anxiety and irritability

- Increased alcohol consumption/smoking
- Sleeping difficulties
- Poor concentration
- Reduced ability to cope

Impact of stress on health

- Diabetes,
- Rheumatoid arthritis,
- Peptic ulcer disease,
- Cardiac disease

All these diseases can begin and worsen with stress.

Thinking has become a disease !

Our mind is the seat for thoughts. Out of greed and ego (fear) it produces constantly a large number of thoughts which are mostly repetitive and unnecessary. In fact, they may be harmful as they may cause release of toxic chemicals in the body, leading to anxiety and cause damage to our systems. Over-thinking has today become a disease. More people might be dying of thought attacks than heart attacks!.

Mind: our slave or our Master?

With evolution our mind got developed to its current form. Mind was supposed to be our tool – a software that we can use when we need to. Unfortunately, the mind has taken full control of ourselves today. The mind has become the dominant part of our being. The mind is the birth place of ego and greed. The by its nature is very fearful, always seeks reassurances, safety, and abundance. Sadly the Master (the person) has become the servant. We do what the mind asks us to do – run for shelter-protection (ego) or to run for more (greed).

Have an anchor. The basic requirement to avoid unnecessary stress is to do our best and leave the rest! This will need a faith, a belief that something can be left. It is important to accept that not all that we do or anticipate happens ! What actually happens is the final outcome of innumerable unseen factors. It is thus impossible to predict and therefore prepare oneself for future. Then how does one live comfortably today ? If you cannot predict / prepare yourself for tomorrow, you may feel uneasy today as you might have all negative thoughts/calculations. Some sort of faith or belief in nature is necessary to limit these thoughts.

We have lost the feel of anchor. Our parents/ grand parents used to have / feel in the form of trust on parents blessings/religion/ God etc. We now feel everything we have to do ourselves and no wonder we may feel tired soon and get stressed faster.

An anchor is something that can provide the (sense of which itself is mostly enough!) Security/ safety. This anchor is the attachment that allows us to work without calculations without worrying without fear !.

Belief in nature, religion, parent etc. can provide such a strength. We seem to have lost faith in these. The focus only on individual effort can be source of a continuous stressful life . We grew up with our parents reassuring us “Don’t worry, God will make it alright”. “ Everything will be fine.” We don’t say these words anymore, our children do not believe them. They will have no such anchoring support. They will live their entire life imagining that nothing happens beyond the calculations of their minds- which is both untrue and stressful !!.

Power of today

Can we be free of mind / thinking when we want to? Do we have the off/on button of our mind in our control? Our mind keeps reviving the recent or distant past or rehearsing or imagining possible future situations often involuntarily and unnecessarily.

If we can create a gap of “no mind” a true sense of stillness and peace can be perceived. This will be the end of compulsive thinking. Flowers, children and animals will not look so relaxed and beautiful if they were worried about tomorrow. They just know to live in the present. May be we too will feel better if we can learn to live mostly in the present.

Happiness

Lets not get exhausted by a blind chase hoping to get something elusive at the end of the effort/ journey. At the end of the journey there is nothing but death! Happiness is not the end result of achieving something. Happiness is the byproduct of doing something!.

So the big mistake is to neglect the journey of every day every moment pleasures in the blind chase of elusive happiness is supposed to be awaiting at the end of the journey! If there is too much of focus on the goal then life’s journey is no longer an adventure. It becomes just an obsessive need to arrive or to attain. Then we no longer see or smell the flowers by the way side.

Any activity that can freeze us in the current moment like a deep sleep, sports, music, meditation, sex, alcohol, puja, natural beauty, children, pet animals or any hobby stop us from thinking about past and future .They give us relaxation. We therefore enjoy doing these. Since freezing in the current moment makes us feel relaxed, it confirms that worries about tomorrow and brooding about our past (game of mind for the sake of ego and greed) are the major hurdles to allow ourselves be in relaxed state. If we knew how to switch of our mind , we could relax even without these activities !.

Let us spend maximum time of our life/ days in positive emotions like happy, contended, grateful, willing to give, excited and cheerful. Lets keep ourselves away from the negative emotions like guilty, sad, jealous, angry, stressed and hostile.

Lets beat the stress !

