



Public Health Perspective

the first online newsletter of Public Health of Nepal | www.bmhall.yolasite.com/publications.php | Vol. 1 Issue 1 January 2011

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Public Health Important Day (January)

12th Jan: National youth day
31th Jan: Anti-Leprosy day

Editorial: PHP – New Year New Beginning

New Year always deserves to have something new. Public Health Perspective (PHP) is the result of this natural practice initiated by public health students of Pokhara University, which is the first online newsletter of public health of Nepal.

Health, being the basic need, all people should have knowledge and understandings about health activities, programs, plans, interventions, diseases outbreak, medicines, laboratory, epidemiological investigations, environment, health rights, laws, and health research. However, people are unaware due to the lack of efficient health information system existing in the country. Public health students realized this information gap

and planned a new resolution with the start of New Year to make people aware about these variables. Consequently, the Public Health Perspective came into being.

This newsletter will have nine sections viz. editorial, letters to the editors, national news, feature articles, global health, journal watch, WHO just releases, and being healthy. It will have eleven issues per year with a combined issue of October and November. Banstola Medical Hall will be the online publishing partner for it.

In Nepal, the culture of documentation/reporting in health sector is very poor despite the large time commitment of health professionals. To outcast this miserable situation, PHP provides a right place to share their infor-

mation, experiences, and success stories. Thus, PHP team believes that it will be a revolutionary newsletter in public health field.

We would like to request all health professionals to join the PHP mailing list by clicking the JOIN PHP EMAIL LIST button (the blue button) in our website. PHP welcomes any suggestions and comments from its valued readers. Also, please feel free to distribute it within your networks.

HAPPY READINGS AHEAD!

Amrit Banstola

Greetings

It is my immense pleasure that the first online newsletter of public health of Nepal has come out.



In national health care system, the role of health professionals is achieving more and more importance with passes of time. This sounds true as the part played by these professionals is concerned with the improvement of Nepalese health status. In such scenario, initiation of nation's first online newsletter of public health with its objective of reorienting the health services, plans and

policies together with providing the right platform to share ideas and innovations would ultimately help to solve the existing health problems. I wish all the best to Public Health Perspective team and hope that their efforts will be worthwhile.

Ashik Banstola
Currently studying M Pharm (Pharmacology)
Bangalore

I find an immense pleasure in congratulating "The Public Health Perspective" family in their new venture. As a member of the advisory board committee, I would like to wish this newsletter to be successful in providing the space where the health professionals can share their ideas, experi-

ences and solutions that will assist to change policies and plan programs.

Health newsletter has always been an important tool for updating knowledge for those interested in health care and research. Primarily, people in health care sectors need to communicate more. I hope PHP will prove to be the missing platform via its contribution on the regular collection, analysis, and sharing of information about health conditions, risks, and resources in a community.

I also would like to wish that the newsletter to be the rational source of information for all the students, learners, researchers. I encourage all of



you to read PHP as a way to informed, feel inspired, and share your news. I am sure that the newsletter would certainly live up to the commitment that its management and editor have made of giving the readers not only a better looking newsletter but also in keeping with the changed circumstances of the country's struggle to change and progress towards attaining a better health conditions.

I hope it will be successful in being one of the sources that aims to bridge the gap between practice and research. I look forward to seeing the next issue and contributing in anyway I can.

Arjun Poudel
MSc Pharm
Pokhara

How to join PHP?



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Bir Hospital starts free Antiretroviral Therapy

KATHMANDU, JAN 13 -

In its bid to increase the access of People Living with HIV/AIDS to medical care, Bir Hospital has introduced a separate Antiretroviral Therapy (ART) and HIV/AIDS counseling division.

HIV/AIDS transmission rate is high among Injecting Drugs Users (IDU), Female Sex Workers and labour migrants. But this group of people can hardly reach health institutions and afford the services owing to the cost and social stigma related. "Therefore, there was a need to initiate the services at Bir that has been providing services for a cheap price," said Bir Hospital Director Dr. Buland Thapa.

