Earwax Also known as earwax impaction, earwax blockage, earwax buildup, cerumen impaction Overview The outer ear canal has glands that produce a wax-like substance called cerumen. This is a normal and protective process that repels water and traps dust particles, microbes, and dead skin cells. Eventually, this accumulated ear wax dries up and falls out of the ear canal. In fact, the absence of ear wax is linked to dry, itchy ears, and sometimes infections. Hence, the removal of ear wax is not required under ideal circumstances.

However, excessive buildup of ear wax can cause pain, itching, irritation, and a feeling of fullness in the ear. Hearing loss and ringing in the ears (tinnitus) might also be experienced.

In such cases, it may be necessary to remove excessive ear wax. A variety of over-the-counter (OTC) products and aids are available for the same. If multiple attempts to remove the buildup are ineffective, see an ear, nose, and throat (ENT) specialist.

To prevent excessive wax buildup avoid putting small things like hairpins, headphones, cotton buds, etc. in your ears. These objects can push the wax further down the ear canal. Causes Of Earwax Buildup

Earwax is a sticky substance that is made up of dead skin cells, and sweat mixed with dirt, and contains oil. The sweat glands in the skin of the human external auditory canal, together with sebaceous glands, produce ear wax. It has lubricating and self-cleaning agents with protective, emollient, and bactericidal properties. Ear wax build-up can be due to: Failure to self-clear because of slow skin migration Putting small things like cotton buds, hairpins, headphones etc. in your ears. These objects can push the wax further down the ear canal. Types Of Earwax Buildup

Mostly everyone’s ears produce earwax. However, its composition varies from person to person.

The 2 primary types of ear wax are wet and dry. Apart from these, here is a guide to different types of earwax:

Yellow and soft earwax: This type of ear wax is a sign of healthy ear wax production. It is soft in consistency. It is new wax and doesn’t harden too much before it falls out from the ear.

Pale and flaky earwax: It is also a sign of a self-cleaning mechanism of your ear. This type of wax easily falls out of the ear.

Brown and firm earwax: Brownish or darker color earwax is a sign of older and sometimes harder ear wax. This could be a sign of ear impaction.

Smelly ear wax: Smelly ear wax could be an early sign of any ear infection that might need a doctor’s intervention.

Liquid or runny earwax: It is a form of wet earwax that usually occurs after swimming or diving. However, sometimes it can occur due to other middle ear infections or ruptured eardrums.

Blood-tinged earwax: If you find blood in your earwax, it’s a sign of some injury to the ear canal.

Is the color of your ear wax telling you something? The color and consistency of your earwax can also vary depending on your environment and diet. Take care of your ears like any other part of your body. Check out our ear care range

Symptoms Of Earwax Buildup

Earwax acts as a natural barrier that prevents bacteria and dirt from entering the innermost parts of the ears. But, if it builds up, it can cause severe ear pain and infections by irritating your ears wall and preventing you from hearing well. Earwax build-up and blockage may cause the following symptoms:

Itchiness in the ear A feeling of fullness in the ear Foul odor or discharge from the ear Earpain Otalgia (ear infection with pain) A sensation of air trapped in the ear or plugged Tinnitus (ringing or noises in the ear) Partial hearing loss or decreased hearing Dizziness Cough Vertigo

Want to learn more about ear pain? Read to know about the 5 common causes of ear pain and how to deal with them. Tap here

Risk factors Of Earwax Buildup

Anatomical deformities like narrow ear canals or ear canals that are not fully formed. Very hairy ear canals. Benign (non-cancerous) bony growths or osteomas, in the outer part of the ear canal Certain skin conditions like eczema Older age Recurring ear infections Auto-immune conditions like Sjogren’s syndrome and Lupus. Individuals with a gene variant -ABCC11 in their DNA Use cotton buds to clear the earwax. Diagnosis Of Earwax Buildup

Diagnosing earwax blockages or impaction often only requires a medical history and physical examination by an ear, nose, and throat (ENT) specialist. Medical history

An ENT specialist will ask several questions related to the symptoms you may be experiencing. Your doctor may also enquire about any history of major or minor ailments or ear surgery.

Physical examination

During your physical exam, your ENT specialist will inspect parts of the ear including the outer, middle, and inner ear, ear canal, and tympanic membrane (eardrum) with an otoscope (a medical equipment that shines a beam of light for visual examination of the eardrum and the passage of the outer ear).

Some people cannot accurately convey symptoms, such as those suffering from dementia or developmental delay, nonverbal individuals with behavioral changes, and young children with fever, speech delay, or parental concerns. In these people, earwax is removed when it limits examination.

Note: Earwax can also compromise vestibular testing (a series of tests that can evaluate hearing function) and should therefore be removed before these tests are performed. Specialist To Treat

Specialists that can help to treat earwax impaction include: General physicians ENT specialists Pediatricians (in the case of children)

Otolaryngologists also known as ENT specialists diagnose and treat conditions of the interconnected head, nose, and throat systems.

When to see a doctor? Consult an ENT specialist immediately, if you notice the following symptoms: Fever Prolonged earache for more than a week A foul odor from your ear Fluid coming out of your ear

If you or your loved ones are experiencing such symptoms, don’t wait to consult an expert. Book your appointment now

Prevention of Earwax Buildup Mostly, the ears clean themselves by slowly moving earwax out of the ear canal opening. However, excessive blockages of earwax can be prevented with the following tips:

Don’t use long objects for earwax cleaning as it can damage the ear canal or eardrum, or push earwax farther into the canal. Never insert earbuds or other devices deeper into the ear canal for ear wax cleaning, as it may push the wax more inside and irritate the ear wall, leading to serious infections. Use earplugs while taking showers, or while swimming. It will help you to prevent infection by blocking the entry of moisture or water droplets. Always dry your outer ear by gently cleaning it with a cotton swab. It will help you to avoid any trapping of water or moisture inside the ear canal. Use OTC ear drops to soften and remove ear wax if you have a history of producing excessive earwax. Do not irrigate your ears frequently as this can inflame the ear canal and causes pain, or ear infection. Avoid ear candling hasn’t been proven to be safe or effective, and can be dangerous.

Listen to our experts talk about the correct way to clean your ears. Watch this video now. Treatment Of Earwax Buildup

Earwax blockage can be treated or removed in several ways. Most common methods include: 1. Irrigating or syringing with warm water It is one of the most common processes used to clean earwax. Your doctor will fill a syringe with lukewarm water to rinse out the ear canal with water. In some cases, your doctor may use saline solution in place of warm water. Finally, your doctor can check and remove the remaining wax manually using special instruments such as spoons, forceps, or suction devices. Note: Irrigation should not be performed if you have a history of ear surgery or anatomic abnormalities of the ear canal(birth defect). 2. Microsuction technique Removal of impacted earwax requires an instrument for visualization such as an otoscope, headlamp, or binocular microscope, and for removal, a micro-suction device along with a thin long tube. During this procedure, your doctor fits a thin nozzle in your ear to vacuum out the wax by applying gentle pressure with the help of a suction pump.

1. Medicines Over-the-counter (OTC) drugs or topical solutions are present to clear earwax blockages. These preparations are also known as cerumenolytics (solutions to dissolve wax) and are commonly used are:

Hydrogen peroxide Sodium bicarbonate Carbamide peroxide

You can use some natural cerumenolytic solutions in the ear canal. These solutions include: Mineral oil Baby oil Glycerin Saline solution

How to use the drops? Put a few drops of solution into the ear with a dropper and lie down for at least 5 minutes. You may hear a bubbling sound inside your ear and it’s normal. This is due to the foaming action of earwax removal. After a few minutes, lie on the opposite side so that the solution can rinse out of the ear canal containing wax in dissolved form. Clean the outer part of the ear with a small piece of cotton.

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Home care For Earwax Buildup

By using topical solutions or cerumenolytics removal of earwax can be done at home. But sometimes, earwax build-up creates pain, foul discharge, and a feeling of fullness in the ear. These symptoms can be relieved at home with simple home remedies. However, make sure to take consent from your healthcare provider before trying these home remedies: Chewing gum: If your ears are plugged or you have a feeling of fullness even after the removal of earwax. Chewing gum can relieve the pressure in the middle ear. If this doesn’t work, try to take deep breaths and blow out of your nose gently while pinching your nostrils closed. Honey (Shahad): Sometimes earwax blockages cause cough. To treat a cough at home, the best remedy is honey due to its mucolytic property. You can eat a spoonful of honey or mix it with warm water.

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Ginger (Adrak): It has natural anti-inflammatory properties that can help soothe a sore throat or cough. Applying ginger juice around the outer ear canal can relieve ear pains.

Read about other health benefits of ginger. Tap here

Olive oil: A few drops of olive oil into the affected ear can act as a lubricant and helps in getting rid of the infection as well as the blockages due to earwax. Garlic (Lehsun): It has both antibiotic and analgesic properties. Warm a few cloves of garlic in eucalyptus oil. Cool, filter the oil, and apply a few drops of this garlic oil around the outer parts of the affected ear.

Want to know how to use garlic to improve your health? Read this now

Complications Of Earwax Buildup

If excessive earwax is not removed, it may turn the symptoms of earwax blockage worse. Other complications include: Perforated eardrum: A ruptured eardrum is a tear or hole in the thin tissue (tympanic membrane) that separates the outer ear from the middle ear. An untreated ruptured eardrum can cause severe pain due to infection.

Note: A perforated eardrum can also be caused due to loud music, head injury, or any foreign entity in the ear.

Middle-ear infection: Some people develop an inflammation in the ear canal and later ear infection after irrigation. As earwax works as a physical barrier and prevents the entry of bugs, dirt, etc into the ear. Therefore, removing it completely can cause middle ear infections. Mostly mild ones are cleared up on their own but in some cases, ear drops(antibiotics) are needed to treat the infection.

External-ear infection (swimmer’s ear): This doesn’t mean that you are a regular swimmer. It occurs when moisture or water is trapped in the ear canal causing pain and a feeling of something being stuck inside the ear. This can be caused by taking showers, washing hair, or being in a moist or humid environment. Did you know? Covid-19 and ear infections are interlinked. Researchers have found that SARS-CoV-2 can infect inner ear cells and cause hearing loss in some individuals. Covid-19 is still infecting many people. Read about the latest updates on the effectiveness of COVID treatments, antiviral therapy, and vaccines against COVID variants. Click now Frequently Asked Questions Is ear wax serious? Can earwax cause memory loss? Does earwax smell? Is earwax blockage permanent? What does dark earwax mean? Key Facts Usually seen in All age groups Gender affected Both men and women Body part(s) involved Ear Mimicking Conditions Foreign body in the external ear canal Perforation of the eardrum Otitis Middle ear disease Dysfunction of the eustachian tube Necessary health tests/imaging Physical examination with the help of otoscope Treatment Irrigating or syringing with warm water Microsuction technique Medicines: Hydrogen peroxide, Sodium bicarbonate, and Carbamide peroxide. Specialists to consult General Physician ENT specialists (Otolaryngologists ) Pediatrician References Outer ear infection: What helps if earwax builds up? National Center for Biotechnology Information. Updated online February 13, 2020. Jessica A. Schumann; Michael L. Toscano; Nicholas Pfleghaar.Ear Irrigation. National Library Of Medicine. Updated online 26 Sep. 2022. Katharine A. Prokop-Prigge , Erica Thaler , Charles J. Wysocki, George Preti. Identification of volatile organic compounds in human cerumen. Journal of Chromatography B. Published online 5 February 2014. Justin O. Sevy; Marc H. Hohman; Anumeha Singh.Impaction Removal. National Library Of Medicine. Updated online 01 March 2023. Jun Ohashi, Izumi Naka, Naoyuki Tsuchiya. The impact of natural selection on an ABCC11 SNP determining earwax type. National Library of Medicine. Published online 11 Oct. 2010. Katharine A.,Corrine J. Mansfield,M. Rockwell Parker,Erica Thaler, Elizabeth A. Grice,Charles J. Wysocki,and George Preti. ETHNIC/RACIAL AND GENETIC INFLUENCES ON CERUMEN ODOR PROFILES. National Library of Medicine. Published online 13 Dec. 20114. Engy Shokry and Nelson Filho. Insights into cerumen and application in diagnostics: past, present and future prospective.National Library of Medicine. Published online 15 Oct 2017. Paola Marchisio, Carlotta Pipolo, Dario Consonni, Alberto Saibene, Giovanni Felisati, Susanna Esposito and Nicola Principi. Cerumen in Children: A Neglected but Fundamental Problem. IAPO Manual Of Pediatric Otorhinolaryngology. Interamerican Association Of Pediatric Otorhinolaryngology. Brian Doctrow. SARS-CoV-2 infection of the inner ear. National Institutes of Health. Published online 9 Nov. 2021 Ragini Bhatia , Anil Chauhan , Kulbir Kaur, Monika Rana, Pranita Pradhan and Meenu Singh. Prevalence of Ear Infections in Children (0 to 15 Years) of India: A Systematic Review and Meta-Analysis. International Archives of Public Health and Community Medicine. Published online 2022. Saiko Sugiura , Minori Yasue, Takashi Sakurai, Chieko Sumigaki, Yasue Uchida, Tsutomu Nakashima, Kenji Toba. Effect of cerumen impaction on hearing and cognitive functions in Japanese older adults with cognitive impairment. National Library Of Medicine. Published online 2014. Antonella Bisogno , Alfonso Scarpa , Stefano Di Girolamo , Pietro De Luca , Claudia Cassandro , Pasquale Viola , Filippo Ricciardiello, Antonio Greco, Marco De Vincentiis, Massimo Ralli , Arianna Di Stadio. Hearing Loss and Cognitive Impairment: Epidemiology, Common Pathophysiological Findings, and Treatment Considerations. National Library Of Medicine. Published online 17 Oct. 2021. Jonathan C Radford. Treatment of impacted ear wax: a case for increased community- based microsuction. ResearchGate. Published online 01 April 2020. Earwax Build-up. National Health Service systems in the United Kingdom.Updated on 28 January 2021. Earwax types. Earworx. Updated online 2022.

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Ectopic pregnancy Also known as Extrauterine pregnancy or Tubal pregnancy Overview Ectopic pregnancy(EP) refers to the pregnancy occurring outside the uterus, typically in the fallopian tube. In a normal pregnancy, the fertilized egg travels through the fallopian tube and attaches to the uterine lining. The various risk factors associated with EP include advanced maternal age, history of previous EP, pelvic inflammatory disease, Chlamydia trachomatis infection, smoking, endometriosis, etc. Symptoms of ectopic pregnancy may manifest as abdominal pain, vaginal bleeding, shoulder pain, dizziness, or fainting. However, in some cases, initial symptoms may be absent.

If left untreated, an ectopic pregnancy can lead to the rupture of the fallopian tube, causing severe bleeding and potentially life-threatening complications. Treatment options for ectopic pregnancy include medication to halt the progression of the pregnancy or surgical removal of the ectopic pregnancy.

Early diagnosis and prompt treatment are crucial to prevent significant complications and improve outcomes for women with ectopic pregnancy. Key Facts Usually seen in Women older than 35 years Gender affected Women Body part(s) involved Uterus Fallopian tube Cervix Abdominal cavity Ovary Prevalence Worldwide: 1-2% (2022) Mimicking Conditions Ovarian torsion Tubo-ovarian abscess Appendicitis Hemorrhagic corpus luteum Ovarian cyst rupture Threatened miscarriage Incomplete miscarriage Pelvic inflammatory disease Ureteral calculi Necessary health tests/imaging Physical examination Vaginal ultrasound Blood test: HCG and progesterone levels Laparoscopy Dilation and Curettage (D&C) Treatment Medication: Methotrexate Surgery: Salpingectomy, salpingostomy Expectant management See All Symptoms Of Ectopic pregnancy

An ectopic pregnancy can first appear as a normal pregnancy. The symptoms of ectopic pregnancy can mimic miscarriage or the symptoms of other female reproductive disorders. The symptoms of ectopic pregnancy can include: Missed period, morning sickness, and breast tenderness Pain in the lower abdomen Pain in the lower back Cramps on one side of the pelvis Vaginal bleeding or spotting Sudden and severe pain in the lower abdomen (if the fallopian tube ruptures).

