



THE TIMES OF INDIA

FRIDAY

Delhi Times

January 21, 2000



Anupam Sibal

Consultant paediatric gastroenterologist & hepatologist, Apollo Hospital

on the strides made in the field of paediatrics in recent times

What was the significance of the conference 'Paediatric care in the next millennium', which was held in the Capital recently?

The conference 'Paediatric care in the next millennium', which was held in the Capital on December 19, apart from attempting an overview of past developments, focused on what is likely to happen in the future. For instance, going by present research and experiments, we will soon have new vaccines, a single vaccination for five or six ailments etc. Special attention was focussed on gene therapy, by which, contrary to conventional techniques, diseases can be treated by tackling defects in the gene.

What were the other subjects covered at the conference?

Vaccinology, renal problems, liver diseases, genetic disorders, critical care, neonatology, cancer, blood disorders and infectious diseases were the other subjects covered at the conference.

As far as paediatrics is concerned, what have been the major achievements in recent times?

The major achievements include development of safe and effective vaccines, organ transplants — liver, kidney and bone marrow. We've had remarkable success with liver transplants. India has kept pace with the progress in the West as far as transplants are concerned.

What will be the scene in the next century as far as paediatricians are concerned?

There will be greater emphasis on preventive paediatrics. The focus in tertiary centres will shift from infectious diseases to chronic diseases. Paediatric superspecialists will play a greater role; they



will be required to manage complex problems, but in close cooperation with paediatricians.

Is there a need for paediatric superspecialists when adult specialists exist?

A paediatric superspecialist is one who has greater specialisation in the field than paediatricians. Paediatrics is expanding at a rapid pace. Newer diseases are being identified, investigations that require considerable skill are becoming available and treatment options are constantly changing. Therefore, there is a need for paediatric superspecialists to manage complex conditions for which paediatricians need help and support. Adult specialists cannot be a substitute for paediatric superspecialists because the spectrum of diseases in children is different from adults and let us not forget that a child is not a miniature adult. For instance, as far as liver disorders are concerned, alcohol abuse is a major problem in adults, but in children, congenital defects and inherited disorders are the major problems.

Savita Tambwekar

An overweight toddler usually sheds extra flab



GROWING PAINS

EDITED BY DR ANUPAM SIBAL

Like every week, today we'll discuss the common problems of growing children and adolescents in this column. Our panel of experts will also answer questions on disorders relating to the liver, heart, chest, kidney, hormones, nerves, digestive system and blood. On a postcard send a brief note on your child's troubles to: **Growing Pains, HT City, Hindustan Times House (First Floor), 18-20 Kasturba Gandhi Marg, New Delhi-110001.**

● Our 3-year-old daughter is overweight. Both my spouse and I are obese, too. At this age, do you suggest that we maintain our child at her present weight and let natural development thin her down? Or should we take active steps to make her lose weight? Are there any general guidelines on

dieting for small children?

Dr Anupam Sibal, consultant paediatric gastroenterologist and hepatologist, says overweight toddlers usually thin down by the age of five, but most toddlers who share your daughter's medical history, if left unmanaged, become permanently obese. If you compare two obese infants, one with obese parents and the other with normal-weight parents, the former has six times more chances of becoming an obese child. Relatively few infants continue to be overweight till they turn five, but they may add on weight at any time and continue into adult life. It would be helpful to know the previous dynamics of the three-year-old as she may just be 'on the way down'. Not all the issues regarding the risks of childhood obesity are clear, but only 10 per cent persist through to adulthood. I would want to turn the tide as soon as possible. The first thing

to do would be to ensure that your girl does not have a medical illness (hormone problem) that can explain her obesity. I would advise the following:

- Keep a diary of all items your child eats daily.
- Ban sweets, crisps, biscuits, cakes and ice-cream and most of all sweet 'energy-giving' drinks.
- Eliminate snacks. Reduce all sugars and fats.
- Encourage physical activity. Make exercise a habit for the entire family.
- Ensure that your child's weight grows, but steadily.

A Bout Of Typhoid Does Not Provide Immunity, Vaccinate Your Child

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● My nine-month-old daughter was diagnosed as suffering from cow's milk allergy when she was five months old. She now has no symptoms. Is it safe to start her on cow's milk now?

— RUPALI

Dr Anupam Sibal, paediatric gastroenterologist and hepatologist, Apollo Hospital, says cow's milk allergy is usually transitory, hence a trial of cow's milk after the age of one year is recommended. Whether this should be done at home or under medical supervision is determined by

the clinical presentation of the problem. If your daughter had suffered diarrhoea with acute abdominal pain, vomiting, failure to gain weight (gastro intestinal symptoms), it would be safe to introduce her to cow's milk at home. If, however, she had an immediate reaction like skin rash, swelling of lips, then it would be advisable to deal with the problem under the supervision of a doctor.