"Our ART and counseling services will be free of cost," he added. Though the government has been providing ART free of cost since 2004, only 4,509 have availed themselves to the opportunity so far since the infected

hide their disease fearing social stigma and discrimination. Besides two hospitals in the Valley—Bir Hospital and Shukra Raj Tropical and Infectious Disease Control Hospital in Teku, 196 governmental and non-governmental health centres across the country are currently providing HIV test and counseling services. According to the National Centre for AIDS and STD Control (NCASC), 25 centres and 15 sub-centres are providing ART while 21 hospitals have launched programmes to prevent mother to child HIV transmission.

A study undertaken by the NCASC shows 4,760 persons get infected with HIV/AIDS every year and 4,701 die of it. An estimated 64,000 persons are HIV-infected in the country. Of 16,262 cases reported, 29 percent are women aged 15-49 years. Labour migrants account for 29.4 percent while their infected spouses form nearly as big a pie.

The study also shows the HIV transmission rate is 8.9 percent in IDUs; 2.6 percent in men having sex with men and 1.9 percent in female sex workers.

Source: eKantipur.com

Health dept to set up tobacco control section soon

KATHMANDU, JAN 12:

The Department of Health is going to establish a tobacco products and incommunicable disease control section as part of efforts to implement the Tobacco Products (Control and

National News

Regulation) Directive 2066.

At a press conference held here today to inform about the directive, senior health education administration Badri Bahadur Khadka said that the section will be established to regulate and evaluate tobacco products.

The directive bans smoking in public places and those found doing so will face action, he said.

The directive has it that warning messages should be printed in Nepali language in the front part of packets of tobacco products in a visible and clear way. It also prevents anyone from selling and providing tobacco products to people below 18 years of age and pregnant women.

At the programme, Secretary of Ministry of Health and Population Dr. Sudha Sharma said that the implementation part of the directive is fraught with challenges. The directive was recently endorsed by the Cabinet.

Source: The Himalayan Times

Improving access to health: Sub-health posts to take full shape

KATHMANDU, JAN 11 -

The Ministry of Health and Population (MoHP) is upgrading 522 sub-health posts to health posts this year after the Cabinet gave a nod in this regard on Dec. 26.

Although the government had

planned upgrading 1,000 sub-health posts, the Cabinet okayed only 522 this fiscal year. The Cabinet also approved recruitment of 1,251 staff in the upgraded health posts, according to Bhabindra Karki, press advisor to Health Minister Uma Kant Chaudhary.

The MoHP has, however, sent a proposal to the Ministry of General Administration (MoGA) requesting approval for the upgradation of the remaining 478 sub-health posts in the next fiscal year.

At present, there are 3,104 sub-health posts and 699 health posts across the country. "The idea is to increase public access to health services and provide quality and essential health services to the general people," said Lila Raj Poudel, section officer at the policy, planning division at the Ministry.

Under the Free Essential Health Care Services, the government has been providing 40 essential drugs to district hospitals, 32 to health posts and 22 to sub-health posts since 2007.

The Cabinet also directed the Health Ministry to conduct a survey on these upgraded health posts. The upgraded health posts will provide emergency services, primary treatment and maternity test services.

Source: eKantipur.com

Prescription of Heartache

Anoj Gurung, Pokhara University

If you lost a loved one or beloved pet, how would you feel? How do you get over an ex-girlfriend when you have to face her practically every day? You probably feel overwhelm with grief, sorrow, and emotionally whacked out. This brings intense anguish or mental suffering which can be termed as heartache. In other word, heartache is a problem related to the ache of personality because of grief. It is not of physical nature rather emotional distress. It embraces the emotional aspect of health. Many people suffer from heartache

“heartache is a problem related to the ache of personality because of grief.”

throughout the world, which can ultimately lead to serious health problem in later life.

It just hurts to see a love that was once there but is not there now. We used to be so close and now we are practically like strangers. People often withstand this suffering by deliberately killing oneself, involving in anti-social activities like kidnapping, murder, rape, drug abuse, prostitution, crime, robbery, stealing etc. But these are not the right solutions. There is indeed a prescription for heartache i.e. Physical activity and positive thinking.