1. Identify the cause.
2. Observe how we are emotionally responding to it. Differentiate between fact and fear.
3. Learn to accept the uncertainties of life (lets learn to appreciate the uncertainties of life !)
4. Learn to accept your limitations for external achievements.(Lets learn to accept the limitations of external achievements !)
5. Learn time management.
6. Try relaxation techniques like meditation, puja (praying), gardening, music, exercise, pet animals and laughter.

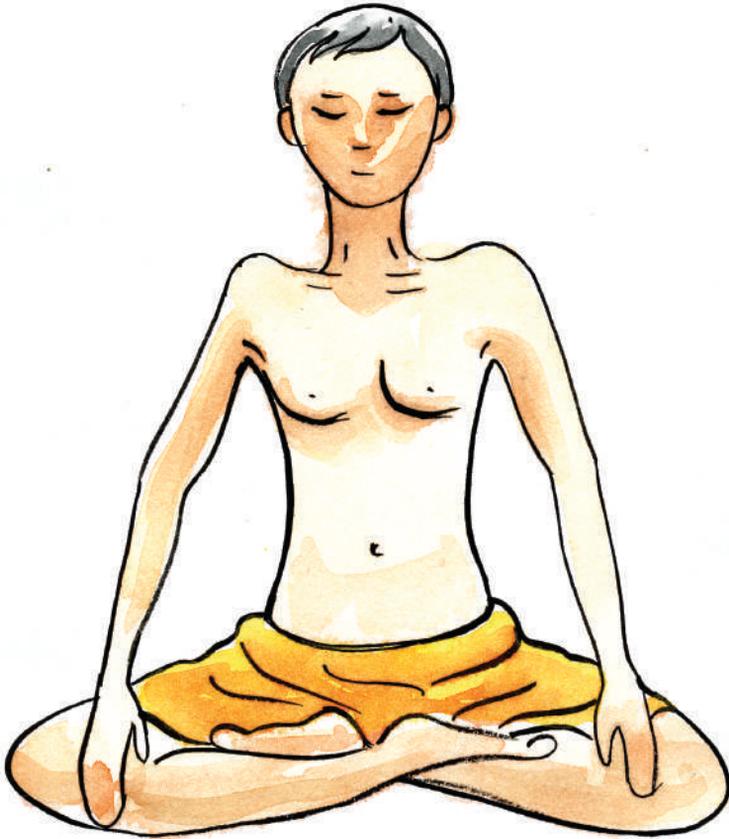
Meditation helps !.

Ego and Greed are two major hurdles. We can try to handle ego and greed by meditation and a logical process of “letting go”. Meditation can be one way to regain control over the mind. It might help us in connecting us with our true internal energy. This internal energy is strong, non-challengeable, non-seasonal and free from the external pressures and factors. Meditation can help us more resistant to outside worldly pressures. The chemicals released at the time of positive emotions and relaxations are healing hormones for daily wear and tear (Serotonin, pheromones and endorphins).

We can continuously try to loosen the influence of external pressures and listen constantly to internal dreams. We can then let go of what isn't part of that dream! This in fact is an indicator of maturity. We should get less and less dependent on external factors for our satisfaction and happiness !

Buddha Asserted,

“The secret of health for both mind and body is not to mourn for the past, not to worry about the future, not to anticipate troubles, but to live the present moment wisely and earnestly.” Once at ease with the present, you don't need the world any more. You don't even need it to be different from the way it is.



Summary

Let us judge ourselves. Many times a day !!

- Do I do one hour physical exercises every day ?.
- Am I eating to live or living to eat ?.
- Did I check my BP/ Sugar/ Cholesterol in last three months?
- Do I laugh many times a day?
- Am I following my doctor's advice?.
- Do I keep the desired weight?.
- Am I keeping the toys of my happiness and pleasure pretty simple, natural, inexpensive and socially acceptable?
- Do I remember everyone I love and wish them well?
- Are my external needs decreasing over time?
- Do I realize that in the end it is up to me how I view and relate to my life?
- Am I happy / contented with myself ?.
- Am I ready to relinquish every worldly object without sorrow and still be able to live happily?.
- Am I spending maximum amount of time in positive emotion (like happy, contented, grateful, willing to give, excited and cheerful) and am I consciously avoiding negative emotions (like guilty, sad, jealous, angry, stressed and hostile).
- Do I feel complete with myself, my spouse and my profession?



FESTIVALS AND CELEBRATIONS: Facing Challenges to Healthy Living !