The symptoms of normal pregnancy and ectopic pregnancy can be the same, especially in the early stages. To know more about the basics of pregnancy Read here

Causes Of Ectopic pregnancy

The fallopian tube has a carefully controlled environment that facilitates oocyte (egg cell) transport, fertilization, and migration of the early embryo to the uterus for implantation. Any damage to the fallopian tubes can induce its dysfunction and thereby retention of an oocyte or embryo. Ectopic pregnancy can also occur in the cervix, ovaries, the muscle of the uterus, abdominal cavity, etc. discussed in detail in the next section. Types of Ectopic pregnancy The different types of ectopic pregnancy include: Tubal ectopic pregnancy (in the fallopian tube) - Either ampullary (in the middle part of the Fallopian tube), - Isthmic (in the upper part of the Fallopian tube close to the uterus) - Fimbrial (at the end of the tube) Cesarean scar pregnancy (within a cesarean section scar on the uterus) Cervical pregnancy (on the cervix) Cornual pregnancy (within an abnormally shaped uterus) Ovarian pregnancy (in or on the ovary) Intramural pregnancy (in the muscle of the uterus) Abdominal pregnancy (in the abdomen) Heterotopic pregnancy (co-existence of an intrauterine pregnancy with an ectopic pregnancy) Did you know? Over 90% of ectopic pregnancies occur in fallopian tubes. Research has shown that about 70% of EPs occur in the ampullary portion, 12% in the isthmic portion, and about 11% in the fimbrial end of the Fallopian tube. Risk Factors For Ectopic pregnancy Up to 50 % of women diagnosed with EPs have no identifiable risk factors. However, the following risk factors have been associated with EP: Age above 35 or older A history of ectopic pregnancy Pelvic inflammatory disease (PID) especially caused by Chlamydia Trachomatis infection A history of miscarriage A history of repeated induced abortions A history of infertility issues or medications to stimulate ovulation Taking a progesterone-only oral contraceptive pill History of assisted reproductive technology (ART) such as in vitro fertilization(IVF). Any abnormality in the shape of the Fallopian tube, such as a birth defect. Any causes of pelvic adhesions, including endometriosis, and appendicitis, that may distort the shape of the fallopian tube Prior abdominal surgeries such as a cesarean section Past pelvic surgeries like tubal ligation (having your fallopian tubes’ tied or clamped to prevent pregnancy). An intrauterine device (IUD) in place at the time of conception Other health conditions like genital tuberculosis Did you know? The transport of an oocyte and embryo through the fallopian tube relies on both muscle contraction and ciliary beating (Cilia are small hair-like protuberances lining the fallopian tube). The ciliary beat frequency is negatively affected by tobacco smoking, making smoking an important risk factor for ectopic pregnancy. Find Out! How Smoking Affects Women’s Health. Read here Diagnosis Of Ectopic pregnancy

It can be difficult to diagnose an ectopic pregnancy from the symptoms alone, as they can be similar to other conditions. The steps that are often followed to diagnose an early ectopic pregnancy include:

1. Medical history and physical examination: Your doctor will ask about your medical history and symptoms, and will examine your abdomen. The doctor will first confirm the pregnancy test. With your consent, your doctor may also do a vaginal (internal) examination.
2. Blood tests: A test for the level of the pregnancy hormone βhCG (beta human chorionic gonadotrophin) and progesterone level or a test every few days to examine for variations in the levels of these hormones, may help to make a diagnosis. These levels usually rise throughout normal pregnancy, but if they don’t, it could be a symptom of an irregular pregnancy, such as an ectopic pregnancy or an approaching miscarriage.

If you are looking to book a test just sitting back at home, you are just a click away. Book Now! 3. Vaginal ultrasound: An ectopic pregnancy is usually diagnosed by doing a transvaginal ultrasound scan (in which a probe is softly put into your vagina). A transvaginal scan helps to identify the exact location of your pregnancy. 4. Laparoscopy: This is also called keyhole surgery. In some cases, laparoscopy is needed to confirm the diagnosis of an ectopic pregnancy. This procedure is also used in the treatment of ectopic pregnancy. It is done by using a small telescope to look at your pelvis by making a tiny cut, usually into the umbilicus (tummy button).

Note: The combination of a urinary pregnancy test, transvaginal ultrasound, and serum hCG estimations is commonly used to enable the early diagnosis of ectopic pregnancy. Early diagnosis and treatment can help prevent serious complications. Celebs affected Tamar Braxton Singer and reality TV star Tamar Braxton shared her experience with ectopic pregnancy in a 2018 episode of her show “Braxton Family Values.” She underwent emergency surgery to have one of her fallopian tubes removed. Kajol Famous Bollywood actress Kajol was operated on for ectopic pregnancy in 2001. In one of her interviews, she mentioned that “family support is one major thing which helps to go through this difficult phase.” Prevention Of Ectopic pregnancy In general, women cannot prevent Ectopic pregnancy (EP), however, the following points can help reduce the risk of EP: Here are certain steps that can help reduce the risk of ectopic pregnancy:

1. Use contraception: When having sex, use a condom. This can reduce your chances of developing pelvic inflammatory disease and sexually transmitted infections.

Explore our wide range of contraceptive measures. Explore here 2. Get tested for sexually transmitted infections (STIs): Certain STIs, such as chlamydia and gonorrhea, can cause pelvic inflammatory disease (PID), which raises the chance of ectopic pregnancy. Getting tested for STIs and treating any infections as soon as possible can help lower this risk. 3. Quit smoking: Smoking may raise your chances of developing EP. To lessen the risk, women should quit smoking or avoid being exposed to cigarette smoke before attempting to conceive.

Here we have an anti-smoking cessation range that will help you to stop your craving for smoking. Explore here

1. Get early prenatal care: If you do become pregnant, seeking early prenatal care can help ensure that any potential problems are detected and addressed as soon as possible. This can help lower the risk of complications, such as ectopic pregnancy.
2. Awareness about sex education: Women should receive their first “sex education” as young teenagers, which should cover the danger of infertility as a result of smoking, drug use, vaginal douching, and unsafe sex. During preconception counseling, the woman can be checked for ectopic pregnancy risk factors and told about the signs and symptoms of an ectopic pregnancy, as well as the need for early detection. Specialist To Visit

If you experience any symptoms of ectopic pregnancy, such as abdominal pain, vaginal bleeding, or dizziness, etc,it is important to visit a:

General physician Gynecologist Obstetrician

Consulting the right expert can help you get the right medical advice. Talk to our experts. Book Consultation Now

Treatment Of Ectopic pregnancy Ectopic pregnancy may be treated in several ways. This depends on whether the fallopian tube has broken open (ruptured), how far along the pregnancy is, and your hormone levels. Treatments may include: 1. Medications Your doctor may suggest a drug called methotrexate to halt the pregnancy if you are early in your pregnancy and there are no symptoms of internal bleeding. By preventing cell growth, this medication puts an end to the pregnancy and does not require the removal of the fallopian tube. It may sometimes require a follow-up injection or surgery. After the medicine is administered, doctors perform blood tests to detect hCG levels every week to determine whether methotrexate treatment was successful. If hCG cannot be detected, the treatment is considered effective. If methotrexate fails, a second dose or surgery is required. General precautions to be taken: Women should limit their exposure to sunlight during treatment since methotrexate can promote sensitivity to sunlight and sunburn. Women who are taking methotrexate should avoid alcohol and folic acid (folate)-containing supplements. 2. Surgery An ectopic pregnancy can be removed from the fallopian tube by using two types of surgical procedures called salpingostomy and salpingectomy. These procedures can be performed by either Laparoscopy or Laparotomy. Laparoscopic (keyhole) surgery: It is done to remove the fertilized egg from the fallopian tubes. The surgery may involve removing your damaged fallopian tube (salpingectomy) or opening your fallopian tube (salpingostomy) through a small lengthwise incision in the fallopian tube to remove the ectopic pregnancy tissue. Laparotomy (open surgery): It is done to remove the ectopic pregnancy. If the pregnancy is advanced or there has been significant associated bleeding, then your doctor may perform a laparotomy, a type of surgery involving a much larger incision. 3. Expectant management It is a conservative strategy that comprises persistent observation and monitoring of the situation to determine whether any treatment is required or whether the ectopic pregnancy resolves spontaneously and successfully without intervention. Patients are closely monitored with weekly transvaginal ultrasonography and b-hCG levels are measured in the blood. 4. Recovery after treatment Following treatment, the doctor may advise the woman to undergo regular blood tests to ensure that her pregnancy hormone (hCG levels) return to zero. Otherwise, if your hormone level does not decrease or increase, you may require more treatment. Most women heal quickly after laparoscopic surgery or a methotrexate injection and are able to leave the hospital within 24 hours.  
However, you must notify your doctor immediately if you have any of the following symptoms following treatment- Feverish feeling or rise in body temperature Swelling, redness, or pus accumulation on surgical cuts Strong and foul-smelling vaginal discharge Bright red vaginal blood loss or blood clots Home Care For Ectopic pregnancy

After treatment, it is important to follow your doctor’s instructions for recovery and follow-up care. This may include- Even if you feel better sooner, you should rest for a week after your surgery. Your body requires rest to heal. Ask your family or friends to assist you with chores and errands while you recover. Walk as often, if your body allows. Perform deep breathing exercises. Avoid strenuous activities. Prevent constipation. To alleviate symptoms, it is recommended that you hydrate yourself, eat fruits and vegetables, drink plenty of water, and consume fiber-rich foods.  
If the pain gets severe, you can take painkillers after your doctor’s consultation.

Follow-up care: You may need follow-up blood tests to make sure that the ectopic pregnancy has been completely removed. Keep a follow-up appointment with your doctor. Immediately contact your doctor if you experience any unusual symptoms such as feverish, stomach ache, swelling on surgical wounds, vaginal discharge, nausea, etc. Complications Of Ectopic pregnancy The complication of ectopic pregnancy may include- Rupture of the fallopian tube: As the fertilized egg matures, it can burst the fallopian tube, resulting in serious bleeding and potentially life-threatening consequences. Infertility: Damage to a fallopian tube following an ectopic pregnancy can result in scarring and obstructions, making it harder to conceive in the future. In this case, talk to your doctor about other options to get pregnant, like IVF (in vitro fertilization). Hypovolemic shock: Severe internal bleeding can result in shock, a potentially fatal condition that requires prompt medical intervention. Alternative Therapies For Ectopic pregnancy

The only successful treatment for ectopic pregnancy is the removal of the embryo, which is usually accomplished through surgery or medicines. Delaying therapy can result in fallopian tube rupture and severe bleeding, both of which can be fatal. Alternative treatments for ectopic pregnancy, such as herbal medicines, acupuncture, or homeopathy, are ineffective. These remedies may even postpone medical intervention, which can be fatal. It is critical to seek medical help as soon as possible in order to receive proper examination and treatment. Living after Ectopic pregnancy An episode of ectopic pregnancy can be challenging both physically and emotionally. Here are some tips that may help:

1. Emotional support: Ectopic pregnancy can be distressing for women. It might mean coming to terms with the loss of your baby, with the potential impact on future fertility, or with the realization that you could have lost your life. Taking support from other people, whether friends and family, support groups, or counselling may be helpful.
2. Getting follow-up care: After the therapy is completed, the doctors will want to regularly monitor the patient. It is critical that you attend all of your follow-up appointments.
3. Seek support: It is natural to experience a variety of emotions when dealing with an ectopic pregnancy. You could be unhappy, furious, or anxious. To cope, consider seeing a therapist or joining a support group.
4. Take time to heal: It’s important to allow yourself time to heal both physically and emotionally after an ectopic pregnancy. Do not rush back into your regular schedule.
5. Consider future pregnancy: If you want to have a baby in the future, discuss your options with your doctor. It is critical to wait until you are emotionally and physically ready before attempting another kid. It is advised that you wait at least three months for your body to recuperate. Frequently Asked Questions Can I conceive again after an ectopic pregnancy? How likely is it that I will have another ectopic pregnancy? How much time gap is required after ectopic pregnancy? Is surgery required for an ectopic pregnancy? What is the best option after ectopic pregnancy? References Petrides1 A, Dinglas2 C, Chavez2 M, Taylor1 S, Mahboob1 S, CS L, et al. Revisiting ectopic pregnancy: A pictorial essay [Internet]. Journal of Clinical Imaging Science. Medknow Publications & Media Pvt Ltd; 2014 [cited 2023Apr17]. NHS choices. NHS; [cited 2023Apr17]. Sivalingam VN, Duncan WC, Kirk E, Shephard LA, Horne AW. Diagnosis and management of ectopic pregnancy [Internet]. The journal of family planning and reproductive health care. U.S. National Library of Medicine; 2011 [cited 2023Apr17]. Ectopic pregnancy (booklet) [Internet]. Reproductive Facts. [cited 2023Apr17]. Posted by: Author American International Medical University. Ectopic pregnancy : Diagnosis, complications and managment [Internet]. American International Medical University. 2017 [cited 2023Apr17]. K; A. Comprehensive care in the prevention of ectopic pregnancy and associated negative outcomes [Internet]. Midwifery today with international midwife. U.S. National Library of Medicine; [cited 2023Apr17]. Ectopic pregnancy - statpearls - NCBI bookshelf [Internet]. [cited 2023Apr17]. Ectopic pregnancy (booklet) [Internet]. Reproductive Facts. [cited 2023Apr17]. Ectopic pregnancy. [cited 2023Apr17]. Available from: What is an ectopic pregnancy? - RCOG [Internet]. [cited 2023Apr17]. Ectopic pregnancy [Internet]. Pregnancy Birth and Baby. [cited 2023Apr17].

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Eczema Overview Eczema is a common chronic skin condition characterized by dry, intensely itchy, and inflamed patches of skin. It originates from the Greek word ‘ekzein’ which means to ‘boil over’ or ‘break out’. Although there are several types of eczema, the term usually refers to the most prevalent form, called ‘atopic dermatitis’.

Atopic dermatitis results from a complex interplay between environmental and genetic factors. The word “atopic” in atopic dermatitis indicates an association with allergies. Though the condition is not always directly caused by an allergic reaction, it is commonly associated with other allergic conditions like asthma and hay fever.

The condition begins as lesions that are intensely red, bumpy patches or plaques that may ooze fluid when scratched. In chronic eczema, scratching and rubbing create skin lesions that appear scaly, dry, thicker, darker and scarred. While eczema is not contagious, the secondary skin infections associated with the condition may be.

Eczema can be lifelong and patients often cycle through long periods of symptom-free remission, followed by brief flare-ups that can be severe. However, symptoms can be prevented and managed with home care and remedies by keeping the skin healthy and moisturized. Exacerbation of eczema requires treatment in the form of corticosteroid creams. In addition to topical treatment, severe acute or chronic eczema often requires systemic immunosuppressant drugs or phototherapy. Key Facts Usually seen in All age groups but more common in children Gender affected Both men and women Body part(s) involved Skin Hands Inner elbows Neck Ankles Feet Eyes Prevalence Worldwide: 15-20% in children and 1-3% in adults (2015) India: 0.9% (2015) Mimicking Conditions Contact dermatitis Cutaneous fungal infections Seborrheic dermatitis Drug eruptions Scabies Psoriasis Ectodermal dysplasia Hyper IgE syndrome Netherton’s syndrome Wiskott-Aldrich syndrome Necessary health tests/imaging Patch test Blood tests Skin biopsy Treatment Medications: Corticosteroid creams, Antibiotics & Antihistamines Injected biologic drugs Phototherapy See All Causes Of Eczema

The exact cause of eczema is not fully known. However, there are a few theories or hypotheses regarding the underlying causes of eczema. These are not thought to be mutually exclusive and may complement each other to cause eczema. 1. Defects in skin barrier The cells that make up our skin are vital for optimal skin hydration. People with eczema tend to have dry skin due to a defect in their skin barrier.

A strong association has been found between eczema and genetic change or mutation in the filaggrin gene (FLG). It is a vital gene which is responsible for creating the tough cells that make the outermost protective layer of the skin. In a patient with normal skin cells, these cells are tightly packed in an organized manner. With gene defects, less filaggrin is produced, leading to a haphazard organization of these skin cells.

This dysfunction causes a ‘leaky’ skin barrier. Water can easily escape from this leaky skin leading to dryness and dehydration. Harmful substances or allergens can more readily penetrate the skin leading to infections. 2. Impaired defense mechanisms People with eczema have also been found to have decreased numbers of beta-defensins in the skin. Beta-defensins are proteins that are important for fighting off certain bacteria, viruses, and fungi. A decrease in Beta-defensins leads to increased susceptibility to skin infections. 3. Immunological causes The immune system develops in the first six months of life. There is usually an equilibrium between the two main types of T helper lymphocytes (a type of white blood cells) namely Th-1 and Th-2. In eczema, this balance is disrupted with excess Th-2 cells and their associated chemical messengers (cytokines).