The sufferer must avoid the temptation to sit and brood. One should be engaged in different physical activities like walking, riding, playing, joining gym, fitness class, toastmasters, swimming etc. These things help to avoid compulsive thinking about the painful situa-

tions. Muscular activities utilize another part of brain and therefore shift the strain and gives relief. According to Norman Vincent, the best medicine of a broken heart for a sorrowing woman is “to take a scrubbing brush and get down on your knees and go back to work.” Likewise, the best medicine for a sorrowing man is “to get an axe and chop wood until physically tired.” While this is not guaranteed to be a complete cure for heartache, it does tend to mitigate such suffering to some extent.

Another strong point is the positive

“the best medicine of a broken heart for a sorrowing woman is “to take a scrubbing brush and get down on your knees and go back to work.”

Likewise, the best medicine for a sorrowing man is “to get an axe and chop wood until physically tired.”

thinking. Thinking too much and making oneself too much annoyed, irritated and upset is unhealthy personality behavior which needs to be treated in time. One should be self-actualized that it is normal to feel sad, angry, exhausted, frus-



trated and this feeling can be intense. Accept that reaction like these will lessen overtime. Fill your mind with some creative and innovative ideas. Give yourself a break. None is superman and superwoman. Take time to heal. Re-group and re-energize. Share your feeling with friends and family. It can help you to get through this suffering. Recognize that it is ok to have a different feeling and giving up does not always mean, you are weak; sometimes it means that you are strong enough to let go and sadness flies away on the wings of time.

Whatever the character of your heartache, the first steps is to resolve to escape from any defeatist situation, which may have been created around yourself, even though it is difficult to do so, and return once again to the normal course of your life. Taking up our old associations and forming new ones can help to boost up our personality as a whole. Lose yourself to some worthwhile project; give emphasis on the physical aspect of activity. Involve yourself in mind-relieving stuff, but be sure that it is of a worthwhile and constructive nature.

Superficial escapism through feverish activities such as parties and drinking merely removes the pain temporarily but it does not heal that pain permanently. Keeping mind busy in physical activities and positive thinking help to recover heartache big time. Thus, one should seek for these attributes.

PHP Special

Leprosy also known as Hansen disease is a chronic infectious disease caused by *Mycobacterium leprae*. It mainly affects the skin, the peripheral nerves, mucosa of the upper respiratory tract, the eyes, and causes nerve damage, leading to muscle weakness and atrophy, and permanent disabilities. Leprosy has afflicted humanity since time immemorial. It once affected every continent and left behind a terrifying image in



history and human memory of mutilation, rejection, and exclusion from society. There are mainly two types of leprosy—Multibacillary and Paucibacillary. Among them, multibacillary is more dangerous.

Leprosy research scientists still do not completely understand how leprosy is spread. Presence of infectious cases in environment, infected nasal drops, overcrowding, poor ventilation favor the development of leprosy. It is predominantly found between the ages of 10 to 20. However, the prevalence is higher in male than in female. It is transmitted through breast

milk of lepromatous mother but is not transmitted by talking to a person with leprosy, shaking hand, hugging, and caring a patient, eating and living together.

Leprosy is easily diagnosed by examining skin, checking for patches and its numbers, testing for sensation, and looking for damages to nerves. One is supposed to have leprosy, if his/her skin patches do not itch, has diffuse infiltration and/or nodules, tingling sensation of limbs, loss or thinning of eyebrow, weakness of mus-

mount importance in the prevention of leprosy.

Nepal: leprosy eliminated country

On Tuesday 19th January 2010, Minister of Health & Population, declared elimination of Leprosy as a public health problem in Nepal. Elimination of Leprosy as a public health problem is defined as prevalence rate of below 1 per 10,000 population at the national level. Ma-

ease and provision of free MDT for treatment. Special interventions for case detec-

“A new environment, in which patients will not hesitate to come forward for diagnosis and treatment at any health facility, must be created.”

tion were also undertaken in the high endemic districts.