Our culture is rich. We have a history of thousands of years. Our calendar is full of festival dates. We enjoy celebrating festivals. We enjoy taking breaks from our routine. These traditions have a rich heritage. There are many positive aspects to festivals and celebrations: they connect us with our food, religion, and faith. They provide us time to get together with family and friends, time to relax and to maintain our culture.



Do we know these are not occasional days? These are many ! .If you take into consideration all numbers of festival days and various celebrations dinner parties etc. it may be well above 50-100 days a year!.You may then add another 52 ‘weekends’ to this ! We cannot allow ourselves to stay unhealthy so many days a year !!

However, there are also some challenges. Are we aware of health effects of these celebrations? Are we aware that there are hardly any celebrations in our society that do not take toll on our health? The festivals of Dashain and Diwali, and other

festivals bring many patients to the hospitals. Post Diwali, and other festivals, many patients have their Triglycerides and uric acid levels going up by 30 to 40%. By the time these levels are corrected, some internal damage might have already occurred. We know well, and they too know very well, why this happens.

From the birth of a new one, to rice feeding ceremony, birthday party, marriage anniversary to Janku and even after death- all events are celebrated and the main focus is on just one thing – Food !.

It seems like in the name of these festivals and celebrations we willingly surrender and allow ourselves to unhealthy living habits. We tend to break our routine and do not follow the regular pattern of getting up early for exercise we might sleep late at nights. There may be relatives and friends at home and we are willing to give up activities which are important part of our daily habits, such as getting sufficient sleep, waking up early, doing exercises or walking. On festival days when family is present, these health related essentials do not appear exciting, and during these days, they do not look very necessary !.

There are several health hazards inherent in the way we conduct celebrations:

1. Intake of foods rich in salt and fats: During celebrations, the main focus remains on food. Throughout the day, there are discussion on what should be the menu for next meal !. Unfortunately unhealthy snacks are the ones which are easily available, quick to prepare, taste good and are often less expensive. I wonder how many people would be excited to come if our invitation card read “Healthy Food will be served”. The food served is invariably rich in salt and fats. The ‘Bhoj’ (group eating) vocabulary immediately implies an automatic acceptance of such food. The outcome is then not surprising. The vital parameters of body like blood pressure, blood sugar, uric acid, blood cholesterol as well as the body weight all increase significantly by the end of the festival season.

2. The substandard quality of food: The food may not be just unhealthy because of its nutritional value, it may also be of substandard quality. Cooking and food serving may not be completely safe during group eating. The food may be stale and the overall quality may be substandard. Yet we tend to eat more and may even like to prepare ourselves to do so, by fasting from the morning, so we have good appetite when we go for the evening dinner !. While we are enjoying the different taste of outside food, we might also be ingesting worms, bacteria, and other parasites and get food poisoning ,indigestion, dysentery or even Typhoid and Hepatitis (jaundice)!. The chances are our workers at home enjoy better quality of grains, oils and vegetable than yourself, as they may be eating at our place and we may be partying in star hotels every week!

3. Excess of alcohol and smoking : The package that comes along with festivals includes a high consumption of alcohol, tobacco/cigarettes and meat products. The quantities we take of this increase many folds in name of festive mood. Many of us might allow ourselves to binge on drinking and smoking during these celebrations. We often do not notice the amount we are drinking. The snacks that we enjoy along with drinks are mostly salt and fat rich. Even if you do not smoke yourself it is likely that someone standing next to you might be smoking and making you smoke passively !.

4. Staying up late at night : It is unlikely that you will finish your dinner by eight and sleep before ten ! The time needed to be with your own family and children will suffer too. Late night heavy dinner adds to your weight and snoring. Moreover you are now unlikely to get up early next morning for your regular exercise !.

5. Road traffic accidents: It is alarming that all hospital emergency rooms get high numbers of road traffic accidents patients because of rash driving often under the effect of alcohol. Unfortunately thus a wonderful ‘relaxing’ evening can result into the abrupt end of a life - a deep irreversible loss to the entire family / society.

6. Effects on children: Little children may witness that the same parents who were talking about healthy eating and healthy living all the time are now looking and doing so different!. Seeing parents indulging in unhealthy practices erodes their belief that healthy habits are all that important !. If we want children to have healthy habits, then we must have consistent behaviour, which they can emulate, and not break the rules ourselves.