In some kids, high levels of the immunoglobulin E (IgE) antibodies and eosinophils (the white blood cells associated with allergy) are also found.

In rare cases, a single mutation in CARD11, a gene involved in the development and function of certain immune system cells, can cause eczema. Symptoms Of Eczema

The skin of people with eczema does not retain moisture well and loses its protective properties. When this occurs, various symptoms can develop according to the phase of the disease.

In the acute phase, lesions are intensely red, bumpy patches or plaques that may ooze fluid when scratched.

In the chronic phase, scratching and rubbing create skin lesions that appear scaly, dry, thicker, darker, scarred or lichenified. Cracking of the skin or fissures can also occur.

Other common symptoms associated with eczema are: Intense itching Swollen skin Dry skin (xerosis) Skin color changes Pus discharge due to secondary infection Rash Hives Increased lines on the palms of the hands and feet Dry, pale patches on the face and upper arms Small bumps on the upper arms and thighs Double skinfold underneath the inferior eyelid (Dennie-Morgan fold)

Note: Distribution of lesions is age specific. Infants younger than 1 year old usually have the eczema rash on their cheeks, forehead, eyelids or scalp. It may spread to the knees, elbows, and trunk (but not usually the diaper area). Older children and adults usually get the rash in the flexural surfaces or bends of the elbows, behind the knees, on the neck, or on the inner wrists and ankles. Risk Factors For Eczema

Eczema results from a complex interplay between environmental and genetic factors. Genetics If a parent has atopic eczema, then the child could develop it, too. And, if both the parents have it, then there is a greater risk. Apart from this, if there is a family history of allergies, asthma or hay fever, then, too, there is a greater risk of the child developing eczema. Personal history Individuals with a personal history of allergies, hay fever or asthma have more chances of suffering from eczema.

Eczema, asthma, and hay fever are known as “atopic” conditions. These affect people who are overly sensitive to allergens in the environment. Environmental factors The irritants in our environment that can trigger eczema include: Harsh soaps Shampoos Detergents and household cleaners Dishwashing soaps and liquids Perfumes Disinfectants Glues and adhesives Chemicals used in dyes and tattoos Antibacterial ointments Fabrics like wool and polyester Pollens Molds Mites Animal dander Tobacco smoke Stress Surprisingly, stress could also be one of the causes of eczema. Likewise, eczema causes excess stress. Mental, emotional, and physical stress that may trigger eczema are: Depression Anxiety Inability to sleep Irritability

Here’s everything you need to understand about stress and its effects on your body. Click To Read!

Studies suggest some more risk factors for developing eczema. These are: Food allergies such as allergy to cow’s milk, hen’s eggs, and peanuts Being sensitized to food in infancy Cold climate Exposure to secondhand smoke Excess weight at birth Treatment with antibiotics in infancy Exposure to hard water in infancy Birth through cesarean section Avoid hot water during winters, if you have eczema The changing weather and dry air of winters can cause eczema flare-ups. Hot water can be tempting during the cold season. However, a sudden change in temperature can lead to skin irritation. Read about 5 simple skin care tips for dry skin In winter. Click Now! Diagnosis Of Eczema

An accurate diagnosis requires a physical examination of the entire skin surface along with a detailed medical and family history. If any family members have atopic conditions, it is an important clue. No specific investigations are required to diagnose eczema. However, when there is a doubt or to confirm diagnosis, the following tests can be performed. 1. Patch test A patch test is carried out to detect allergens. This helps your doctor to plan the right treatment for the allergies. They will also create a plan of action to tackle the dryness and itchiness of the skin and bring your symptoms under control. Patch test is essential particularly if the dermatitis becomes resistant to treatment. 2. Blood tests Blood tests might be performed to check for causes of rashes that may be unrelated to dermatitis. 3. Skin biopsy Skin biopsy can be done to distinguish one type of dermatitis from the other.

Read more about allergies and ways to tackle them. Click Here! Celebs affected Kate Middleton Kate Middleton, the Duchess of Cambridge, confessed that she developed eczema during her teenage years. However, she is currently known for her flawless skin. Brad Pitt Brad Pitt developed eczema during the shooting of the film, ‘The curious case of Benjamin Buttons’, due to the use of prosthetic makeup. Catherine Zeta-Jones Catherine Zeta-Jones is a famous actress and star. In 2010, she revealved that she dealt with eczema in her childhood for a long time. However, intense moisturisation of skin helped her tackle the condition. Prevention Of Eczema

Eczema is a skin condition that develops as a result of an overactive immune system, a family history, or allergens and irritants in our environment. It has no permanent cure nor it can be prevented. However, we can definitely prevent the flares if we are aware of the triggers. Some of the triggers and tips to prevent it includes: 1. Dry skin Dry skin is the most common symptom of eczema. Weather changes, harsh soaps and hot water can all cause our skin to dry. So, the best way to ensure soft skin is to look after our skin health. Here are a few tips to prevent dry skin. Apply body lotion, moisturizer or emollient, or cold-pressed coconut oil after a shower to lock in the moisture. Moisturize at bedtime, too. Ceramide containing creams are particularly useful. Place a humidifier in your bedroom during winters to moisten the air and ensure a good night’s sleep. Avoid long, hot water showers during winters as the skin is sensitive to temperature changes. Allow the body to warm up before a shower. Add a few drops of body oils to your bath. Avoid using harsh soaps, body washes, and shampoos. Avoid using cosmetics, perfumes, or toiletries that are loaded with chemicals and can trigger a skin infection.

Read about how to choose a good moisturizer for your skin. Click Here!

1. Irritants and allergens The everyday products we use contain irritants that trigger rashes on our skin. The foods that we eat cause flare-ups, too. Here are some of the common products and food items that trigger a flare-up. You can find ways to replace them with products that are gentle on the skin and foods that provide the necessary nutrients without disturbing the immune system.

Some of the common products that contain irritants include: Detergents Handwashes Baby wipes Fragrances Glues and adhesives Skincare products Wools and polyester fabrics

Foods that may cause allergies are: Milk Eggs Nuts Gluten (wheat) Spices Citrus fruits Tomatoes

Allergens are also hidden in unexpected places such as pet dander, dust mites, cockroaches, pollen, and mold. Avoiding these may prevent skin allergies leading to eczema. 3. Stress and anxiety Our mental health and well-being affect our physical health and lifestyle. Stress and worry cause a flare-up and skin infections can cause stress and anxiety. Finding ways to get out of this vicious circle will help you manage the triggers and prevent eczema flare-ups.

Sufficient sleep, a gentle workout that does not cause sweating, and meditation will help you stay calm and deal with the triggers. You could ask your doctor for therapists who will help ease your tension. Specialist To Visit

Paying close attention to allergies and staying alert to avoid the triggers is essential. Finding the right doctors and health care practitioners who will guide you and plan an appropriate treatment will give you comfort. The specialists who will help you in your fight against eczema are: Dermatologists Allergists Family doctors or general physicians Pediatricians

Eczema symptoms are sometimes mild and at other times, severe. So, please contact your doctor when: You experience excessive itching and dryness Your symptoms affect your productivity and sleep Over-the-counter medications do not bring any relief and the skin infection worsens Fever follows the symptoms

If you are having any such symptoms, seek advice from our professionals. Consult Now!

Treatment Of Eczema

Eczema is a skin condition where patches on the skin become dry, itchy, and inflamed. It does not have a diagnostic test. However, its symptoms can be treated if you are well aware of the triggers that cause flares.

Here are some of the medications that are prescribed by doctors for the treatment of the symptoms of eczema. A. Medical management 1. Corticosteroid creams and lotions: Corticosteroids are anti-inflammatory medicines that give relief from inflammation and itchiness. Some may require prescriptions. Most commonly used corticosteroids are: Prednisolone Hydrocortisone

1. Topical calcineurin inhibitors: Calcineurin inhibitors help reduce inflammation and prevent flares. Examples include: Tacrolimus Pimecrolimus
2. Barrier repair moisturizers: Barrier repair moisturizers repair the skin by reducing water loss. These are moisturizers that repair the natural moisture barriers of the skin and enable faster healing and hydration of the skin.
3. Antihistamines: They are medicines used to treat allergic skin reactions, hay fever, and allergic conditions. These cause drowsiness and hence reduce nighttime scratching to ensure a goodnight’s sleep.
4. Antibiotics: These are prescribed for bacterial infections that might develop along with eczema. These include: Flucloxacilli Erythromycin Penicillin
5. Other medications: Ciclosporin is prescribed if topical treatments aren’t reducing the symptoms. These medications should be taken as per doctor’s prescriptions and for a short period. B. Injected biologic drugs These drugs work by blocking the proteins in the immune system. This calms the immune system and results in less severe inflammation and fewer symptoms. These include: Rituximab Omalizumab Dupliximab Infliximab Mepolizumab Tocilizumab C. Phototherapy This therapy is used for eczema that is spread all over the body. In this therapy, the skin is exposed to UVA and UVB waves to treat moderate dermatitis. It needs a month or two of steady treatment to notice any improvement in the symptoms. Home-care For Eczema

Changing your lifestyle and eliminating products and food items that trigger flare-ups are the two most important things you can do to take care of your health. It is easier to prevent flare-ups but difficult to cure them permanently. So, making a gradual change instead of a quick transition will help you eventually. Here are some changes you can make at home to help prevent skin rashes or skin infections. Moisturize every day: Choose gentle body lotions and moisturizers or emollients to moisturize the skin. Ceramide containing creams are more effective in management of eczema. Add household bleach to your bath water: This helps kill the bacteria that cause the infections in eczema. It will also ease the inflammation and the itching. Add half a cup of bleach to a tub of water and soak in it for 10 minutes. Rinse well. Be gentle while drying the skin: Dab dry with the towel to wipe away the moisture. Do not scrub. Use mild soaps and body wash: Eliminate all the harsh soaps, shampoos, and body wash and replace them with products that are gentle on the skin and prevent it from drying. Try cool compress: Apply a cool compress to ease the itching. A clean, damp cloth will give you relief from the itching. Avoid scratching. Say no to hot water showers: Switch to lukewarm showers during winters. Have shorter baths and pat dry the skin. Moisturize after the shower. Use cold-pressed coconut oil: Coconut oil is antibacterial and anti-inflammatory. It helps soften dry skin and heals bacterial infections of the skin. Try vitamin supplements: Enquire about vitamin supplements such as fish oil capsules, Vitamin D, Vitamin E, zinc, selenium, probiotics, and turmeric supplements. These might be beneficial in dealing with skin infections. Avoid fabrics that irritate the skin: Switch to cotton, silk, and linen clothes. These are skin-friendly fabrics and will not cause any skin allergies. Avoid high-intensity workouts: Try a gentle exercise regimen that will prevent sweating and skin rashes. Massage your body: A body massage with the right oils or lotions will make you feel better. Look for a masseur who is experienced in giving body massages to patients with eczema. Manage mental stress: Try gentle yoga exercises and meditation for relief from stress and anxiety. Flare-ups can trigger anxiety which is not good for health.

Eczema can be caused by a variety of reasons and severe cases need help from a dermatologist. Read about home remedies to manage eczema in mild cases. Click Here!

1 mg Pro-tip: Never scratch an itch. Scratching an itch worsens the condition and makes way for bacterial infections. Instead, apply a cold moisturizer, or a gel to soothe the itch and get relief. If you fear scratching while you sleep, try wearing cotton gloves and socks to bed. Or, request your doctor to prescribe antihistamine pills to control the itching. Read everything about itching from causes to management. Click To Read! Complications Of Eczema

The main reason behind the several complications of eczema is itching. The skin gets damaged by the incessant scratching due to itchiness. This results in various infections that can worsen the condition. Cellulitis It is a bacterial infection where the bacteria infects the deeper layers of the skin. The skin is red, swollen, and very painful. It spreads rapidly and affects the lower legs, face, arms, and other areas. The bacteria enter the skin through a crack and spread infection. The swelling is followed by pain, blisters, and fever. If left untreated, it can be life-threatening. Eczema herpeticum This viral infection is caused by the virus that causes herpes. The symptoms are painful blisters, fever, and swollen lymph nodes. Molluscum contagiosum This infection is caused by a poxvirus. It causes white wounds on the skin that itch and swell. Curettage (cutting it) or cryotherapy (freezing it) are some of the ways of treating this viral infection. Neurodermatitis Itching and scratching of the skin because of eczema causes this infection. Continuous scratching causes the skin to become thick and dry. It can happen on the ankles, neck, hands, elbows, feet, shoulders, wrists, and scalp. Steroids are prescribed for its treatment along with medicines to help you sleep better and prevent scratching. Scars The constant itching and scratching because of the infection leads to scarring of the skin. Once dry, the scars fade away with time. Seborrheic dermatitis It is a type of eczema that affects the scalp. It is caused by a fungus called Malassezia yeast that is found on the surface of the skin. It causes severe dandruff, itching, and hair loss due to damaged hair follicles. It affects the forehead, nose, armpits, chest, and groin. Sleeplessness Eczema severely affects a person’s sleep. The itchiness seems worse at night and leads to scratching and discomfort. Staying away from the triggers and getting treated for the itching can help in better sleep. Depression and anxiety Eczema increases stress and anxiety because of skin rashes and itching. Likewise, stress and depression can trigger flare-ups. A support group and therapy will help you relax and find ways to tackle the flare-ups. Alternative Therpaies For Eczema

The most important part of managing eczema is understanding the triggers and making necessary changes that will help you manage your condition better. It is advised to consult your doctor before starting any alternative treatments for eczema. Some of them include: Supplements Supplements fulfill the body’s requirements of essential nutrients, strengthen the immune system, and reduce inflammation in patients. However, please inquire with your doctor before starting any of the supplements. Fish oil Vitamin D Zinc Selenium Turmeric Melatonin

Read more about the right way to take Vitamin D. Click To Read!

Ayurveda This ancient medical science uses various methods to achieve a balance between the mind and the body to heal an illness. It uses herbs, dietary changes, oils, body massages, meditation, and yoga to help purify the body from within.

But please consult with your doctor before starting an ayurvedic treatment. Even various herbs such as tannins, pansy flowers, fenugreek seeds, and alsi (flaxseeds) may also help treat dermatitis. Mindfulness and meditation Stress increases inflammation in the body and is known to trigger eczema flare-ups. Learning meditation will help you focus on the present and attain a state of calmness to bring down stress levels. Yoga Yoga is a wonderful way to practice mindfulness, and improve your breathing and flexibility. Yoga improves not just physical wellbeing but emotional and mental well-being too. The gentle exercises in yoga do not exert and cause excess sweating that could trigger skin irritation. It helps reduce stress and, therefore, inflammation that causes physical discomfort.