Treatment of leprosy needs to be fully integrated into general health ser-

Leprosy: A Whacked Out Disease

cles (hands, feet and eyes), and nerve pain.

Leprosy is curable and treatment provided in the early stages averts disability. It can be easily treated with a 6–12 month course of mul-

“Leprosy is curable and treatment provided in the early stages averts disability.”

tidrug therapy (MDT). The treatment is highly effective, and has few side effects and low relapse rates. There is no known drug resistance.

Health education should be focused on personal hygiene and general cleaning. Periodic screening of disease and early diagnosis and treatment of the cases should be prioritized. Multidrug therapy surveillance, chemoprophylaxis, immunoprophylaxis are of para-

major collaborative partners of the leprosy program in the country have been the World Health Organization, Sasaki Memorial Health Foundation, The Nippon Foundation, Netherlands Leprosy Relief, The Leprosy Mission, International Nepal Fellowship, Nepal Leprosy Trust, and many others.

Leprosy elimination has been achieved in Nepal by implementation of community awareness programs aimed at

services for the successful continuation of elimination status of the disease. The most effective way of preventing further transmission of the disease, lies in early diagnosis and treatment with MDT. Surveillance, monitoring and ensuring accessible and uninterrupted MDT services available to all patients through flexible and patient-friendly drug delivery systems should also be conducted. A new environment, in which patients will not hesitate to come forward for diagnosis and treatment at any health facility, must be created.



early leprosy cases detection, expansion of the services to community level, reduction of stigma attached to the dis-

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Global Health

Preventing mother-to-child transmission of HIV during breastfeeding

14 January 2011

The Kesho Bora study ("A better future", Swahili) found that giving HIV positive mothers a com-



Photo credit: Virginia Lamprecht

bination of three antiretroviral drugs (ARVs) during pregnancy, delivery and breastfeeding cuts HIV infections in infants by 43% by the age of one year and reduces transmissions during breastfeeding by 54% compared with the previously recommended ARV drug regimen stopped at delivery.

Giving HIV-positive pregnant women (and those planning pregnancy) priority access to ARVs will help eliminate mother-to-child transmission of HIV.

Source : WHO

Avian influenza - situation in Egypt

13 January 2011

The Ministry of Health of Egypt has announced a new case of human infection of H5N1 avian influenza. A 10-year-old male from Giza Governorate, developed symptoms on 5 January and was hospitalized on 8 January. He is in a stable condition.

Investigations into the source of infection indicated that the case had expo-

sure to poultry.

The case was confirmed by the Egyptian Central Public Health Laboratories, a National Influenza Center of the WHO Global Influenza Surveillance Network (GISN).

Of the 120 cases confirmed to date in Egypt, 40 have been fatal.

Source : WHO

Urgent action essential to protect malaria therapies says WHO

12 January 2011 | Geneva

The world risks losing its most potent treatment for malaria unless steps are quickly taken to prevent the development and spread of drug resistant parasites, according to a new action plan released today by WHO and Roll Back Malaria partnership (RBM).

The Global plan for artemisinin resistance containment outlines the necessary actions to contain and prevent resistance to artemisinins, which are the critical component of artemisinin-based combination therapies (ACTs), the most potent weapon in treating falciparum malaria, the deadliest form of the disease. Resistance to artemisinins has already emerged in areas on the Cambodia-Thailand border. Although ACTs are currently more than 90% efficacious around the world, quick action is essential. If these treatments fail, many countries will have nothing to fall back on.

Source : WHO

Haiti Earthquake 2010: One year later

11 January 2011

For Haiti's health sector, 2010 was a year of unprecedented challenges. The January 12 earth-

quake claimed the lives of more than 200 000 Haitians, including some 300 health workers, and injured many thousands more, while causing serious dam-



Photo credit: WHO/PAHO

age and disruption to health infrastructure, services and supply lines. The cholera epidemic added new difficulties just as the health sector was beginning to recover and rebuild. Ten weeks after the start of the epidemic, all departments are affected. As of 1 January, the MSPP has reported 171 304 cumulative cholera cases with 3651 deaths.