Over the years the actual meaning of festivals is losing its actual importance. Many of us may not even know properly why are we celebrating these festivals !. May be we are just finding new ways to de-stress ourselves. The commercial world is also encouraging more and more types of celebrations like mother's, father's, teachers' and valentine days etc. The resultant sale of cards, texting messages and heavy eating certainly helps some industries including the medical !

It is important to be aware of these hazards, and ask how we can minimize them. How can we celebrate festivals well, without all these accompanying risks and bad effects ?

IS IT POSSIBLE TO CELEBRATE EVENTS HEALTHILY?

First, this question flies in the face of our deep seated beliefs that festivals are meant to break rules and routines, that festivals imply a sanction of throwing caution to the winds. Healthy celebration of festivals ? *Prima facie*, looks impossible ! But let us think for a minute. We see value in festivals, we want to continue celebrating them. Can there be a way which is safer, healthier and yet relaxing? We can be together with our family and relax with simple talking and sharing what we experienced in life. We can motivate each other for doing good, inspire our children with some of our cultural and religious stories. We can spend some quality time with them. So first, shift the priority of the festival and its celebration away from the food, to the real meaning of the festival. To doing what festivals are meant to do, bring us close to our family and friends, and share culture and interpret, even, reassign meanings to the cultural backgrounds of these festivals. For instance, rakhi and bhai duj discussions can be around how sisters can be equal and respected. Diwali

and Christmas festivals can be about cleaning up once a year, and making space for the new. This may relate not only to materials and goods, but also new feelings and relationships, when we visit friends and relatives and re-affirm emotional bonds. Focusing on these aspects will take attention to the real meaning of the festival and away from rituals and heavy foods.

Let's not force our friends and family member to eat junk and unhealthy food ! Let's not push our our children to another room, completely ignoring them and wasting their holidays without any purposeful outcome. Let's plan to celebrate the next good occasion in our life in a different way. Unhealthy food eating is not the only way to enjoy all events of our life. Celebrating and deepening and renewing relationships could give a new meaning to celebrations.

Some tips for healthy celebrations:

1. Have a clear mental attitude. Decide in advance, with your family members, that you will not allow health to suffer in name of festivals/parties.
2. Cook healthy: Learn and try varieties of soups & salads. Healthy food can be tasty too. Try adding ginger, olives, nuts, garlic, lemon, etc.
3. Plan to serve dinner early.
4. Do not force people to eat more !. Respect their desire to eat light.
5. Avoid serving alcohol. At least, do not offer alcohol on each occasion. Try different types of soups.
6. Alcohol usually comes with unhealthy snacks. Think of healthy snacks to serve. Some slices of salad, vegetables with low fat dips (yoghurt, chutneys) are a good option.
7. Decide to exercise **more** during festivals to compensate for the overeating you are likely to do.
8. Do not ignore children. Think about them. They will learn unhealthy habits from us. Remember, we are role models for our children, whether we accept it or not.

We have chosen to be parents, we do set the standards for them with our own behaviour.

9. Never go to parties directly from your workplace. Come home and eat something healthy before you go. You can also come back home after the party and eat what you want to eat if you are still hungry. Do not take the pressure by the host if you are served something you think is not healthy for you. Learn to say 'no'. Remember your food is your choice.

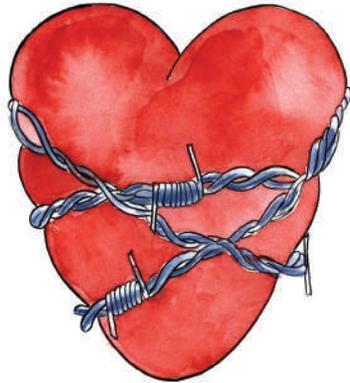
Summary

- Rethink the meaning and impact of festivals in your personal and social life.
- Be aware of the positive and negative impacts of celebrations.
- Find ways of recreating and strengthening the personal, family and social meanings of the festivals you celebrate.
- Spend time with children. Give them the importance they deserve. Remember you want to preserve and strengthen your relationship with them. Remember you are the role models for them.
- Do not give up healthy habits during festivals and celebrations. Get adequate sleep and exercise more rather than less.
- Do not give up healthy eating. Do not make, serve, or partake of unhealthy foods during parties. Do not get forced to eat unhealthy foods, or large quantities.
- Give preference to eating at home, before and-or after parties.
- Refuse excess of alcohol (limit to one or two pegs).
- Avoid smoking. It is unhealthy for you and your non-smoker friends. If you are a non-smoker, move away gently from a friend who is smoking. It is a gentle assertion that you value your own health, and will make the friend conscious too.
- Remember, we have a choice about how we celebrate festivals. We can make healthy choices.