Some of the yoga asanas for a healthy skin are: Uttanasana Trikonasana Bhujangasana Janu sirsasana Viparita karani Acupressure Acupressure uses physical pressure on certain points on the body to unlock life energy. There are limited studies that prove if acupressure can bring relief from the symptoms of eczema, but just like body massage, it might help calm the mind and relieve mental stress. Traditional chinese medicine It incorporates acupuncture, body massage, mind-body practices, and traditional Chinese herbs to help the vital force called Qi regain balance to heal an illness. Gamma-linoleic acid Gamma linolenic acid is a fatty substance used for managing symptoms of eczema. It is found in various plant seed oils such as borage oil and evening primrose oil. Omega-3 fatty acids A study demonstrated that dietary intake of omega-3 fatty acids may have a therapeutic effect on the symptoms of eczema as they help reduce the inflammation associated with eczema. Probiotics and prebiotics Probiotics are live microbial food supplements. Prebiotics are indigestible carbohydrates that stimulate the growth of probiotic bacteria in the intestine. They are thought to be effective in reducing the incidence of eczema. However, further studies are required to prove their effectiveness in doing so. Use coconut oil to moisturize your skin. Coconut oil is a natural remedy for eczema. It moisturizes the skin and soothes dry, itchy skin. Loaded with healthy fats, coconut oil contains anti-inflammatory and antibacterial properties and antioxidants that protect the skin. Learn more about the benefits of coconut oil. Tap To Read! Living With Eczema

Living with an illness is never easy. However, a positive mindset, mindfulness, and strategies to deal with its symptoms will help you immensely. Itchy skin is the worst part of eczema and scratching an itch is prohibited. So, how do we deal with such a problem? Here are a few tips for easy living with eczema. 1. Know your triggers Be aware of the triggers and foods that your are allergic and the products that irritate your skin. Being aware of the allergens and the irritants will help you make changes in your lifestyle and your everyday habits that will help in keeping the discomfort under control. Avoid direct sunlight and any exercise that causes sweating. Protect yourself from sun, heat, sweat, and sudden changes in temperature that can dry the skin. 2. Start an exercise routine Pick an exercise routine that suits you. Make sure it doesn’t exert you and makes you break into a sweat. Try something gentle like yoga or Tai chi. The benefits of exercising are multiple. Not only does it improve your physical health, but also your mental and emotional wellbeing. It helps you stay mindful, focus on breathing, and calm your mind. Exercising also helps you develop a positive attitude that is so necessary for everyday life. 3. Moisturize It is essential to keep the skin well moisturized to prevent it from itching and developing cracks that can lead to bacterial infection. Pick lotions and creams that are gentle on the skin and contain fewer chemicals. Opt for cold-pressed coconut oil. It is antibacterial, antiviral, and loaded with antioxidants that keep the skin soft and healthy. 4. Develop a hobby Any creative activity, be it drawing, singing, cooking, reading, writing, or gardening, can help keep your mind occupied. Indulging in such activities keeps us busy and happy. It also keeps the hands busy and distracts the mind from the itching and the other discomforts related to eczema. It gives you a chance to spend time with yourself, doing an activity that you enjoy. 5. Communicate Being open about your condition with family and friends is very important. It helps them be aware of your struggles and extend the help you may need sometimes. Also, communicate with your doctor regularly. Keep your doctor’s appointments so that they, too, are aware of your symptoms, flare-ups, and discomfort and will help make changes in the treatment. 6. Self-care Self-care is critical when dealing with eczema. Find time for yourself, spend time with yourself, doing things you love. Make your health and wellbeing your priority. Look after yourself like you would look after your loved ones. Frequently Asked Questions Can eczema go away on its own? What are the foods to avoid in eczema? What soothes eczema itch? Is vaseline good for eczema? Can drinking lots of water cure eczema? Is baking soda good for eczema? Can swimming pools make eczema worse? References 15 tips that will help you live a better life with eczema. Living well with eczema (and all the ways to do it). National Eczema Association. Oct 2021. Kumar P, Anand V, Hassan S. Herpes iris of Bateman. Indian Dermatology Online Journal. 2014. Shenefelt PD. Herbal Treatment for Dermatologic Disorders. In: Benzie IFF, Wachtel-Galor S, editors. Herbal Medicine: Biomolecular and Clinical Aspects. 2nd edition. Boca Raton (FL): CRC Press/Taylor & Francis; 2011. Chapter 18. Lee JH, Son SW, Cho SH. A Comprehensive Review of the Treatment of Atopic Eczema. Allergy Asthma Immunol Res. 2016. Nemeth V, Evans J. Eczema. [Updated 2021 Aug 11]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan-. Frazier W, Bhardwaj N. Atopic Dermatitis: Diagnosis and Treatment. Am Fam Physician. 2020.

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Edema Also known as Oedema, Swelling, Hydrops, Puffiness, and Dropsy Overview Edema is an observable swelling that occurs due to the accumulation of fluid in body tissues. Edema most commonly occurs in extremities like feet, ankles, legs, or hands where it is referred to as peripheral edema. There are a number of other different types of edema, usually named after the part of the body affected.

Mild edema is common and does little harm. It can develop due to spending too much time sitting or staying in bed (immobility), due to varicose veins, and pregnancy. Certain medications, allergies, or more serious underlying ailments including heart failure, liver disease, and kidney disease can also cause edema.

Dietary modifications like decreasing dietary sodium intake can help reduce fluid overload. Treatment includes use of diuretics like furosemide, and bumetanide, which can reduce edema fluid. Patients on these diuretics are commonly advised to take potassium supplements or consume foods rich in potassium such as bananas, orange juice, tomatoes, potatoes etc. Key Facts Usually seen in Adults above 40 years of age Gender affected Both men and women Body part(s) involved Face Abdomen Limbs Kidney Lungs Heart Prevalence Worldwide: 0.62 to 11.8 per thousand (2016) India: 18% (2021) Mimicking Conditions Hypothyroidism Capillary leak syndrome Angioedema Autoinflammatory disease Localized swelling Obesity Nephrotic syndrome Deep vein thrombosis Lipedema Angioedema Urticaria Cellulitis Necessary health tests/imaging Blood test: complete blood count (CBC) along with kidney function test, lipid profile and liver function test Imaging: X-ray of the chest, Echocardiography, and Magnetic Resonance Imaging (MRI). Treatment Diuretics: Acetazolamide, Theophylline, Furosemide, and Amiloride Corticosteroids: Dexamethasone See All Types Of Edema

The various types of edema include:

1. Peripheral edema: Edema of peripheral parts like legs, feet, and ankles.
2. Pedal edema: Edema of the foot.
3. Pulmonary edema: This is characterized by the accumulation of fluids in air spaces of the lungs that may lead to respiratory failure.
4. Cerebral edema: The accumulation of increased water content in the brain that may be caused due to ischemic stroke, cancer, or brain inflammation due to meningitis or encephalitis.
5. Angioedema: It generally occurs on the face and is different from hives where swelling is caused underneath the skin rather than on the surface of the skin.
6. Hereditary angioedema: It is a rare genetic condition that affects the immune system. This type of swelling generally affects the face, genitals, and abdomen.
7. Papilledema: Swelling of the optic nerve of the eye which is a result of increased intracranial pressure inside the skull and around the brain.
8. Macular edema: This condition occurs when blood vessels leak into a part of the retina called the macula, making it swell.
9. Dependent edema: It is the swelling that occurs in the legs and lower body which is affected by gravity and position.
10. Scrotal lymphedema: It is caused due to enlargement of the scrotum due to fluid accumulation around the testes.
11. Lipedema: It is a disorder of the fatty (adipose) tissue that causes swelling of the legs and hips.
12. Ascites: It is a condition in which fluid collects in spaces within the abdomen.
13. Pleural effusion: It is an abnormal, excessive collection of this fluid in the chest (lung or pleural cavity). The most common cause of the pleural effusion is heart failure.
14. Anasarca: This is a medical condition that leads to general swelling of the entire body.

The condition is also known as extreme generalized edema or massive edema.

1. Idiopathic edema: Accumulation of fluid in tissues with no particular cause.

Edema can also be broadly classified as:

1. Pitting edema: In this condition, depression is seen when pressure is applied to the skin and removed.
2. Non-pitting edema: This is a type of edema in which there is no presence of depression when pressure is applied. Symptoms Of Edema

Some of the common signs and symptoms of edema include: 1. Swelling Swelling in edema is due to fluid retention in the tissues. Swelling affects the feet, ankles, and legs the most, but it can also affect other parts such as the face, hands, and abdomen. 2. Stretched and shiny skin In edema, the skin above the swelling area may appear stretched and glossy. The stretching of the skin is due to excess fluid that pulls the skin. 3. Pitting Poor circulation or the retention of extra fluids are the most common causes of pitting edema. A dimple in the skin can be created by gently pressing in on the swelling area with the finger for at least 5 seconds and then removing your finger. 4. Aching body parts The aching pain can be local or general. It depends upon the underlying cause of edema. Excess fluid and disturbed cellular activities are the cause of pain in edema. 5. Weight gain Unexplained weight gain could be due to fluid retention. Weight gain can make limbs, hands, feet, face, or abdomen appear puffy. 6. Decreased urine output If kidney disease is the underlying cause of edema, urine output could get affected. The kidneys are vital organs that help in blood purification. During this process, the excess fluid along with toxins and waste is eliminated in the form of urine. In kidney disorders, the kidney fails to produce urine in adequate quantities and, as a result, edema develops. 7. Shortness of breath Is because of the lung’s inability to provide enough oxygen to the body. Shortness of breath also known as dyspnea develops gradually. 8. Chest pain Another symptom of pulmonary edema. If the underlying cause of pulmonary edema is a cardiac disease or chest injury it may present with severe chest pain.

Chest pain is not something to ignore! It can be life-threatening and may need immediate attention. Read about first-aid tips to follow in case of chest pain. Tap Now! Causes Of Edema When the small blood arteries (capillaries) leak fluid and fluid collects in the surrounding tissues, it leads to edema.

It could be due to a twisted ankle, a bee sting, or a skin infection. This may be beneficial in some instances, such as an infection. More fluid from your blood vessels fills the enlarged area with infection-fighting white blood cells.

However, edema could also indicate serious underlying medical conditions including: 1. Congestive heart failure One or both the lower chambers of the heart lose their capacity to pump blood effectively in congestive heart failure. Blood can back up in the legs, ankles, and feet as a result, creating edema.

This disorder can sometimes cause fluid to build up in the lungs (pulmonary edema), resulting in shortness of breath.

Worried about your heart health? Read 5 tips by cardiologists to keep your heart healthy. Click Here!

1. Liver cirrhosis Ascites (fluid accumulation in the abdominal cavity) and fluid accumulation in the legs can occur as a result of liver injury (cirrhosis).
2. Kidney disease Edema can also be caused due to kidney or renal disease. Kidney disease may lead to fluid and sodium retention in the body, causing the legs to swell.
3. Damage to veins in the legs The one-way valves in the leg veins are weakened or destroyed allowing blood to pool and produce swelling.

A blood clot (deep vein thrombosis, or DVT) in one of the leg veins can cause sudden swelling in one leg, as well as pain in the calf muscle. In this condition, one must get medical attention immediately. 5. Inadequate lymphatic system The lymphatic system aids in the removal of excess fluid from tissues. If this system gets affected, like in cancer surgery, the lymph nodes and lymph arteries that drain an area may not function properly, resulting in edema. 6. Protein deficiency Albumin and other proteins in the blood behave like sponges, allowing fluid to flow freely through your blood vessels. Over time, a deficiency of protein in the diet might result in fluid accumulation and edema. However, it is rarely the cause. 7. Allergic reactions Edema is a common side effect of allergic responses. Nearby blood vessels leak fluid into the affected area in response to the allergen. 8. Head trauma Cerebral edema can be due to low blood sodium, high altitudes, brain tumors, and a block in fluid outflow in the brain (hydrocephalus). Headache, disorientation, and unconsciousness are all possible symptoms. 9. Critical illness Burns, life-threatening infections, and other conditions can trigger a response that permits fluid to leak into practically all tissues. This can result in edema all over the body. 10. Emphysema It is a lung condition that can also cause edema in the legs and feet if the pressure in the lungs and heart gets elevated. Did you know? You can measure the efficiency of your lungs by a simple test called the pulmonary function test. Know more about it. Read Now! Risk Factors For Edema Numerous factors can up your risk of edema. They include:

1. Pregnancy: The fetus and placenta require more fluid, hence the body retains more sodium and water, making one more susceptible to edema.
2. Taking certain medicines: The following medicines increase the risk of edema: Blood-pressure lowering medications Nonsteroidal anti-inflammatory medicines (NSAIDs) Estrogens Thiazolidinediones (oral antidiabetic medicine) Corticosteroids (like prednisone and methylprednisolone)
3. Prolonged sitting or standing: This can cause edema, especially in hot weather, leading to excess fluid accumulating in the feet, ankles, and lower legs.
4. Excessive sodium consumption: Consuming too much salt (sodium) can cause swelling on the fingers and around the ankles due to excessive fluid build-up in the body’s tissues.
5. Obesity: Several studies have demonstrated an increased body mass index is widely acknowledged as a risk factor involved in the development of edema.
6. Uncontrolled diabetes: Diabetes can affect your blood circulation and cause fluid to build up in the lower extremities. Persons with diabetes frequently present with lower extremity (LE) edema.
7. Premenstrual hormonal changes: Edema is seen in 92% of women, predominantly in the second phase of the menstrual cycle due to the hormone progesterone that causes water retention. Pe-Menstrual Syndrome (PMS) is Real! Have you ever experienced mood swings, tender breasts, food cravings, fatigue, irritability, and depression before your periods? Well, the cause isn’t fully understood but it likely involves changes in hormones during the menstrual cycle. Read more on PMS. Click To Read! Diagnosis Of Edema If you experience any symptoms of edema such as swelling or puffiness, stretched skin, weight gain, or a change in urine output, then it is wise to consult a doctor.

Your doctor might do a physical examination and ask you a few questions related to your medical history. Physical examination generally includes inspecting the skin over the swollen area. The doctor may also press gently over the swollen part for about 15 - 20 seconds to see if it leaves a dimple. The doctor might ask for some more tests to diagnose the cause:

1. X-ray of the chest: A chest X-ray can help confirm the diagnosis of pulmonary edema and rule out other causes of shortness of breath.
2. Urine routine microscopy: Urine sample is analyzed to check for the presence of protein in urine. Proteins are reabsorbed and not eliminated in the urine. In kidney diseases, the kidneys fail to function properly, and as a result, protein and albumin are excreted in the urine. At the same time, the fluid having toxins is retained, which gets accumulated and gives rise to edema.
3. Ultrasound: It is a test that helps to check the distribution of edema. The intensity and spread of edema can be determined by ultrasound.
4. Echocardiography (ECG): This test can be used to determine any cardiac causes of edema.
5. Magnetic resonance imaging (MRI): The test can help identify any damage in the bone marrow that may result in the development of edema.
6. Blood test: A complete blood count (CBC) along with kidney function test, lipid profile, and liver function test is useful in diagnosing causes of edema.

In some cases, allergic tests, tests for viral or bacterial infection, or toxicity tests are recommended. Additional serological tests could be done based on the condition.

Get your lab tests done with us, where patient comfort and safety are the utmost priority. Book Now!

Celebs affected Rana Daggubatti A popular Indian actor, Rana Dagubatti, has talked about how he dealt with heart and kidney issues. He also mentioned how the edema associated with his illness affected his workout routine initially, but he was able to cope with it and recover. Selena Gomez The famous singer and actress Selena Gomez was suffering from lupus. This led to kidney failure and renal edema. She received a kidney transplant from her friend Francia Racia and is now doing well. Prevention Of Edema

Here are a few simple tips that can help you to manage and prevent edema: 1. Physical activity Try to be physically active. Sitting or standing for long periods without moving is not recommended.

Moving helps in activating the muscles in the affected body area, particularly the legs. This may assist in pumping the excess fluid back to the heart. While traveling, get up and stroll about, especially if you are flying.

Read about 5 marvelous ways in which walking can benefit your health. Read Now!

1. Eat a low sodium diet Avoid consuming too much sodium in your diet. A low-salt diet helps to regulate high blood pressure and edema.
2. Elevate your legs Raising the legs above heart level for 30 minutes three or four times a day can help with leg, ankle, and foot edema. For those with minor venous illnesses, elevating the legs may be enough to eliminate edema.
3. Drinking water Although fluid retention causes swelling, drinking water can help to lessen edema. To minimize swelling, drink 8-10 glasses of water every day. When the body is dehydrated, it maintains the fluids it already has. This results in edema.
4. Avoid alcohol Avoid consuming alcoholic beverages. If drinking alcohol produces recurring swelling, it could indicate a problem with the kidneys, liver, or heart.
5. Magnesium-rich foods Magnesium deficiency leads to retention of water in the body. Eating magnesium-rich foods like Tofu, spinach, cashews, almonds, dark chocolate, broccoli, and avocados are helpful in preventing edema.

Do you want to buy magnesium supplements? Just click here to choose from the best potassium supplements. Browse Now!

1. Foot massage Massage is an effective approach to relieve swollen feet. It helps to drain fluids and minimize edema. It is advisable to massage your feet after exercise, long hours of standing, and long journeys.
2. Increase potassium-rich foods High blood pressure and water retention are symptoms of potassium insufficiency. Potassium-rich foods including sweet potatoes, bananas, salmon, chicken, and white beans, should be consumed. In case of kidney problems, talk to your doctor before increasing your potassium consumption.

Potassium is important for normal functioning of the heart and bones! Know about top 50 indian foods that are rich in potassium. Read This!

1. Sleep on the lateral sides Sleep on your side if possible. Sleep on your left side if possible to relieve strain on the vein that transports blood from the bottom of your body to your heart. This may aid in the reduction of edema.
2. Swimming Take a dip in the pool. In the pool, try standing or walking. Water pressure can help decrease swelling in your feet and ankles by compressing tissue in your legs.

Swim your way to good health! Read more about the benefits of swimming. Click Now!