Source : WHO

South Korea confirms additional bird flu outbreak

10 January 2011

South Korea, confirmed an additional bird flu outbreak at a duck farm in Jeolla Province, amid the country's worst outbreak of foot-and-mouth disease from the All ducks at the farm and other 70,000 birds at four farms within a 500-meter radius, totaling 84,000, have been culled as a precautionary measure. The latest outbreak marks the third case of bird flu after two cases confirmed in Cheonan and Iksan on Dec. 31. South Korea has been hit by avian influenza three times, with the last outbreak in April 2008. It had been a bird flu-free country since 2008, but lost this status when last month's two cases were confirmed.

Source : Xinhua News

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GREAT SAYING

“An Ounce of Public Health is Worth a Pound of Health Care”

“Public Health Works for You”

Journal Watch

Dating and Sex among Emerging Adults in Nepal

Dating culture encourages premarital and extramarital sexual behavior, an October 2010 Journal of Adolescent Research study found. It also explores the perception and practice of dating and its relation to sexual practices.

Social and cultural changes in Nepal, including better communication facilities and transport, more urbanization and a rising age at which people marry, have created more opportunities for young people for “dating.” Focus group discussions with a total of 75 participants and 31 in-depth individual interviews were conducted among young people in Nepal. The following

themes were identified, some of which are overlapping: (a) attitude towards dating; (b) opportunity for partnership formation; (c) girls find it hard to make the first move; (d) factors encouraging dating; (e) dating place; (f) factors encouraging premarital sex and the role of dating; (g) dating with extramarital partners; (h) barriers to dating; and (i) concerns about safe sex.

Most urban and rural young people liked the dating culture. Although it is a new kind of culture in Nepalese society, it is gaining popularity. The mass media were regarded as encouraging

and creating an environment for dating. The authors underpin their findings by linking it to the “emerging adulthood” framework. In terms of public health, they recommend that dating practice should be discussed in formal and informal education to promote safer sex. The online version of this article can be found at: <http://jar.sagepub.com/content/early/2010/11/13/0743558410384735>

Authors: Pramod Raj Regmi, Edwin R. van Teijlingen, Padam Simkhada and Dev R.Acharya ♦

Expansion of Visceral Leishmaniasis to the Western Hilly Part of Nepal

Visceral Leishmaniasis (VL) cases have been recently reported from the regions that were previously considered to be non-endemic in Nepal, according to a Jan AJTMH study.

VL, known as Kala-azar in Nepal was found in a 13-year-old male from Doti who was referred to Sukraraj Tropical and Infectious Disease Hospital (STIDH), Kathmandu, from Nepalgunj Medical College in February 2009.

Leishmania species amastigotes were found in the bone marrow aspiration smear, and rK39 test was positive, confirming *Leishmania* infection. The patient was treated with Amphotericin B with the initial dose of 0.5 mg/kg body weight, which was gradually increased to 1 mg/kg for 14 days, with total dose of 405 mg. The patient was given a transfusion of six units of whole blood during treatment and was clinically improved as indicated by the absence of fever, shrinking spleen size, and absence of amastigote.

The patient was free from symptoms for about 5 months after treatment.

The patient revisited STIDH in July 2009, with chief complaints of fever and abdominal distension. Physical examinations, Ultrasonography of abdominal, Laboratory examinations were performed. Although amastigotes were not found in the bone marrow smear, a relapse case of VL was suspected based on the clinical features, decreased hemoglobin level, and previous VL history.

The patient was treated with Amphotericin B (1 mg/kg body weight) for 18 days with a total dose of 515 mg. The patient was given a transfusion of 2 units of whole blood during treatment and was clinically improved. This is the first report of VL from the non-endemic far western hilly region of Nepal.

Previously study reported a VL case from Midwestern region of Nepal. However, it was unclear if this patient was infected

with VL in this region because of the history of traveling to India. In this study, however, the patient had no history of traveling to India or VL endemic regions of Nepal, suggesting that VL was expanding into newer areas. Full text article at: *Am. J. Trop. Med. Hyg.*, 84(1), 2011, pp. 107-108.