Prevention is Better than Cure: “MADE” is your Mutu Mantra

The blood supply to the human heart is through tiny blood vessels (2-4 mm in width and about 10 cm in length) called coronary arteries. A vast majority of heart patients (angina or heart attacks) actually have one or more blocked arteries in their heart.



The slow deposition of fat causing partial blockage leads to angina (chest discomfort on brisk walk or climbing stairs). On the other hand, a sudden blockage (usually because of rupture of a small blockage) leads to abrupt blockage of the artery and severe chest pain, sweating and a major health hazard called Myocardial Infarction or heart attack. Both these types of Coronary Artery Disease (angina or heart attack) actually result from some sort of blockage in the coronary arteries.

There is interesting data that we gathered from New Delhi (Escorts Heart Institute & Research Centre) and Kathmandu (Norvic International Hospital). As many as 30% of adults who came for their routine check, had a habit of tobacco addiction, 28% had High BP, 67% had high triglyceride and 70% were not doing enough exercise!

Not surprisingly therefore, that heart disease is killing more and

more people in the South Asian population. Our countries, with their limited resources, cannot afford this expensive and rather incurable disease. Even if money were not an issue, there is no guarantee as to where and when one can suffer a heart attack. We may have cardiac emergencies with no medical help close by. Thus it's your lifestyle and not the pocket that will often decide the fate!

Let's start! It's never late. Let's take a 'U turn' now!

Let's invest more on consuming vegetables and fruits. Women may take a leading role in this move. Let's serve separate salad bowls, and encourage taking large portions of salad, instead of serving small portions on a dinner plate! Let's keep healthy snacks handy all the time. Let's desert the dessert corners! Let's eat to live and not live to eat!

Let's join a health club or use a treadmill or cycle at home. Let's meditate every day and laugh many times a day. Let's sit and decide with our spouses about our priorities of life and let's not try to beat Mr. Bill Gates in bank balances! Let's not use the excuse that we earn for our children, to get caught in stressful lives. Our kids learn to adjust to our financial situation. They Need to be made internally strong so that they may withstand the external pressures with ease. We need to allow them to learn our values and healthy living and not to shatter their personalities with unnecessary competition. Let's give them time, make them eat well, exercise, pray and meditate and not be busy just in saving money for them.

Sound health is an outcome of many factors. Timely detection of any disease followed by proper and prompt treatment is very crucial especially when it involves your heart. A small amount of awareness and following a few simple tips may help in preventing oneself from a deadly disease. Let's live a balanced life. Let's take care of our health for ourselves and for our family and society.

Till about 10 years ago, procedures like angiography, angioplasty/stenting and bypass surgery were not available in Nepal. All patients used to travel outside for them. All these procedures have now become widely available in Kathmandu. However, they remain fairly expensive. Moreover, angioplasty and bypass surgery do not really cure the disease. If one doesn't change habits, recurrence is bound to occur.

The best strategy is prevention. The following eight factors, if followed carefully will keep you away from developing heart attacks.

1. Check your blood pressure regularly. Do not wait for symptoms. Keep as close to 120/80 as possible. If your doctor advises medication, do not avoid it.
2. Keep a check on your Lipid Profile. Keep your cholesterol level as low as possible. Again, take medication if required for a long time.
3. Do not consume tobacco in any form. Recent data suggest that even if you smoke one or two sticks a day, your risk of heart attack still goes up by 300 percent.
4. Check your blood sugar regularly, especially if your parents or siblings have diabetes. If you have diabetes in your family then there is a very high chance that you may also have it, particularly if you are overweight.
5. Keep your waist thin. The waist-hip ratio should be less than 0.8 for women and below 0.9 for men.
6. Do regular aerobic exercise for about 45 minutes.
7. Enjoy more vegetables and fruits. Try to double the amount that you are currently consuming, you will certainly feel the effect in a few months.
8. De-stress yourself! Some regular hobby, playing with kids, pets, gardening, listening to music, puja, yoga, medication, loud laughter, etc. may be useful.

Before retiring every night asks yourself

“Have I MADE my day?”

This could be the mantra for your healthy heart!

M: Mental Relaxation

A: Avoid strictly –Tobacco in any form

D: Diet Control

E: Exercise regularly



HOW TO GET BEST OUT OF YOUR DOCTOR ?