Specialist To Visit

The symptoms of edema may not always be resolved due to lifestyle changes.

It could be due to some serious underlying disease involving the heart, lungs, or kidneys.

If you experience severe chest pain or breathlessness or a change in urine output, then consult a doctor.

Specialists that can help to manage edema depending on the body parts involved include: General physician Urologist Nephrologist Pulmonologist Cardiologist Oncologist Gastroenterologist

If you are facing such an issue, seek advice from our professionals. Consult Now! Treatment Of Edema

Mild edema normally clears up on its own, especially if you speed things up by elevating the affected limb above your heart.

The drugs that are used to treat edema either stop the accumulation of fluid in cellular space or help to eliminate them. Based on their action mechanism, these drugs are: 1. Diuretics Diuretics, often known as water pills, aid in the removal of excess salt (sodium) and water from the body. This helps to clear up edema. They include: Acetazolamide Theophylline Furosemide (Lasix) Chlorthalidone (Hygroton) Hydrochlorothiazide (Esidrix) Amiloride (Midamor) 2. Corticosteroids Although it may seem contradictory, corticosteroids have a role in the treatment of edema in some advanced cancer patients. Treatment with corticosteroids is thought to minimize peritumoral edema and relieve constriction of the venous and lymphatic systems, resulting in less edema. The corticosteroids used in treating edema are: Dexamethasone Betamethasone Methylprednisolone Corticosteroids are used to manage potentially life-threatening illnesses such as autoimmune disorders and cancer. But, here are a few dos and don’ts you need to follow while taking these medications. Know More!

1. Benzopyrones The use of benzopyrones, such as coumarin and oxerutins, in the treatment of chronic edema caused by lymphatic and venous illness, has piqued interest.

Read how to effectively manage venous disease. Tap To Read!

Home-Care for Edema

Diet and lifestyle changes play a key role in the management and treatment of edema. Here are some tips you need to follow to keep edema under control:

Be active: Moving and activating the muscles, particularly your legs, can help in pumping the excess fluid back toward your heart.

Do not stay in a certain position for long: As it could interfere with venous drainage leading to edema.

Avoid prolonged standing or sitting without support! Gravity can drag fluid down into your legs and feet at times. This can lead to swelling and pain. It is necessary to get up and move about at regular intervals.

Read about 5 natural remedies to relieve pain. Click Here!

Wear compression stockings: If you have edema in one of your limbs, you can wear compression stockings, sleeves, or gloves to prevent further swelling. Do consult your doctor before using them.

Soak your legs: Soaking legs for 15 to 20 minutes in a cool epsom salt bath can be very beneficials as epsom salt (magnesium sulfate) has the potential to relieve edema and inflammation.

Try massage: Massaging the affected area with firm, but not painful pressure toward your heart may assist in shifting the excess fluid out of that area.

Eat right: Consuming asparagus, parsley, beets, grapes, green beans, leafy greens, pineapple, pumpkin, onion, leeks, and garlic could be beneficial as these are all-natural diuretic foods.

Consume foods rich in antioxidants: Blueberries, cherries, tomatoes, squash, and bell peppers are high in antioxidants.

Stay hydrated: Water is the best natural remedy for edema. You must aim to consume close to 7-8 glasses (2-3 liters) of water every day.

Increase potassium intake: Water retention can be caused by a potassium deficit. Consider eating potassium-rich foods if you don’t have any dietary limitations. Sweet potatoes, white beans, bananas, salmon, pistachios, and chicken are all rich in potassium.

Reduce consumption of salt and refined foods: Salt can aggravate edema by increasing fluid retention and refined foods such as white bread, pasta, and sugar should also be avoided. Complications Of Edema

Edema, if left untreated, can lead to the following:

Painful edema: If the cause of the swelling is not treated timely, the pain becomes increasingly unpleasant and could turn unbearable.

Difficult walking: Edema can cause pain while walking.

Infection: The risk of infection is higher in the swollen area. The slightest injury or abrasion of the swollen part can become infectious. The infection can also lead to skin ulcers.

Angiosarcoma: It is a rare cancer that develops in the inner lining of blood vessels and lymph vessels. There is 10% risk of developing angiosarcoma in patients with chronic edema lasting >10 years.

Some other complications include: Scarring between tissue layers Reduced blood circulation Reduced artery, vein, joint, and muscle flexibility. Alternative Therapies For Edema

Here are a few quick fixes on how to control and get relief from edema. 1. Ayurveda Rock salt (Sendha namak): To relieve inflammation and swelling, soak your feet in a bucket of lukewarm water with rock salt. Make sure you only use rock salt, which is thought to be a pure kind of salt. Grapefruit essential oil (Angur ka tel): Grapefruit oil is known for its antioxidant and diuretic properties. Adding a few drops of grapefruit oil to a bucket with warm water can relieve swelling. Cucumber and lemon water (Kheera and Nimbu pani): Cucumber and lemon both contain antioxidants. The nutrients present in lemons and cucumbers help as a natural diuretic. It helps to get rid of excess water while retaining essential nutrients and hydration. Watermelon (Tarbuj): Watermelon is a natural diuretic with 92% water. It stimulates urination and hence, reduces water retention and swelling. Coriander seeds (Dhaniya ke beej): Coriander seeds have anti-inflammatory properties and are widely used for reducing edema. Add 2-3 spoons of coriander seeds to a cup of water. Boil it till the quantity reduces to half. Strain and let it cool. Repeat twice a day for better results. Dandelion: As the dandelion leaf is a diuretic, it can be helpful in relieving edema, but it should not be taken along with diuretic drugs.

Read about 5 natural ayurvedic remedies for a healthy life. Click Now!

1. Yoga Yoga may help to reduce edema by increasing the flow of blood. Some of the simple yoga asanas that can help reduce edema include: Tadasana Urdhahastottasana Parsvakonasana Viparita Karani Sarvangasana Halasana Setu bandha asana Ashwa Sanchalan Katichakrasana Surya Namaskar

Note: Practicing yoga, especially mountain pose, combats edema in the limbs. By stretching the muscles and nerves in the legs, Tadasana helps to enhance blood circulation and reduce water retention. It’s one of the few yoga poses that stretch all of your muscles, even the tiniest ones, from your toes to your head.

Read about 12 health benefits of yoga. Click Here!

1. Acupressure Acupressure consists of pressing the acupuncture points in an attempt to help the free flow of energy. It is an alternate technique to manage edema which helps to enhance blood flow and reduce swelling in the feet and legs. Living With Edema

If you experience edema once in a while, it can be managed with a few lifestyle changes and posture changes. Remember, edema can also indicate underlying kidney or heart or pulmonary problems such as renal failure, congestive heart disease, or COPD. Hence, if edema appears as a result of these chronic conditions, then in addition to diet and lifestyle changes, you may also need medications and proper medical supervision.

Here are a few diet and lifestyle changes that can help in management of edema. Avoid standing or sitting in one place for long hours Keep moving your limbs to ensure smooth circulation. Wear compression stockings, sleeves, or gloves to prevent further swelling. Avoid foods that can trigger and worsen symptoms of edema like carbonated drinks, deep-fried food, fat-rich dairy, alcohol, and meat. Avoid eating trans fatty acids, which are found in baked items. Increase food rich in antioxidants. Blueberries, cherries, tomatoes, squash, and bell peppers are high in antioxidants. Consume potassium-rich foods if you don’t have any dietary limitations. Reduce your salt consumption. Avoid refined foods, such as white bread, pasta, and sugar. Edema in pregnancy Swelling in the ankles and feet can occur during pregnancy due to additional fluid in the body and pressure from the expanding uterus. As a woman’s due date approaches, the swelling tends to worsen, especially near the end of the term.

While sudden swelling of the face or hands can indicate preeclampsia (sudden high blood pressure during pregnancy), modest swelling of the ankles and feet is usually not a cause for concern.

Try these simple techniques to help lessen and/or prevent those pesky swollen ankles: Long periods of standing should be avoided. When sitting for long periods, stretch frequently. When sleeping, sleep on your left side. Before getting out of bed in the morning, put on maternity support stockings that reach your waist. Make sure you drink plenty of water. In humid or hot weather, try to stay cool and hydrated. Want to make your pregnancy comfortable? While preparing for the pregnancy, there are a lot of questions in your mind. Read about top 5 tips on pregnancy and get all your queries answered. Click To Read! References Aslesha E. A Review on Edema. RRJPA | Volume 5 | Issue 2 | August - September 2016. Trayes KP, Studdiford J, Pickle S, Tully AS. Edema: diagnosis and management. American family physician. 2013 Jul 15;88(2):102-10. Lent-Schochet D, Jialal I. Physiology, Edema. [Updated 2021 May 9]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan-. Trayes, Kathryn P et al. “Edema: diagnosis and management.” American family physician vol. 88,2 (2013): 102-10. Anand, I S et al. “Pathogenesis of oedema in chronic severe anaemia: studies of body water and sodium, renal function, haemodynamic variables, and plasma hormones.” British heart journal vol. 70,4 (1993): 357-62. doi:10.1136/hrt.70.4.357. InformedHealth.org [Internet]. Cologne, Germany: Institute for Quality and Efficiency in Health Care (IQWiG); 2006-. Causes and signs of edema. 2008 Nov 5 [Updated 2016 Dec 30]. Stout, N et al. “Chronic edema of the lower extremities: international consensus recommendations for compression therapy clinical research trials.” International angiology : a journal of the International Union of Angiology vol. 31,4 (2012): 316-29. Tsai, Feng-Hua & Chu, I-Hua & Lin, Tzu-ya & Liang, Jing-Min & Hsu, Hsiu-Tao & Wu, Wen-Lan. (2016). Preliminary evidence on the effect of Yoga on the reduction of edema in women with premenstrual syndrome. European Journal of Integrative Medicine. 10.1016/j.eujim.2016.10.001. Tacani PM, Ribeiro Dde O, Barros Guimarães BE, Machado AF, Tacani RE. Characterization of symptoms and edema distribution in premenstrual syndrome. Int J Womens Health. 2015 Mar 11;7:297-303. InformedHealth.org [Internet]. Cologne, Germany: Institute for Quality and Efficiency in Health Care (IQWiG); 2006-. Causes and signs of edema. 2008 Nov 5 [Updated 2016 Dec 30]. Mary Woods. Risk factors for the development of edema and lymphoedema. British Journal of Nursing, 2019, Vol 28, No 4. Wu SC, Crews RT, Skratsky M, Overstreet J, Yalla SV, Winder M, Ortiz J, Andersen CA. Control of lower extremity edema in patients with diabetes: Double blind randomized controlled trial assessing the efficacy of mild compression diabetic socks. Diabetes Res Clin Pract. 2017 May;127:35-43. Pk, Kaviarasan & PVS, Prasad & K, Kannambal. (2020). A review on lymphoedema – causes, confusions and complications. IP Indian Journal of Clinical and Experimental Dermatology. 6. 300-306. 10.18231/j.ijced.2020.061.

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Encephalitis Also known as Acute encephalitis syndrome (AES), Chamki bukhar and Chamki fever Overview Encephalitis, known as “chamki bukhar” in Hindi, is a disease that causes inflammation of the brain. According to the World Health Organization (WHO), acute encephalitis is defined as the acute onset of fever and a change in the mental status of a person of any age and at any time of the year. The changes in mental status include the signs and symptoms of confusion, disorientation, delirium, or coma. It may also cause an onset of seizures for the first time, especially in children, after they are infected.

Also known as acute encephalitis syndrome (AES), it mostly affects children below 15 years of age. The most common cause of encephalitis are viruses, however, in rare cases, bacteria, as well as fungi or autoimmunity can cause the illness. Japanese encephalitis (JE), a viral infection spread by mosquitoes, has been considered to be the leading cause of AES in Asia.

Encephalitis is a medical emergency and requires attention right away. The treatment of encephalitis depends on its cause. Antivirals, antibiotics, immunotherapy and supportive treatment are the main stays in management of encephalitis.

Recovery depends on the severity of symptoms experienced during the illness. Both the acute stage of the disease and its after effects can be overwhelming for patients and their families. However, various rehabilitation therapies can go a long way in helping the patients to make the best possible recovery. Key Facts Usually seen in Children below 15 years of age

Gender affected Both men and women Body part(s) involved Brain Prevalence Worldwide: 68,000 (2019) India: 10,485 (2018) Mimicking Conditions Brain abscess Bacterial meningitis Sepsis Tuberculosis Fungal infection Parasitic infection Syphilis Leptospirosis Malignancy Autoimmune or paraneoplastic diseases Drug-induced delirium Necessary health tests/imaging Neuroimaging Lumbar puncture Electroencephalogram (EEG) Intracranial pressure monitoring (ICP) Brain biopsy Treatment Immunotherapy: Steroids, IV antibodies & plasma exchange Antiviral medications: Acyclovir, Ganciclovir, Foscarnet & Ribavirin Antibiotics: Ceftriaxone, Penicillin G & Vancomycin Supportive care See All Symptoms Of Encephalitis

Acute encephalitis causes fever and a change in the mental status of a person. It may also cause an onset of seizures for the first time, especially in children, once infected. Most people suffering from the condition don’t have any symptoms. However, some might experience symptoms such as: Headache Vomiting Neck stiffness Weakness Increase in irritability Confusion Disorientation Coma Hallucinations Inability to talk or speak (Aphasia) Loss of balance (Ataxia) Involuntary movements Personality change The infection turns into illness in less than 1% of those infected. In people who develop symptoms, it usually takes around 5-15 days for the symptoms to appear after the infection.

In severe cases, AES can show symptoms such as: Hearing loss Vision impairment Seizures Unconsciousness Paralysis Coma Causes Of Encephalitis

The main cause of encephalitis in India is known to be viruses however, even bacteria, parasites, fungi, chemicals, toxins and cancer (paraneoplastic encephalitis) can also cause the disease. Various causes are discussed below:

1. Viruses Arboviruses, viruses transmitted through insect bites, are one of the most common causes of viral encephalitis. These include Japanese encephalitis and tick-borne encephalitis viruses. It is reported that people suffering from dengue, mumps, measles, scrub typhus, nipah, and zika virus are at high risk of encephalitis. Also, other viruses that can cause encephalitis include herpes simplex virus (HSV), enteroviruses, Epstein Barr virus, mosquito borne viruses, tick borne viruses, and rabies virus.
2. Autoimmunity Autoimmune encephalitis occurs when a person’s own antibodies or immune cells start to attack the brain. It can be caused by autoimmune disorders like systemic lupus erythematosus and Behcet’s disease.
3. Cancer Encephalitis associated with cancer is known as paraneoplastic encephalitis. It is caused by metastasis of cancer cells to the nervous system or by any complication of cancer such as coagulopathy, stroke, metabolic and nutritional conditions, and side effects of cancer therapy.
4. Other causes Rarely, bacteria and parasites can cause encephalitis. A severe form of leptospirosis and toxoplasmosis are associated with encephalitis. The causative agent might vary with season and geographical status. Surprisingly, in some cases, the causative agent may also remain unidentified. Risk Factors For Encephalitis

Various risk factors associated with encephalitis are:

Age Mostly, infants, young children and elderly are at a higher risk of most types of viral encephalitis. Compromised immunity People with weakened immune system like those suffering from HIV or cancer, undergoing chemotherapy or taking immune-suppressing drugs are at increased risk of encephalitis. Geographical areas Certain geographical areas which have high prevalence of mosquito or tick borne viruses see more cases of encephalitis. Season of the year Mosquito and tick borne diseases tend to be more common in summer or rainy seasons when these insects are most active. Litchi And Encephalitis: What’s The Link? Every year, many children in India, especially in Bihar, fall prey to this disease. Encephalitis seems to affect mostly children from impoverished rural families, and has often been attributed to natural toxins found in litchis which grow in abundance all around the district. Several studies have also revealed that eating litchi on an empty stomach or at night can cause encephalitis. Read the article to know more about it. Click To Read! Diagnosis Of Encephalitis

Acute encephalitis constitutes a medical emergency. The diagnosis of acute encephalitis is suspected in a febrile patient presenting altered consciousness. To diagnose encephalitis, your healthcare provider might order tests, perform a medical exam and discuss medical history.

A. Clinical history Before confirming the patient is having encephalitis, it is essential to rule out the conditions that may mimic the symptoms of encephalitis. A physician performs a detailed overview checkup, reviewing the patient’s history, and the onset of symptoms to rule out other potential causes.