Authors: Basu Dev Pandey, Sher Bahadur Pun, Osamu Kaneko, Kishor Pandey, and Kenji Hirayama ♦

GREAT SAYING

“Public Health is Contagious - Spread the Word”

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Phr. Ashik Banstola, Dr. SitaRam Khadka, Dr. Suresh Bastakoti

The authors of this book are enthusiastically working in the field of Hospital & Clinical Pharmacy" and they do have firm motivation to develop clinical pharmacy in Nepal. THIS BOOK IS ONE OF THE INDICATION OF THAT.

Prof Dr Panna Thapa, Bpharm, M Pharm, PhD
Dean, Kathmandu University, School of Science
Former Chairman of the Nepal Pharmacy Council

This book is definitely going to be the milestone for the practicing students/pharmacists in the hospital & clinical settings. I really appreciate the strong will power and efficiency of authors of this book, which will add more bricks to the foundation of the healthy environment.

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WHO Publications

Preventing intimate partner and sexual violence against women: taking action and generating evidence

This document aims to provide sufficient information for policy-makers and planners to develop data-driven and evidence-based programmes for preventing intimate partner and sexual violence against women. Download Available at:

http://whqlibdoc.who.int/publications/2010/9789241564007_eng.pdf

Bulletin of WHO Vol. 89. No. 01, 2011

The Bulletin of the World Health Organization is an international journal of public health with a special focus on developing countries. Since it was first published in 1948, the Bulletin has become one of the world's leading public health journals. As the flagship periodical of the World Health Organization (WHO), the Bulletin draws on WHO experts as editorial advisers, reviewers and authors as well as on external collaborators. For more info visit:

<http://www.who.int/bulletin/volumes/89/1/en/index.html>

Progress on sanitation and drinking-water 2010 update

The latest report of the WHO/UNICEF Joint Monitoring Programme on Water Supply and Sanitation entitled "Progress on sanitation and drinking-water – 2010 Update" provides the most recent data for drinking-water and sanitation, along with the implications and trends these new data reveal for reaching the basic sanitation and safe drinking-water MDG target. With the MDG target date of 2015 only five years away, it is time to intensify efforts towards achieving the MDG target and addressing the glaring world-wide. Download Available at

http://whqlibdoc.who.int/publications/2010/9789241563956_eng_full_text.pdf

First WHO report on neglected tropical diseases

This report presents evidence to demonstrate that activities undertaken to prevent and control neglected tropical diseases are producing results – and that achievements are being recognized. By 2008, preventive chemotherapy had reached more than 670 million people in 75 countries. Download Available at

http://whqlibdoc.who.int/publications/2010/9789241564090_eng.pdf

Being Healthy

Be acquainted with Cold

Winter storms and cold temperatures can be hazardous. But if you plan ahead, you can stay safe and healthy. During winter, cold is the most common and life taking health problem which mostly affects people living in Upper Mountain and lower Terai areas of Nepal. Life in southern Terai has been hugely affected due to the persistent cold weather and dense

fog. Many schools also have been closed in districts of these regions.

Cold is predominantly known as common cold. It refers to upper respiratory infection of the upper respiratory tract, including the nose and throat. There

Photo: Public Health Perspective © 2011



are about 200 different types of viruses that cause cold of which the Rhinovirus is the most common virus. Common cold affects every person but children below five years and elderly person

are at higher risk. Hence almost everyone is familiar with the symptoms of common cold such as low-grade fever, sneezing, watery eyes, runny nose, stuffy nose, body aches, headache, fatigue, sore throat and cough. The cases with these symptoms are mild, and most people recover from it without complications. However, some cases of the common cold can lead to more serious infections and complications like pneumonia, otitis media, acute bronchitis, sinusitis and worsening of asthma. Since the common cold is caused by a virus, antibiotics will not help it get better. It is better to take antibiotics only in complicated cases.