● My son has just recovered from typhoid. Does he need to be vaccinated?

— RITIKA

Dr Arvind Taneja, consultant paediatrician, Holy Family Hospital, says your child has just recovered from typhoid, I presume with the help of antibiotics administered to him, cutting short the natural course of the disease. He would have developed some degree of immunity due to the clinical disease, but this immunity is not absolute or perfect. We have all seen children and adults being afflicted by typhoid on more than one occasion. Therefore, the recommendation is that after a convalescent period of at least four more weeks, you must get your son vaccinated with the injectable



typhoid vaccine.

A word of caution: The injectable vaccine as currently available, gives at best a seven per cent protection against typhoid fever and not absolute protection. This degree of immunity can easily be overwhelmed if the inoculum of the ineffective bacteria ingested is large enough. It is therefore important that extra care and precautions are taken to ensure that the food of the child is hygienically prepared and served. Avoid eating out. The injectable typhoid vaccine as currently available

in our country does not prevent paratyphoid fever, which has an almost identical clinical presentation as typhoid fever. The oral typhoid vaccine is available in a capsule formulation and so can not be administered to a child below 8-10 years of age. This vaccine too, is imperfect and offers only 75 per cent immunity. Both the injectable and the oral vaccines have to be re-administered every three years to maintain the immunity levels (however, imperfect) of the individual, at least till the age of 25-30 years.

Beware! Your Child Could Be Prone To TB

This week Dr Vimlesh Seth, consultant paediatrician, All India Institute of Medical Sciences, talks about tuberculosis in children and the ways to cope with it.

• Tuberculosis (TB) is a common disease in India and may occur in all age groups including very young children.

• TB is caused by the bacteria — mycobacterium tuberculosis.

• A large number of this bacteria is infused into the surrounding air through a person suffering from tuberculosis when he/she coughs. When a healthy person breathes this air the bacteria enters the lung through the respiratory tract. Once the bacteria enters the lungs, it may trigger off the disease, irrespective of the health or age of the person. The chances of a child contracting the disease are more, because of their low resistance. The elderly and the malnourished

also fall in the vulnerable category.

- TB can affect all the organs of the body including lungs, intestines, brain and bones. The spread of the disease in the body is more common in children because of less resistance, thus it is a serious disease in children.
- Unlike adults, TB in children may not manifest with specific symptoms (i.e. cough, blood in sputum). It may be fever, cough, inability to gain weight, weight loss and a decreased appetite.
- TB is curable even though the treatment is long. The medication and duration of treatment depends on the type of the disease.
- If treatment for TB is irregular (i.e. less dose, less duration) the disease may recur and may not respond to routine drugs. This is called resistant tuberculosis.
- Treatment of resistant tuberculosis is difficult and very expensive. Hence, for

prevention of resistance, regular treatment as advised by a doctor should be taken.

• TB is not a hereditary disease as it is caused by a bacteria. However, it may occur in multiple members of a family because of the infectious nature of the disease.

• The spread of TB can be prevented by observing certain precautions such as early diagnosis of the disease. The patient should take regular treatment, cough with his mouth covered and there should be proper disposal of the patient's sputum.

• BCG vaccination at birth provides protection against severe tuberculosis.

• Children suffering from tuberculosis do not need isolation. They should be treated with drugs and a nutritious diet at home.

दैनिक जागरण

नई दिल्ली, बृहस्पतिवार 27 अप्रैल 2000



गजधानी में कपिलदेव और अजय जडेजा हेपेटाइटिस बी के खिलाफ जागरूकता का आढान किया। जागरण

कपिल व जडेजा का हेपेटाइटिस बी के खिलाफ जनजागृति का आवान

जागरण संवाददाता

नई दिल्ली, 26 अप्रैल। मैच फिक्सिंग पर प्रश्नों के बातेसर पर से बचते हुये कपिल देव तथा अजय जडेजा ने आज यहां जानलेवा बीमारी हेपेटाइटिस के खिलाफ जनजागृति उत्पन्न करने के लिए एक अभियान का शुभारम्भ किया और इस खामोश हवायार के विस्तृद्वारा लड़ाई लड़ने के लिए मीडिया से भी सहयोग का आवान किया। उल्लेखनीय है कि हेपेटाइटिस विषाणु को इस की तुलना में 200 गुना अधिक संक्रामक माना गया है। सभी मुद्दों पर मीडिया को एक मुख्य आधार बताते हुये कपिल देव ने इस अवसर पर कहा कि मीडिया हेपेटाइटिस तथा अन्य बीमारियों से बचाव का संदेश अपेक्षाकृत अधिक कागर ढंग से जनता के बीच पहुंचा सकता है। हम सभी के लिए अब यह आवश्यक हो गया कि इस समस्या से निवाटने के लिए एकजुट हो जायें। हमें आगामी पीढ़ियों को और देखना होगा। मैंके पर जमा पत्रकार कपिल व जडेजा से मैच फिक्सिंग पर कुछ नया उगलवाना चाहते थे लेकिन दोनों ने इस अवसर को ऐसे प्रश्नों के मंच के रूप में न प्रयोग करने की अपील की