B. Lab tests and imaging studies

1. Imaging tests: Tests like magnetic resonance imaging (MRI) or computed tomography (CT) can be used to view the cross-sectional area of the brain. Single photon emission computed tomography (SPECT) can also be performed depending on availability. Imaging tests can reveal the abnormalities in the brain and the cause of the seizure-like tumor, lesions, and causes of cerebral dysfunction. These tests can also check for any problems that can make performing a lumbar puncture or a spinal tap risky.
2. Lumbar puncture: Also known as a spinal tap, this test is done to obtain a sample of CSF (cerebrospinal fluid), a protective fluid that flows through the meninges that cover the brain and spinal cord. When the brain and meninges are inflamed, the number of white cells in cerebrospinal fluid increases. Sometimes, samples of CSF can be tested to identify the virus or other infectious agent that is causing encephalitis.
3. Cerebrospinal fluid (CSF) polymerase chain reaction (PCR): PCR produces many copies of a gene which helps in detecting the genetic material of viruses in a sample of cerebrospinal fluid. It has become the primary diagnostic test for central nervous system (CNS infections) caused by viruses such as cytomegalovirus (CMV), Epstein Barr virus (EBV), human herpesvirus 6 (HHV-6) and enteroviruses.
4. Electroencephalogram (EEG): EEG helps to record the brain’s electrical activity. It does not detect the virus that causes encephalitis, but certain abnormal patterns on the EEG may indicate a diagnosis of encephalitis.
5. Other lab tests: Blood tests including complete blood count (CBC) along with urine or serum toxicology screening tests may be done to test for viruses or other infectious agents.
6. Intracranial pressure monitoring (ICP): Any brain swelling can be diagnosed by increase in pressure inside the skull.
7. Brain biopsy: In very rare cases, a small sample of brain tissue might be removed for testing. This procedure is not preferred because of its high risk of complications. A brain biopsy is usually done only if the other tests do not give an answer or symptoms are worsening and treatments are having no effect.
8. Detection of intrathecal synthesis of antibodies: This test may be useful in detection of HSV, west nile virus and varicella zoster virus encephalitis. Prevention Of Encephalitis

As encephalitis can be spread from one person to another, here are few tips to prevent the infection.

Avoid sharing items with a sick person: Be it food, utensils, glasses, or any other objects, it is advised to not share anything, especially personal items, with someone who may be exposed to or have the infection.

Hand hygiene: Wash hands frequently and properly with soap and water, particularly after using the washroom and before and after meals.

Prevent mosquito bites: Eliminate the risk of being bitten by an infected mosquito or another arthropod by the following steps: Wear clothes that cover arms, legs, and feet Avoid sleeping or staying long in open areas Use mosquito repellents in your home and clothes Use mosquito screens on doors windows to prevent entry of mosquitoes in the homes Use bed nets for all members of the family during night time Use mosquito zapping devices like electric bats Invest in mosquito-repelling plants like tulsi and lemongrass Get vaccinated: Vaccines are the most effective way of reducing the risk of developing encephalitis. These include vaccines for measles, mumps, and rubella. If the specific virus is prevalent in your region, vaccines for Japanese encephalitis and tick-borne encephalitis are recommended. Vaccines have been developed for people who travel to high-risk areas as well.

Do not self medicate: Take antibiotics (only after consulting with a doctor) if you live, work, or go to school with someone who has been diagnosed with bacterial encephalitis. Should a person with encephalitis be quarantined? Some of the causes of encephalitis such as enterovirus, COVID-19, or herpes are contagious while other forms are not. This is one reason, it is important to find out the underlying cause when a patient has encephalitis. The vast number of patients with encephalitis would not require quarantine. Consult your doctor to get clarity. Consult Now! Specialist To Visit

Patients exhibiting the symptoms of encephalitis are not capable enough to take their decisions on their own. Thus, the family or caregivers must approach the emergency care team if they suspect any abnormal activities of the brain in the patient. The following doctors can be consulted: Neurologist Internal medicine specialist Infectious disease specialist Pediatrician Treatment Of Encephalitis

The key to surviving encephalitis is early detection and effective treatment of the underlying cause. Encephalitis treatment depends on the underlying cause and symptoms and may include:

1. Antiviral medications The following antiviral medications are prescribed in case of viral encephalitis: Acyclovir: It is commonly used in patients suspected with viral encephalitis, especially in case of HSV encephalitis. Ganciclovir and foscarnet: Both these drugs can be used either individually or in combination for the treatment of CMV encephalitis. Ribavirin: It might be of benefit in children with severe adenovirus or rotavirus encephalitis.
2. Antibiotics This class of medicines are used to address underlying bacterial infections causing encephalitis. Some of the common examples include: Ceftriaxone Penicillin G Vancomycin
3. Immunotherapy Immunotherapy is mostly recommended to address certain types of autoimmune encephalitis. Steroids: It is usually used as an adjunctive therapy in the treatment of tuberculosis (TB) encephalitis, bacterial encephalitis (before an antibiotic shot is given), and autoimmune encephalitis. It helps in reducing the inflammation of the brain tissue and intracranial pressure (ICP). IV antibodies (IVIG): Viral encephalitis and autoimmune encephalitis have shown benefit after the use of IV antibodies. Due to the lack of sufficient evidence in the favor of IVIG, this treatment cannot be used as a part of the standard treatment of encephalitis Plasma exchange: Therapeutic plasma exchange has shown promise especially in severe refractory cases of autoimmune encephalitis, not responding to steroids or IVIG.
4. Supportive care Supportive care includes careful monitoring of intracranial pressure, fluid restriction, suppression of fever, and monitoring of blood pressure. Also, use of a feeding tube, catheter, and breathing tube are required in some cases.

Note: Seizures should be treated with standard anticonvulsant treatment and prophylactic therapy should be considered in view of the high frequency of seizures in severe cases of encephalitis. Did you know? Patients with encephalitis who suffer from seizures and do not respond well to anti-seizure medications can benefit from a ketogenic diet. Keto diet is high in fat and low in carbohydrates. It has been found to be effective in reducing seizures in drug-resistant epilepsy in children and adults, as well as in patients with autoimmune encephalitis. Read To Know More! Home-care For Encephalitis

Self-management can help in taking care of yourself. Know about your condition Taking your medicine Talk with a doctor if you have questions Good nutrition Lower stress levels Get enough sleep Complications Of Encephalitis

Timely treatment after proper diagnosis of encephalitis can lead to better prognosis. However, if the encephalitis is left untreated, or even if the treatment is delayed, the damage to the brain can be fatal. Some of the common complications of encephalitis include: Persistent fatigue Persistent headache Weakness or lack of muscle coordination Movement disorders like tremors & involuntary muscle jerks Post encephalitis (residual) seizure disorder Paralysis Hearing or vision defects Speech impairments Decreased concentration Personality changes Memory problems Depression Living With Encephalitis

Encephalitis is a serious condition. Both the acute stage of the disease and the after effects can be overwhelming for patients and their families. Recovery can take a long time. However, the following therapies can go a long way in helping the patients to make the best possible recovery: Occupational therapy: Sometimes, encephalitis can dull the senses. An occupational therapist can help to adjust to this lack of sensation. They can also help a person improve their ability to carry out daily activities such as bathing, dressing, eating or reading. Physical therapy: The goal of physical therapy (PT) or physiotherapy is to improve mobility, restore function, reduce pain, and prevent further injury by using a variety of methods, including exercises or yoga. A physical therapist can help to regain strength and relearn movement and coordination. Speech therapy: Speech therapy is a treatment that can help improve communication skills. A speech and language therapist can help with problems producing speech. In case verbal communication is difficult, they can help in finding new and innovative ways of communication. Regular practice along with change in communication style can make communicating simpler. Cognitive therapy: Post encephalitis, many patients may experience changes in their thinking or reasoning skills. This can also lead to behavioral and mood swings. Cognitive therapy can help to regain former patterns of behavior, along with management of emotional responses. Frequently Asked Questions Is encephalitis a zoonotic disease? What is the main cause of encephalitis? Can the brain recover from encephalitis? Can encephalitis be cured? Is encephalitis a STD? References Ghosh S, Basu A. Acute Encephalitis Syndrome in India: The Changing Scenario. Ann Neurosci. 2016 Sep;23(3):131-133. Epub 2016 Sep 9. Japanese encephalitis. Key facts. World Health Organization. Narain JP, Dhariwal AC, MacIntyre CR. Acute encephalitis in India: An unfolding tragedy. Indian J Med Res. 2017 May;145(5):584-587. Vashishtha VM, Ramachandran VG. Vaccination Policy for Japanese Encephalitis in India: Tread with Caution! Indian Pediatr. 2015 Oct;52(10):837-9. Operational Guide for Japanese Encephalitis Vaccination in India, MoHFW, September 2010. Encephalitis. Conditions and Diseases. Health. Johns Hopkins Medicine. Encephalitis. Paediatr Child Health. 1998 Jan;3(1):47-52. Ellul M, Solomon T. Acute encephalitis - diagnosis and management. Clin Med (Lond). 2018 Mar;18(2):155-159. Encephalitis. Paediatr Child Health. 1998 Jan;3(1):47-52.

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Endometriosis Overview Endometriosis is a condition in which the tissue that lines the inside of the uterus or womb called the endometrium starts growing outside the uterine cavity. This endometrial tissue can grow in the ovaries, fallopian tubes and even the pelvic area.

The typical symptoms of endometriosis include heavy menstrual flow, pelvic pain, and pain during urinary or bowel movements. Having an immediate family member suffering from the disease, early onset of menstruation and not having a child increase the risk of endometriosis. It usually affects women between the ages of 25 and 40. Women with endometriosis are more likely to have infertility or difficulty getting pregnant.

Endometriosis can be diagnosed with abdominal ultrasound or laparoscopy, which is the gold standard of diagnosis and treatment. Treatment often begins with medications such as oral contraceptives, GnRH analogues and injections to suppress the ovarian function. Surgery is often the last resort to treat the later stages of this condition.

You can take care of yourself at home by trying some simple remedies such as using a heating pad for pain relief and including remedies such as curcumin and green tea. Remember, ignoring the symptoms of endometriosis and not seeking treatment on time can result in severe complications. Key Facts Usually seen in Adults between 25 - 40 years of age Gender affected Women Body part(s) involved Pelvic cavity Uterus Ovaries Fallopian tubes Prevalence India: 25 million (2020) Mimicking Conditions Dysmenorrhea Pelvic adhesions Serositis Functional or neoplastic ovarian cyst Uterine malformation Adenomyosis Colon cancer Ovarian cancer Necessary health tests/imaging USG whole abdomen CT/MRI of Pelvis Laparoscopy Histological examination Treatment NSAIDs: Ibuprofen Oral contraceptives: Desogestrel, Etonogestrel Danazol Progestin: Medroxyprogesterone GnRH analogues: Leuprolide Intrauterine devices Surgery See All Symptoms Of Endometriosis

Many women with endometriosis may not have any symptoms. Such women come to know of endometriosis if they face difficulty in conceiving or during a routine ultrasound. The following are the most common symptoms for endometriosis, but each woman may experience symptoms differently: Chronic pain in lower back and pelvis Abnormal or heavy menstrual flow or bleeding between periods Painful menstrual cramps Pain during sexual intercourse Painful bowel movements during menstrual periods Painful urination during menstrual periods Other gastrointestinal symptoms like bloating, diarrhea, constipation or nausea especially during menstrual periods Infertility or difficulty in conceiving Fatigue

Pelvic pain is the pain experienced internally in the reproductive region in both men and women. Read more about the common causes of pelvic pain in women. Click To Know! Causes Of Endometriosis

Endometriosis is an idiopathic disease, which means the cause of the disease is largely unknown. However, there are a few theories that explain the mechanism of endometriosis:

1. Retrograde or Reverse menstruation: This popular theory suggests that during menstruation, some of the blood and tissue containing endometrial cells from the uterus travels through the fallopian tubes into the pelvic cavity. These endometrial cells stick to the walls of the pelvic cavity and continue to proliferate and bleed over the course of each menstrual cycle. Mostly all women have some degree of reverse menstruation, but only a few develop endometriosis. This is thought to be because of differences in a woman’s immune system.
2. Coelomic metaplasia or Cellular metaplasia: According to this theory, cells in the body outside of the uterus transform into endometrial cells that line the uterus.
3. Endometrial cell transport: This theory suggests that endometrial tissue may travel through the blood or lymphatic system to other distant areas or organs.
4. Direct implantation: Endometriosis can also occur because of direct transplantation in the abdominal wall. Eg. During a cesarean section or some pelvic surgery like hysterectomy, some endometriosis tissue might accidently get implanted in the abdominal incision.
5. Genetic factors also play a role as the disease is much more common if your close relative like your mother, sister also has the disease.

The most common sites of endometriosis include: The ovaries The fallopian tubes Tissues that hold the uterus in place Outer surface of the uterus The lining of the pelvic cavity

Other sites of growth could be the vagina, cervix, vulva, intestines, bladder, or rectum. Very rarely, endometriosis can appear in distant parts like the skin, lungs and brain.

Stages of endometriosis

Endometriosis occurs in 4 stages, depending on the depth and area it affects. These are described as follows:

Stage 1: This is the minimal type of endometriosis, where small lesions are present. These are present on the tissue lining the pelvis or abdomen. There is no scar tissue.

Stage 2: This is the mild type of endometriosis. More lesions are present in deeper tissue, along with some scar tissue.

Stage 3: This is the moderate stage of endometriosis. There are several deep lesions at this stage. Small cysts may also be present in ovaries, along with scar tissue or thick bands known as adhesions.

Stage 4: This is the most severe stage of endometriosis. This type of endometriosis is widespread and is associated with several deep lesions and thick adhesions. Large cysts may also be present in one or both ovaries. Risk Factors For Endometriosis

Women are at higher risk for endometriosis if they: Have an immediate family member such as a mother, sister or aunt suffering from endometriosis Started their period at an early age (before the age of 11), also known as early menarche Have short monthly cycles, which are less than 27 days Have heavy menstruation or periods that last more than 7 days Never had a child Are giving birth for the first time after the age of 30 years Have an abnormal uterus Have a medical problem that prevents the normal flow of blood from the body during menstrual periods Disorders of the reproductive tract Consume alcohol in excess Have intercourse during menstruation Have low body mass index Did you know? When the ovary is involved because of endometriosis, blood can become embedded in the normal ovarian tissue, forming a “blood blister” surrounded by a fibrous cyst, called an endometrioma. So do not ignore any symptoms and consult an expert right away. Consult Now! Diagnosis Of Endometriosis

Various ways by which endometriosis can be diagnosed are: A pelvic examination: Your gynecologist will carry out a routine pelvic examination after recording your medical history. USG whole abdomen: A diagnostic imaging technique that uses high-frequency sound waves to produce pictures of the internal structures of the abdomen. CT scan: A noninvasive diagnostic imaging tool that uses a combination of X-rays and computer technology to create images of the pelvis to detect any abnormalities. MRI scan: To gain visuals of the organs of the pelvis and lower abdomen. Laparoscopy: Laparoscopy is considered to be the gold standard of diagnosing endometriosis. In this procedure, laparoscope, which is a thin instrument with a light and a camera, is used to view the pelvic region and its organs.  
Histological examination: In certain cases of endometriosis, your doctor can take a biopsy or sample of tissue during laparoscopy and send it to a lab for evaluation. Celebs affected Padma Lakshmi The Indian American Author and model Padma Lakshmi was diagnosed with endometriosis in 2006. According to reports online, she suffered from endometriosis for more than 20 years. Cyndi Lauper The American singer Cyndi Lauper said she was diagnosed with endometriosis in her 30s, after years of struggling to conceive. Specialist To Visit

If you experience any symptoms of endometriosis it is important to visit a gynecologist and obstetrician at the earliest. Most Indian women don’t have a regular gynaecologist like they do for a family doctor or General Physician(GP). Here is a list of the types of gynecologists you can consult for gynecological related problems. Click To Know! Treatment Of Endometriosis

Endometriosis can be treated by medicines and surgery. Here’s some of the common treatment options for endometriosis:

Pain medication Nonsteroidal anti-inflammatory drugs, such as Ibuprofen or other over-the-counter analgesics can give temporary relief from pain. If these do not help, a doctor may prescribe stronger drugs.