It is obvious that lot of effort and trust is needed while seeking medical treatment from a doctor. You might be casually choosing a doctor on some one's recommendation or you must have read his /her name in a magazine or watched him/her on T.V.. Many patients might know nothing more about their doctor. One should make some efforts to know what degree, learning, qualification your doctor has. The choice of doctor is entirely yours. Once chosen you should avoid changing your doctor. In general a doctor whom you have been seeing regularly will have a strong sense of responsibility about your health.



Role of General practitioner /family physician

In today's fast moving world and media coverage, we all have a tendency to visit and directly question the specialist. This may not be the best thing to do. There is a great role of your G.P./ family physician. A G.P. will understand you better as he has seen you since long. He knows your family history. He may assess you as a whole and guide you as and when you need to see some specialist. If you can choose one good G.P. for yourself and your family then you do not need to know

all the specialists. This doctor of yours will take the entire responsibilities and will help you in choosing the right specialist when you need one.

Know your disease Know Your Disease

You should know your disease well. Do not shy away from the facts. Know the facts about your disease and accept them. Many diseases like HTN, Diabetes or heart diseases have no real cure. Yet, you can keep them under control and live a good quality life. If you think you might forget to ask, you can make a list of questions and ask your doctor. Try not to learn too many things from media, internet, friends or relatives. Your doctor knows your disease well and will be happy to satisfy all your doubts.

How to see your doctor

You should ask your doctor when you need to come for the next visit. Even if there is no new problem or symptoms it is advisable to keep a regular follow up. Ask your doctor what is the best way for communication, telephone, email, mobile, texting messages, etc. Do not expect your doctor to know your entire medical history while taking your call. Avoid asking for medical advices in parties or on the phone. Small errors might be too risky for your health. If you are not feeling well rush to the emergency with all your previous files and medicines.

Your medications

You should know your medications, their doses, actions and possible side effects. Most of the medications for heart diseases and other afflictions such as diabetes and HBP are for life and thus it is important that you know them well. Also you shouldn't stop or change them without consulting your doctor. If your appointment is postponed and you are running out of your stock of drugs you should purchase a refill.

You should carry your prescription to the pharmacy to purchase the drugs. Since we don't have strict regulations for the sale of drugs, we have a tendency of going to shop without the prescription and serious mistakes can occur. During a follow up visit, it is a good idea to periodically cross-check the medicines with your doctor. It is very important that your doctor knows

precisely all the drugs you are taking.

Your local doctor

Even if you have needed some treatment outside your city, it is crucial that you go back to your local doctor and keep him updated. At the time of any emergency you will need your local doctor's support. You might give the contact details of the other doctor and make them discuss about your condition, if the need arises.

Your financial state

Medical science unfortunately has become very expensive today. Because of lack of health insurance, the financial aspect of the treatment is of great importance. You should not shy away from taking your financial capacity with the treating doctor. There may be slightly cheaper methods and public hospitals and your doctor can guide you appropriately. Very expensive and not always useful strategies can be avoided if finances are limited.

Need a second opinion?

It is natural to feel little scared if a surgery has been advised to you. Also you may not be completely satisfied after seeing a doctor. In both such situation it is advisable that you frankly share your feelings with your doctor. Ask him to suggest another expert. It is perfectly legitimate to seek a second opinion. It is your right to satisfy yourself completely. While choosing another doctor it is imperative that you do not select a lesser qualified expert. Also remember it is a natural tendency to like/look for a doctor who could say that a particular procedure is not needed ! While taking an alternative opinion can be satisfying and reinforcing, too many can be confusing and can cause a delay in the vital treatment that you may need.



GLOSSARY

1. Coronary arteries: Blood vessels supplying heart muscles.
2. Angina: Any type of chest discomfort (pain, heaviness, burning, etc) brought on by physical activities and relieved by rest.
3. Myocardial Infarction: Death of some part of heart muscles. Also called “Heart Attack” diagnosed by ECG and blood tests.
4. Angiography: A radiographic test involving injection of dye through a catheter into the artery. Allows direct visualization of the blockage, if any.
5. Angioplasty: Opening of a blocked artery through inflation of a tiny balloon.
6. Stent: A metallic coil implant after ballooning to avoid the recoil. The newer medicated stents are safer but costly. These days ballooning is almost always followed by stenting in the same sitting.