The best way to deal with it is to prevent it. Wear warm clothes. Woolen clothes are the best. Avoid exposure to

cold. If you have to go outside wear woolen caps, shocks, boots, jackets, gloves, scarf. Get out of driving in cold weather if you can. Otherwise use chest guards, knee caps, gloves, helmets. Use handkerchief while sneezing, drink excess warm water, do exercise, eat vegetables and citrus fruits like orange, lemon, amala, grapes, etc. You can also set fire. Remember! It can be devastating if special attention is not performed. Moreover, cleanse your throat as it moistens a sore throat and bring temporary relief. This process is known as gargling. The best thing to gargle is to use distilled warm water with a teaspoon of salt. Tea with added honey and ginger can also be used as it tightens the membranes. Take a nice steamy shower as it clears up the passages inside. Take a lot of rest since it is another natural remedy. Do not smoke! Smoking weakens the immune system making the person more susceptible to cold.

Special care for neonates and infants

Cold easily affects neonates and infants. No matter. Here is the best and the easiest preventive method. The kangaroo care (skin to skin care) technique. It involves resting the baby on the chest of his/her mother care giver, the rhythm adult's ing to lize that baby. eral stud-have kangaroo prevents mia, cold and monia. It also breastfeeding ability helps maintain proper ing. In addition infants should always be covered with warm clothes like blanket, woolen caps, shocks, gloves, etc.



Public Health Perspective Online Newsletter

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>>Kangaroo Care technique

APPLY FOR CAMPUS LIAISON

Participation on the PHP team is an opportunity to get involved in PHP activities, develop and demonstrate leadership skills, as well as work with some terrific colleagues. The campus Liaisons will have opportunities to shape the activities and strategic directions of PHP. In addition, Liaisons serve as their college representative to the PHP by helping to: reporting news from their college in general and the program of study in specific.

Serving as a campus liaison does not require a large time commitment. Campus liaisons distribute information, for example, by speaking at new student orientations and to your student society or association about PHP. PHP will provide necessary materials needed for this position. This position will also provide students with a unique opportunity to become more cognizant of health news around the nation.

Being a campus liaison for PHP is a great way to demonstrate the team work ability with the professional development as campus liaisons names and their colleges are mentioned in every issues of PHP.

If you are interested in participating as a Campus Liaison and have any questions about the Liaison position, please contact us.

Email: newsletter.php@gmail.com

Our Campus Liaisons



Tilak Mahatara

**Nobel College, Sinamangal,
Kathmandu**

See what our Campus Liaisons say

"As a public health student, I was always interested to work with some innovative and terrific colleagues. I found PHP and was highly influenced by its objectives and visions. I am proud that I was chosen as qualified campus liaison. Thank you PHP!"

–Tilak Mahatara, Nobel College,
Sinamangal, Kathmandu



Srishti Shrestha

**Padma Nursing Home, School of
Nursing
Pokhara**

"It feels so good to be a part of PHP campus liaison, it has provided me an opportunity to explore myself in many ways. Handful of thanks to PHP for making me feel different among my colleagues."

–Srishti Shrestha, Padma Nursing
Home, School of Nursing, Pokhara

Interesting Facts!

- > Women have a better sense of smell than men.
- > The human brain has the capacity to store everything that you experience.
- > When you take a step, you are using up to 200 muscles.
- > Every time you sneeze some of your brain cells die.
- > There is a disease called "ichthyosis" that turns the skin scaly like a fish.
- > On average, there's 100 billion neurons in the human brain.
- > It takes approximately 12 hours for food to entirely digest.
- > Fingernails grow nearly 4 times faster than toenails!
- > Smells that are made from the right nostril are more pleasant than the left.
- > During menstruation, the sensitivity of a woman's middle finger is reduced.
- > Deep breathing gives you health benefits similar to aerobics.
- > Contrary to popular beliefs, chocolate does not cause acne.
- > An average adult produces about half a liter of flatulent gas per day.

Send Letters to the editor

All readers can post comments on articles and news mentioned in PHP or could be suggestions and compliments.

Send letters to:

newsletter.php@gmail.com

Word limit 150 max. and the title of news or articles of critique

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