Hormonal therapy Hormonal therapy can lower the amount of estrogen which is directly linked to endometriosis. This helps in reducing bleeding, inflammation, scarring, and cyst formation. Common hormones used are: Oral contraceptives: Function by suppression of ovarian function. Eg, Desogestrel, Etonogestrel. Danazol: A synthetic derivative of testosterone (a male hormone). Progestin: These medicines suppress the activity of ovaries by modulating female hormones in the body. Eg, Medroxyprogesterone. GnRH analogues- GnRH analogues are given in injection form to suppress the ovarian activity, so the level of the hormones in the body is decreased. One of the most common GnRH analogue is Leuprolide. Devices Intrauterine devices such as the levonorgestrel system are placed in the uterine cavity, where it suppresses endometrial activity and also helps in regulating menstrual blood flow.

Surgery Surgical procedures are often the last resort for the treatment of endometriosis. Surgery is often performed laparoscopically or even with an open procedure. This process involves removal (excision) or burning (fulguration) or both, of the endometriotic tissue. Removal of scar tissue can provide great relief in pain. Along with the relocation of the ovaries and fallopian tubes to their normal position in the pelvis during surgery, it can greatly increase the chances of a woman to get pregnant. Home Care For Endometriosis

If you are suffering from endometriosis, you can follow these simple tips to ease the symptoms of this condition: Take adequate rest. You can also use a hot pack, heating pad or hot bottle of water to ease the pain. You can also take long warm baths to ease the pain and associated symptoms of endometriosis. Prevent constipation. Constipation is common in women suffering from endometriosis, therefore it is advised to hydrate yourself and include fibre-rich food to relieve the symptoms. Get regular exercise. Exercise improves blood circulation and helps nutrients and oxygen flow to all the systems of the body. Regular exercise can help in reducing pelvic pain associated with endometriosis. If the pain gets severe, you can take painkillers after your doctor’s consultation. Complications Of Endometriosis

Endometriosis may have certain complications if it is severe in nature or is diagnosed or treated at a later stage. Some of the common complications of endometriosis are:

Fertility issues Endometriosis can lead to fertility problems. The following ways are thought to cause infertility: Endometriosis can change the shape of the pelvis and reproductive organs which makes it difficult for the sperm to find the egg or it can deform the fallopian tubes in such a way that they are not able to pick up the egg after ovulation. It can cause inflammation that affects the normal function of the ovary, egg, fallopian tubes or uterus. The immune system, which normally protects the body against any infection, begins to attack the embryo. The endometrium or the uterine lining where implantation occurs, does not develop normally. Some women suffering from endometriosis do not have any fertility issues and eventually get pregnant without any treatment. But, for many it can be harder to get pregnant. Sometimes, medication alone fails to improve fertility. Surgery can help you in improving your fertility by removing the patches of endometriosis tissue.

Ovarian cysts and adhesions Endometriosis leads to adhesions, which are the areas of endometriosis tissue that are sticky and glue the organs together. Endometriosis can also result in ovarian cysts, which are the fluid-filled cysts that can become large and painful. These can be treated with surgery.

Bladder and bowel problems Endometriosis can also affect your bladder or bowel movements. This condition may require major surgery, which may involve removing a small part of the bladder or intestine.

Cancer Women suffering with endometriosis might be at a risk of developing ovarian cancer, but the risk is still relatively low. Another rare type of cancer, endometriosis-associated adenocarcinoma can develop later in life in those who have had endometriosis for a long time.

Most of the couples do not have any significant symptoms of infertility. In fact, it is not until the time they try to conceive that they know about infertility. The signs of infertility in women could be related to the underlying cause of the condition. Click To Read!

Alternative Therapies Of Endometriosis

Here are few of the most common herbal and home remedies for the treatment of endometriosis:

Curcumin: Curcumin or turmeric has anti-inflammatory, antioxidant, and antiproliferative properties that are useful in treating the symptoms of endometriosis. You can take turmeric in the form of tablets or with your tea or milk by mixing a teaspoon of turmeric to your drink.

Puerarin: Puerarin is a compound that is found in kudzu plants. It contains isoflavonoid compounds that possess estrogenic effects. This component binds to the estrogen receptors (ERs) and relieves some of the symptoms of endometriosis.

Resveratrol: Resveratrol is a polyphenol compound that is mainly found in grapes, peanuts, mulberry, and some other plants. These foods have strong antioxidant properties and therefore could be of great help in endometriosis.

Green tea: Green tea is a great antioxidant, which helps in prevention of new blood vessel formation (antiangiogenesis) and inhibits the function of microvessels that are present in the endometrial lesions. This helps in reducing the size and the weight of these lesions thereby hindering the growth of endometriosis. Living With Endometriosis

If you are suffering from endometriosis, you can follow these easy tips to reduce the pain and othe symptoms of endometriosis:

1. Use a hot pack: For the excruciating pain that comes with endometriosis, you can apply a hot water bottle or heating pad to your lower abdomen. This can help in proper blood circulation and muscle relaxation. Warm baths can also be of great help in treating endometriosis.
2. Take proper rest: If the pain of endometriosis becomes intense, you must take proper rest. You can place a pillow under your knees while you are on your back. While lying on your side, keep your knees close to your chest. These positions can reduce the pressure on your lower back.
3. Get regular exercise: Exercise is helpful in releasing natural painkillers in your body, known as endorphins. Exercise also helps in improving blood circulation and flow of nutrients and oxygen to all the systems of the body.
4. Include a healthy & balanced diet: When it comes to endometriosis, maintaining a healthy weight can be of great help. You must also include plenty of fiber in your diet, which will help in preventing the painful straining during bowel movements.
5. Make use of alternative treatment: You can go for other techniques that also offer ways to relax and may help relieve pain Muscle relaxation, deep breathing, biofeedback and Yoga. you can also go for acupuncture that helps in painful periods. Frequently Asked Questions Can endometriosis go away on its own? Can I conceive if I have endometriosis? Which foods should I eat for endometriosis? Which foods can trigger endometriosis? References Endometriosis. The American college of obstetricians and gynecologists; Last accessed on 24th March, 2021 Farquhar Cynthia. Endometriosis.BMJ. 2007 Feb 3; 334(7587): 249–253 What are the risk factors of endometriosis. National Institute of Child Health & Human Development. C. Matthew Peterson, Johnstone Erica B,Hammoud Ahmad O, Stanford Joseph B, Varner Michael W. Risk factors associated with endometriosis: importance of study population for characterizing disease in the ENDO Study.Am J Obstet Gynecol. 2013 Jun; 208(6): 451.e1–451.11. Bilodeau Kelly.Treating the pain of endometriosis. Harvard Health Publishing; Nov 20, 2020. Infertility. NHS; Last accessed on 24th march, 2021 Sai Kong, Yue-Hui Zhang, Chen-Fang Liu,Ilene Tsui, Ying Guo,Bei-Bei Ai, and Feng-Juan Han. The Complementary and Alternative Medicine for Endometriosis: A Review of Utilization and Mechanism. Evid Based Complement Alternat Med. 2014; 2014: 146383. Haas Dietmar,Chvatal Radek , Reichert Björn, Renner Stefan, Shebl Omar , Binder Helge, Wurm Peter, Oppelt Peter. Endometriosis: a premenopausal disease? Age pattern in 42,079 patients with endometriosis. Arch Gynecol Obstet. 2012 Sep;286(3):667-70 Spoorthy Venkatesh, M. Anjali, Akhila Vasudeva, and Pratap Kumar. Sliding Sign and Gel Sonovaginography: A Sneak Peek Prior to Laparoscopy in Patients with Endometriosis.J Hum Reprod Sci. 2020 Jan-Mar; 13(1): 26–30.

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Epilepsy Seizures, Epileptic seizures and Epileptic syndrome Overview Epilepsy is a common neurological disease that affects around 50 million people worldwide. Every 4 to 10 in 1000 individuals are suffering from it. The cause of the disease is still unknown. It is characterized by recurrent seizures that vary and depend on where the disturbance first starts and how far it spreads in the brain. Seizures manifested are a result of uncontrolled electrical discharges which can vary from less than one a year to several per day.

Some of the common symptoms of epilepsy include loss of awareness or consciousness and disturbances of movement. Epilepsy can substantially impair the quality of life by seizures, psychiatric disorders, and adverse effects of medication. The rate of premature death is three times higher than in the general population.

The treatment for epilepsy primarily aims to control seizures with the appropriate use of the least anti-seizure medicine, particularly for young females and the elderly suffering from other medical conditions. The patients poorly responsive to drug treatment undergo alternative treatments like surgery, ketogenic diet, and implantable brain neurostimulators. Key Facts Usually seen in All age groups Individuals between 5 to 20 years of age Gender affected Both men and women but more common in men Body part(s) involved Brain Prevalence Worldwide: 50 million (2019) Mimicking Conditions Syncope Alcoholic blackouts Hypoglycemia Transient ischemic attack (TIA) Brief psychotic disorder Bipolar disorder Major depressive disorder Post-traumatic stress disorder Autism spectrum disorders Substance abuse Schizophrenia Necessary health tests/imaging EEG CT scan (Head) MRI brain Brain spect PET CT brain with contrast Serum electrolytes Blood glucose level Comprehensive health checkup Treatment Conventional anti-epileptics: Phenytoin, Phenobarbitone, Carbamazepine & Levetiracetam Intravenous and intramuscular injectables: Diazepam, Lorazepam & Clonazepam Anesthetic drugs: Isoflurane, Desflurane & Ketamine Vagus nerve stimulators Surgery: Temporal lobectomy, Corpus callosectomy & Lesionectomy Transcranial magnetic stimulation (TMS) See All Symptoms Of Epilepsy A seizure is a transient occurrence of signs or symptoms due to abnormal excessive or synchronous neuronal activity in the brain. Epilepsy describes a condition in which a person has a high risk of recurrent (2 or more) unprovoked seizures. It is a neurological disorder that affects the normal activities of the brain. The abnormal activity could be due to inherited conditions, trauma to the head, and developmental disorders.

The symptoms between individuals vary from mild to severe in form depending upon the type of seizure. Symptoms such as temporary confusion, episodes of staring blankly, uncontrollable jerks and twitching of arms and legs, loss of consciousness or awareness, and psychological symptoms like fear, anxiety, and depression. The common signs and symptoms of epilepsy include:

1. Daydreaming and confusion Staring at everything and not responding to anything. It is often accompanied by attention blackouts, mumbling, or no response. It is one of the common presentations seen in cases of absence seizures
2. Uncontrollable jerking movements and twitching of arms and legs Involuntary movement occurs at the time of seizure leading to nerve damage. It often produces small twitches in the affected muscles. Some involuntary movements include: Tardive dyskinesia: A neurological condition that originates in the brain with the use of neuroleptic drugs. A disorder that results in repetitive, involuntary body movement that includes grimacing (the face twists in an ugly way), rapid jerking movements, blinking of the eyes, and protruding tongue. This disorder interferes with normal daily functioning. Myoclonus: It is a quick involuntary muscle jerk. It occurs right before sleeping or waking up. The person might experience an electric shock and rhythmic movements. Tremors: It can be a symptom of a seizure. It is an uncontrolled and involuntary movement. Typically a person may experience the following symptoms like uncontrollable nodding head, balance problems, numbness in any part of the body, and stooped posture.
3. Sudden fear or anger The abnormal activity in the brain results in seizures. At the time of a seizure, the person experiences change in behavior and automatic responses such as hunger, emotional distress, and fight or flight response.
4. Sudden falls and frequent stumblings People with epilepsy tend to have more physical problems such as fractures and bruises related to seizures. Elders are more prone to falls and injury and hurt themselves once and many times a year.
5. Jacksonian march Abnormal movements may begin in avery restricted region of limb like fingers and progress gradually over seconds to minutes to involve a large portion of extremity and even involving whole body, eventually culminating into generalized seizures.
6. Todd’s palsy/paralysis Some of the patients may experience a transient paralysis of the limb or part involved in the seizure, this may last upto minutes to many hours. Non-motor symptoms: These are not as common as motor symptoms seen during the episodes of seizures, but can be present in few patients especially those who have atypical presentations. Sensory symptoms: Patients may experience sensory symptoms such as numbness, burning sensation, and tingling sensation. Autonomic symptoms: Loss of bowel/ bladder control, unregulated increase or decrease in heart rate may be seen. Emotional lability: Excessive and unprovoked laughter, crying, anger or sadness may be seen. Is epilepsy contagious? Epilepsy is not contagious or communicable. It cannot spread by touching the person, sharing utensils, or coming into contact with saliva. Do not refrain from helping a person undergoing an epileptic attack. Here are more common myths about epilepsy. Click To Know! Causes Of Epilepsy

There are single established causes of epilepsy or unprovoked seizures. It is likely to be categorized into genetic, structural, infectious, metabolic, immune, and infectious. For example: A severe head injury Genetic conditions associated with brain malfunction Brain tumor or cyst Infections of the brain such as meningitis Lack of oxygen to the brain Dementia or Alzheimer’s disease Maternal drug use, prenatal injury, brain malformation, or lack of oxygen at birth Infectious diseases such as AIDS (HIV infection) Scarring on the brain after a brain injury (post-traumatic epilepsy) Intracranial hemorrhage Drug or alcohol withdrawl Febrile seizures Illicit drug use/overdose Stroke Hepatic failure Advanced chronic kidney disease Hyponatremia (low levels of sodium) Hypoglycemia Types Of Epilepsy

The signs of the seizure depend on the type of the seizure. Seizures can be broadly classified into two types:

1. Generalized seizures It affects the entire brain that is both hemispheres of the brain. The seizure begins suddenly, the person loses consciousness and experiences a rigid body, jerking movement of the arms and legs, crying out, and falling on the ground. They are further classified into four types: Generalized clonic tonic seizure: During the tonic seizure, the muscle tone is increased greatly in the body. Causing sudden stiffening movements. These seizures last for 1 to 3 minutes. Breathing may decrease producing cyanosis of the lips and nails. Myoclonic seizure: They are rapid, brief and shock like a jerk of muscles. They are sudden jerks or clumsiness.  
   Absence seizure: This causes short impairment of consciousness. It is often called blanking out. It usually lasts for no more than a second. Atonic seizure: These seizures cause loss of muscle tone. The word means without tone and the muscles become weak. It leads to eyelids drooping, heads to drop and people dropping things.
2. Focal seizures These are located in one part of the brain and are often called partial seizures. The brain consists of four lobes: frontal, temporal, parietal, and occipital lobes. In focal seizures, only one focused area is affected, depending on the area affected symptoms occur. Seizure in the temporal lobe leads to confusion and staring. Seizure in the occipital lobe tends to cause visual impairment. Location in the parietal lobe leads to numbness. They are further classified into: Simple focal seizure: These seizures affect the small part of the brain. It causes a change in sensation such as strange taste or smell. Complex focal seizure: It can make a person confused and the person will not be able to answer questions. Secondary generalized seizure: It starts in one part of the brain and spreads in both parts of the brain. Myth: During a seizure, you swallow your tongue. Fact: This is not true, a tongue cannot be swallowed. But as a precautionary measure to avoid tongue injury during a seizure, you can put a cloth in the mouth of the patient and make them lie in a recovery position. And call for immediate medical attention or consult doctor right away. To know more myths about epilepsy, read the article. Click Here! Risk Factors For Epilepsy

The risk factors associated with developing epilepsy are any injury to the brain, being born with brain abnormalities, a family history of seizures, and many people developing disease don’t have the risk factor.

1. Medications Missed dose of antiepileptic drug or underdosing of antiepileptic is a common cause seen in day to day clinical practice.
2. Medical history Medical history is the foundation in the diagnosis of epilepsy. For a precise treatment to analyze the family history, any patient in the family background for the same disease. The doctor identifies the prenatal and perinatal causes brain damage, before birth and after birth like: Born with abnormal areas of the brain Seizure in the first month of life Premature birth
3. Other health conditions Many health conditions like autism and growth defects in the brain can lead to epileptic seizures. Any problem in the electrolyte conduction can cause many other diseases like: Cerebral palsy Stroke Alzheimer’s disease Intellectual disabilities Diagnosis Of Epilepsy

Epilepsy is predicted by diagnosing the type of seizure. Many disorders lead to a change in behavior and can be confused with epilepsy. Diagnosis involves ruling out other psychiatric illnesses and disorders occurring due to chemical disturbances in the brain. Establishing a diagnosis for epilepsy involves the following:

1. Clinical history Before confirming the patient is having epilepsy, it is essential to rule out the conditions that may mimic the symptoms of epilepsy. A physician performs a detailed overview checkup, reviewing the patient’s history as well as his/her family history and the onset of symptoms to rule out other potential causes.
2. Lab tests and imaging studies The following test can be done to evaluate the overall health conditions and study brain functioning. Computed tomography (CT) scan (head): A CT scan uses an X-ray to view the cross-sectional area of the brain. It can reveal the abnormalities in the brain and the cause of the seizure-like tumor, lesions, and bleeding. Magnetic resonance imaging (MRI) brain: A MRI uses powerful magnetic and radio waves to create a detailed image of the brain. The doctor by viewing an MRI can detect the cause of the seizure. PET CT brain with contrast: A PET scan takes a picture of the brain as it works. It can detect any metabolically active lesion, particularly tumor, which may be a cause of seizures. Electroencephalogram (EEG): It measures the activity of the brain. It is useful in patients with epilepsy especially in the diagnosis of the type of epilepsy, in localizing the lesion in the brain, and helps the physician in choosing the appropriate drug for further treatment.