जिसे मान लिया गया। कपिल व जडेजा ने इस मौके पर लिवर डिसीसेज इन चाइल्डहुड (बच्चों में यकृत की बीमारियों) नामक एक बुकलेट को भी जारी किया। इससे पहले अभियान की आयोजक संस्था चिल्ड्रेन्स लिवर डिसीस अवैरनेस एंड सफोर्ट प्रोग्राम के डाक्टर अनुपम सिंचल ने कहा इस समय चार करोड़ भारतीय हेपेटाइटिस बी के ग्रसित हैं और उनमें अन्य संक्रमणों के अलावा सिरोसिस तथा लिवर कैंसर का सबसे बड़ा खतरा है। उन्होंने कहा सबसे अधिक चिंताजनक तो यह है कि देश में प्रति वर्ष जन्म के समय ही 270000 बच्चे हेपेटाइटिस बी विषाणु से संक्रमित हो जाते हैं और उनमें से 90 प्रतिशत इस बीमारी के वाहक बन जाते हैं। इस बीमारी का उपचार काफी मंग्हा, तकलीफदेह तथा केवल 60 प्रतिशत ही सफल होता है। जडेजा ने इस बात पर दुख प्रकट किया कि एइस की तरह इस बीमारी के प्रति जागृति उत्पन्न करने के प्रयास नहीं हुये हैं। चूंकि यह बीमारी अधिकांशतः शिशुओं और बच्चों में ही होती है अतः इसके खिलाफ के प्रति लोग जागरूक नहीं हो पाते।

PHOTO: H. C. TIWARI



Lawyer K. S. Johar (left) and Dr Anupam Sibal have just launched a-zhealthonline.com

But although *a-zhealthonline.com*'s USP is child-care, other health portals are not far behind. Consider *emedlife.com*'s health-related articles, which, compared to *a-zhealthonline.com*, are not too tedious to read and don't sound like school book reading. A brainchild of three IIT graduates and Dr Rajeev Lochan, Cardiologist, Indraprastha Apollo Hospital, the website has articles on issues like how a fitness freak's body may not be all that fit and you'll find interesting info on the do's and don'ts of aerobics, something surfers will always want to know. You'll find tips on matters like tackling forgetfulness or getting rid of bouts of hiccups, which make easy reading.

But with health portals competing so vigorously with one another, if one falters, you have hope from the other. Which is why you can't ignore the alternative medicine section of *galaxyofhealth.com*, which tells you all that you've ever wanted to know about music, gemstone and massage therapies, to name just a few.

But one wishes the site explained to us how to use these therapies effectively even at home. Meanwhile, *a-zhealthonline.com* plans to introduce an alternative medicine section. Sibal also promises "a virtual medical shop, directory of doctors in the city and even online medical insurance." Way to go, doc!

Your Virtual Doc Is A Click Away

ABHILASHA OJHA

What should be your ideal weight if you stand 5 feet 6 inches tall? How does music therapy help in curing diseases? How should you tackle a hangover? How much of exercise is really essential for the body? These are just some of the queries that will attract your attention the minute you decide to step into the world of those innumerable health portals. And if you've skipped your daily doze of *galaxyofhealth.com* or *emedlife.com*, don't fret, for last week it was the turn of Dr Anupam Sibal, *HT City* columnist and Paediatrician, Indraprastha Apollo Hospital, to team up with his school-time friend, and lawyer, K. S. Johar, to launch their *a-zhealthonline.com*, which he describes as "a comprehensive health portal that will provide netizens with all the information they need on health-related issues."

But are these health portals really empower people to the extent that they don't need their physicians any longer? "Not at all, despite health portals and the exhaustive information they provide, people won't stop going to doctors, but the idea is to inform them about various diseases

and what causes them," he says. In fact, that's how he and his friend got together to launch this portal. The site, undoubtedly, is very user-friendly and the section on body-mass index is a sure winner, where you're informed of your ideal weight just by clicking the mouse. But given Sibal's innings as a paediatrician, the section on child-care does stand a class apart and informs surfers about all the diseases that may afflict a child and ways to tackle them.

Health Portals: A Countdown

- ***a-zhealthonline.com***: Started by Dr Anupam Sibal, Paediatrician, Indraprastha Apollo, and his school-time lawyer friend, K. S. Johar, the site is particularly beneficial for those who want complete info on child-care.
- ***galaxyofhealth.com***: This one's a brainchild of Dr Vikram Sharma, Consultant Urologist, Aashlok Hospital, and has an extensive section on alternate medicine. From the usual reiki healing to music, gemstone and other such therapies, it's an interactive health portal.
- ***emedlife.com***: The site has features that interest the netizens on a day-to-day-basis. It addresses questions like: How fit is a fitness freak's body? How do you rid yourself of hiccups? How does one learn not to forget things at work?
- ***apnadoctor.com***: The site doesn't have informative articles for the health-conscious public, but it allows doctors to interact freely with one another through the Medical Community channel.

HT

CITY

TAKE 5



DR ANUPAM SIBAL
PAEDIATRICIAN

Five Tips to avoid jaundice & infective hepatitis

1 Safe Water: Always ask yourself - is the water safe to drink or not? Drink filtered and boiled water.

2 Raw, unwashed, uncooked vegetables are a no-no: If you are not sure that the yummy-looking salad has been washed with clean water, do not eat it.

3 Avoid fruit juices and goodies from outside: Chaat, paani-puri, lassi and fresh fruit juice is always tempting, but the water used for washing and adding in the drink is unsafe. Resist the temptation.

4 Wash your hands: It's not just one of grandma's nuskhas, the doctors endorse it too. Always wash your hands thoroughly with soap before eating.

5 Maintain hygiene: The infective hepatitis virus is excreted in faeces, so personal hygiene is of utmost importance.

Will my unborn be affected with haemophilia?

LIKE EVERY week, today too we discuss the common problems of growing children and adolescents in this column. Our panel of experts will also answer questions on disorders relating to the liver, heart, chest, kidney, hormones, nerves, digestive system and blood.

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years of age or is quite big in size. Application of a coin or strapping over the umbilical hernia is not recommended as it might endanger the underlying bowel loops.

DR D. K. GUPTA, PAEDIATRIC SURGEON

My 3-year-old son has haemophilia. We are planning another baby. Is it possible to find out whether an unborn baby is affected with haemophilia?

Yes, it is possible to determine whether the unborn baby has inherited the affected gene or not. At 8 weeks of pregnancy, a chorionic biopsy can be taken from the mother and a DNA test done to detect the affected gene. The test is reasonably safe and dependable.

DR RAJESH MEHTA, PAEDIATRIC HAEMATOLOGIST

What is the optimum age for BCG vaccination? How does that so? Please advise.

Your son has an umbilical hernia. Majority of these hernia resolve on their own by 6 months to 1 year of age. Surgical correction is indicated if it does not resolve by 2 years of age. A booster dose is required after 3 years.

DR A. P. DUBEY, CONVENOR OF PEDIATRICS IMMUNISATION COMMITTEE

This week **DR A.P. DUBEY, Convenor Indian Academy of Pediatrics Immunisation Committee** talks about the vaccines available for typhoid fever.

TA Vaccine: Two doses are given subcutaneously at 4-8 weeks interval. The vaccine can be given from 6-9 months of age. A booster dose is required after 3 years.

Vi Antigen Vaccine: This vaccine is effective after two

years of age. Only one dose is required to be given intramuscularly. It needs to be repeated every 3-5 years.

Typhoid Vaccine: This vaccine is given as three oral capsules on alternate days.

The age of immunisation is 6 years and above. This provides protection for 3-5 years.

Oral Vaccine: Antibiotics should not be given 5-7 days before or after taking these capsules. Out of

the 3 vaccines, the TA Vaccine

is the cheapest. After an attack of typhoid, the vaccine can be given after 4 weeks of cure to prevent a relapse. The Indian Academy of Pediatrics

encourages active promotion of immunisation against typhoid fever in all communities.

Apart from immunisation, environmental sanitation, safe drinking water and hygienic food habits are ideal methods of prevention.

Immunisation is the only cure for typhoid fever

one know if the vaccination has worked?

The BCG vaccination should be given as early as possible after birth because of high endemicity of tuberculosis in our country. This is one vaccine which can induce immunity from birth onwards. The presence of a scar at the site of inoculation after 8-12 weeks means that BCG vaccine has been taken up. If no scar develops then the vaccine has not been taken up and should be repeated.

DR A. P. DUBEY, CONVENOR INDIAN ACADEMY OF PEDIATRICS IMMUNISATION

Growing Pains

EDITED BY **DR ANUPAM SIBAL**