Note: It is most useful to document electrographic seizure activity but the seizures are infrequent and unpredictable so it is often not possible to obtain EEG during a clinical event. In such situations activating procedures may be undertaken by your doctor to provoke abnormalities. These procedures are done under strict medical supervision and may include hyperventilation (3 or 4 minutes).

Brain spect: It is an imaging procedure done by using a tracer dye to create an image of the blood flow in the brain. It helps in locating the origin of epileptic seizures. Comprehensive health checkup: To evaluate the overall health status of a person. This includes tests to check serum electrolytes (sodium, calcium & potassium), blood glucose, liver function tests, renal function tests and urinary toxicology to rule out use of illicit drugs.

1. Neuropsychological test A detailed neuropsychologists test is designed to measure the individual performance in terms of accuracy, memory, language, attention, thoughts, mental status and patient’s history is essential to diagnose the disease.

These tests can help to predict whether seizures are affecting your psychological functions including memory, attention, mood, language, emotions, and personality. Prevention Of Epilepsy

An estimated 25% of epilepsy cases are preventable. The most common ways to reduce the risk of seizure are:

1. Have a healthy pregnancy. Some problems during pregnancy and childbirth may lead to epilepsy. Follow a prenatal care plan with your healthcare provider to keep you and your baby healthy.
2. Prevent brain injuries as it lowers the chances of stroke and heart disease.
3. Be up-to-date on your vaccinations.
4. Wash your hands and prepare food safely to prevent infections such as cysticercosis/neurocysticercosis.
5. Follow proper sleep hygiene & avoidance of loud music/flashy lights which can trigger an attack

In a known case of epilepsy/seizures, prevention can be done by taking antiepileptic drugs in a timely manner and appropriate dose as prescribed by your doctor. Also, prevention of triggers can help lower the risk of getting an epileptic attack. Specialist To Visit

Patients exhibiting the symptoms of epilepsy are not capable enough to take their decisions on their own. Thus, the family or caregivers are the primary ones to decide and they must approach the healthcare physician if they suspect any abnormal activities of the brain through scans and tests which are lasting for a prolonged time.

In an acute episode of status epilepticus an emergency physician might be helpful. The healthcare physician can thus refer the patient to the specialist’s doctor for better evaluation and treatment. These patients can be referred to: Neurologist Psychiatrist Psychologist Treatment Of Epilepsy

Treatment with antiepileptics or anti-seizure medications can alleviate symptoms. They are a class of drugs primarily used to treat seizures associated with epilepsy. Usually the treatment is started with a single antiepileptic drug, but if your doctor feels it is not sufficient then a combination of drugs may also be used. The other treatment options include vagus nerve stimulator, ketogenic diet, and surgery. But, medication is the first line of treatment.

1. Conventional anti-epileptics or anti-seizure drugs These drugs decrease the frequency or severity of seizures in people with epilepsy. These drugs treat the symptoms of epilepsy and not the underlying cause of epilepsy. They maximize the quality of life by minimizing seizures. They work by blocking the sodium channel or enhancing GABAergic action. They can potentially cause unsteady walking and poor coordination or balance. Antiepileptic drugs can be further divided into a narrow spectrum that works for specific types of seizures (partial or focus) and a broad spectrum that has effectiveness for a wide range of seizures (partial plus absence myoclonic seizure).

Some of the common examples include: Phenytoin Phenobarbitone Carbamazepine Valproic acid Levetiracetam Felbamate Lamotrigine 2. Intravenous and intramuscular injectables These are essential during an emergency condition (like status epilepticus) when oral administration of drugs is not possible. These formulations provide rapid delivery and complete bioavailability of the drug.

Common examples are: Diazepam Lorazepam Clonazepam Pentobarbital These formulations are useful in the treatment of epilepsy and anxiety disorders. It decreases the abnormal and excessive activity of the nerve cells. Some common side effects are fatigue, depression, and impaired coordination.

1. Anesthetic drugs These are used after the conventional therapy for seizures has failed to terminate seizures. They are commonly used to treat refractory cases of status epilepticus.

Some of the common examples include: Isoflurane Desflurane Ketamine 4. Vagus nerve stimulators This stimulation prevents seizure by sending regular, mild pulses of electrical energy to the vagus nerve. It is approved to treat focal or partial seizures. Vagus nerve stimulators work on drug-resistant epilepsy. Common side effects include coughing or shortness of breath.

1. Surgery In the most severe cases, the affected area of the brain is surgically treated to improve the symptoms and the condition of the patient. Most commonly performed surgical procedures are: Temporal lobectomy Corpus callosectomy Lesionectomy
2. Transcranial magnetic stimulation (TMS) It is a form of focal, noninvasive cortical stimulation in which a focal electric current is induced in the cerebral cortex by a fluctuating extracranial magnetic field generated, most commonly, by a handheld electromagnet. It is useful for cases refractory to conventional medical therapy.

First-aid for epilespy The major precautions one should take to help someone who is having an epileptic seizure are: Ease the person and remain calm. Turn the person onto one side, this will help them to breathe. Remove all the harmful objects from close proximity. Put something soft underneath the head of the person. Lose all the clothes and anything around the neck to make the person breathe properly. If the seizure lasts for more than 5 minutes, contact the doctor and stay with them until awake. Home-care For Epilepsy

Living with someone who has epilepsy can be challenging for the family and the caregivers. The patient requires support and care at each stage. Epilepsy can vary from person to person so the care can vary greatly. Some people with epilepsy need a lot of care while others need only at the time of seizure. However, there are a few tips that can help to take care of someone with the condition.

Understanding the condition Understanding the condition of the person is the first step in managing the disease. Caring can involve several skills such as emotional support, dealing with medical equipment, and recognizing the warning signs, if the disease worsens.

Stay focused on therapy The therapy goal varies for a person and is adjusted to suit the requirement of the patient. Help your loved ones to adjust to the therapy and encourage them to practice self-management strategies. This will help them to take responsibility for their goals.

One of the most common causes for seizure recurrence is missed dose or under dosage of antiepileptic drugs, hence it is of paramount importance for the patient to maintain a regular dose schedule and preferably at the same time.

Keep patient away from tobacco, alcohol, and substance abuse Alcohol and other drugs worsen the symptoms of epilepsy. Hence, the family should ensure that the patient does not indulge in such activities.

Professional help should be taken for patients already alcoholic or suffering from drug addiction as abrupt and sudden cessation may lead to withdrawal symptoms which may lead on to seizures.

Try stress management techniques Being a caretaker for a patient can be exhausting and emotions such as anger, resentment, guilt, and helplessness can be common. Learning relaxation and stress management techniques will help in coping with the disease.

Join epilepsy support groups Connecting with other people facing the same challenges may help the person and boost morale. Few societies in India help people with mental illness and encourage them to take advantage to engage with other patients in a safe and supportive environment.

Note: Epilepsy symptoms and conditions can change over time. The amount of care needed by the patient can also change with time and even the condition of the person caring can also change. Complications Of Epilepsy

If left untreated, epilepsy may severely hamper a patient’s life and can cause various complications like: Impaired mental function Lack of motor coordination Depression Anxiety disorders Physiological symptoms fear and anxiety Aggressive behavior If it worsens, then the patient might require long-term hospitalization. Alternative Therapies For Epilepsy

1. Relaxation therapy These days massage and aromatherapy are often used to reduce stress and tension. They can help get rid of poor sleeping patterns. Some people use yoga and meditation to relax and practice mindfulness. It has been found out that these techniques can ease tension and reduce stress related to seizures.
2. Cognitive behavioral therapy (CBT) It is a psycho-social intervention that aims to improve mental health. This helps the patient to change what they think about a particular situation. It helps manage feelings and change the actions which further helps them to change the reaction.
3. Electroconvulsive therapy For adults who do not respond to drug therapy, electroconvulsive therapy may be considered. It is a psychiatric treatment where seizures are induced to manage refractory mental disorders. A small amount of electric current is passed through the brain to regulate activity in the brain.
4. Deep brain stimulation (DBS) This is a type of surgical procedure involving the implantation of a device to send electrical signals to the brain. Some electrodes are implanted in the patient’s brain area. These electrodes generate mild electrical impulses which regulate abnormal brain activity and improve the symptoms.
5. Ayurveda in epilepsy Ayurveda treatment for epilepsy follows an integrated approach, combining natural medicine, ketogenic diet, and lifestyle regulation. In some cases, ayurvedic herbs were found to be beneficial when used in adjuvant with antipsychotic medication. However, there has been no such evidence to prove the effectiveness of ayurvedic treatment to treat or manage epilepsy. A ketogenic diet can help in the treatment of epilepsy. A 2019 study suggested that a ketogenic diet consisting of high fat and low protein can be used in drug-resistant epilepsy. This diet resembles the diet people take in a fasting state. A ketogenic diet also helps in maintaining weight and can be beneficial for sedentary patients. It is used to treat hard-to-control epilepsy in children. Thus, using fats as a primary fuel source rather than carbohydrates. The ketogenic diet reduces seizure frequency by more than 50%. Consult a nutritionist to know about it. Click To Consult! Living With Epilepsy

Self management can help in taking care of yourself. Learn about your condition Take medicines as recommended by your doctor Talk to your doctor, if you have any questions Manage your stress levels with yoga and meditation Get enough sleep & maintain a sleep schedule Maintain a seizure dairy by noting the time and day of an epileptic attcak, trigger or aura before it, chronic medicines, and liver function test reading Frequently Asked Questions How is epilepsy related to other medical conditions? Which is the best way to prevent seizures? Can a person with epilepsy always have seizures? What is epilepsy? What is a seizure? Can a person die from epilepsy? If I have epilepsy, can I still drive a car? References Key Facts. Epilepsy. The World Health Organization (WHO). Last Updated June 2019. Devinsky O, Vezzani A, O’Brien TJ, et al. Epilepsy. Nat Rev Dis Primers. 2018 May 3;4:18024. Schmidt D, Schachter SC. Drug treatment of epilepsy in adults. BMJ. 2014 Feb 28;348:g254.Epilepsy: Treatment Options - PubMed (nih.gov) Signs and Symptoms. Epilepsy Foundation. Last Updated March 2014.Signs & Symptoms of Epilepsy in Children | Epilepsy Foundation Frucht S. Dystonia, athetosis, and Epilepsia partialis continua in a patient with late-onset Rasmussen’s encephalitis. Mov Disord. 2002 May;17(3):609-12.Dystonia, athetosis, and Epilepsia partialis continua in a patient with late-onset Rasmussen’s encephalitis - PubMed (nih.gov) Temporal Lobe Epilepsy.Cleveland Clinic Medical Profession.Last Updated September 2018. Temporal Lobe Epilepsy: Causes, Symptoms, Diagnosis & Treatment (clevelandclinic.org) Types of Seizures. Center for Disease Control and Prevention.Last Updated September 2020.Types of Seizures | Epilepsy | CDC What are risk factors for Developing Epilepsy? Epilepsy Foundation. Last Updated October 2014. What are Risk Factors for Developing Epilepsy? | Epilepsy Foundation Diagnosing Epilepsy. Epilepsy Foundation. Last Updated August 2013. Diagnosing Epilepsy | Epilepsy Foundation Complementary Therapies. Epilepsy Societies. Last Updated April 2019.Complementary therapies | Epilepsy Society Stafstrom CE, Carmant L. Seizures and epilepsy: an overview for neuroscientists. Cold Spring Harb Perspect Med. 2015;5(6):a022426.

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Erectile dysfunction Also known as ED, Impotence Overview Erectile dysfunction (ED), as the name suggests, is a medical condition that causes an inability to achieve or maintain an erection for satisfactory sexual performance. The condition mainly affects men older than 40 years and the prevalence of ED increases with age. Some of the common causes of the condition include excessive medication, chronic illness, poor blood flow to the pelvic region, and unhealthy habits such as drinking too much alcohol or excessive smoking.

Most of the time, this condition is temporary and is triggered by stress, performance anxiety, or certain medications. Sometimes it can be due to underlying medical conditions like diabetes, heart problems, depression, and high cholesterol levels. In these cases, it requires intervention by a specialist. Since most men find it embarrassing to discuss the problem with their doctor, they resort to self-medication that can worsen the problem in the long run and harm their overall health. Key Facts Usually seen in Individuals above 40 years of age Gender affected Men Body part(s) involved Penis Prevalence World: 22%–49% (2015) India: 50-70% (2015) Mimicking Conditions Hypogonadism Loss of libido Depression Anxiety Necessary health tests/imaging Physical examination. Penile doppler Serum testosterone level Urine assessment (urinalysis) Ultrasound Overnight erection test Treatment Oral medications: Tadalafil & Vardenafil Intracavernosal injections (ICIs) Intraurethral suppositories Vacuum-assisted erection devices (VED) Penile implants (or prosthesis) Counselling See All Symptoms Of Erectile Dysfunction

The inability to sustain an erection is one of the main presentations of erectile dysfunction. However, based on the cause of the impotence (organic / non-organic or psychogenic) the other symptoms that a person can also experience include:

Symptoms of psychogenic ED Sudden onset of errection issues Intermittent dysfunction (variability and situational) Loss of sustaining capability Nocturnal erection Excellent response to phosphodiesterase type 5 (PDE-5) inhibitors Symptoms of organic ED Gradual onset Often progressive Consistently poor response to phosphodiesterase type 5 (PDE-5)inhibitors Poor nocturnal erection Symptoms improve on standing than lying down (in cases of venous leak) Causes Of Erectile Dysfunction

In order to understand the causes of ED, you need to first know the mechanism of an erection. Here is what happens during an erection.

The penis remains in its flaccid state when the blood vessels in penis are not fully dilated. This allows only a small amount of arterial blood flow in penis that is basically required for nutritional purposes. When you are sexually stimulated, there is a release of neurotransmitters namely nitric oxide (NO) from the nerve terminals in the penis. This causes relaxation of the smooth muscles of blood vessels and results in increased blood flow into the cavernosa of the penile region. This causes the penis to become erect and rigid.

Erection ends when the ejaculation occurs and sexual arousal ends, that allows the accumulated cavernosa blood to flow out through the penile veins back into the circulation.

Sometimes a combination of various physical and psychological factors can cause a disturbance in the mechanism of erection. These factors are explained in detail in the next section. Types Of Erectile Dysfunction

Broadly, ED is categorized into two main types namely organic impotence and non-organic impotence. Organic impotence: It refers to the inability to obtain an erection firm enough for vaginal penetration, or the inability to sustain the erection until completion of intercourse.the reason can be vascular, neurogenic, secondary to chronic disease & iatrogenic, or hormonal.

Non-organic or psychogenic impotence: In this, impotence or loss of erection is caused by anxiety, guilt, depression, or conflict around various sexual issues. In simple terms, caused due to an underlying psychological problem.

Here’s a quick sneak peak at the common types and causes of ED:

1. Psychogenic erectile dysfunction Psychogenic erection is a result of audiovisual stimuli or fantasy. Impulses from the brain modulate the spinal erection centers to activate the erectile process. This type of ED is may be due to : Physical and mental health problems Psychological trauma Relationship problems/partner dissatisfaction Family/social pressures Stress, anxiety, and depression
2. Neurogenic erectile dysfunction It is caused due to a dysfunction in the nerve signaling to the corpora cavernosa, a structure present in the penile region to store blood and hence erection. Common causes of this type of ED include problems with the: Central nervous system: Spinal cord injury, multiple sclerosis, stroke, Parkinson disease, etc. Peripheral nervous system: Diabetic neuropathy, lumbar disc disease, radical pelvic surgery, etc.
3. Vasculogenic erectile dysfunction The reduced blood inflow and arterial insufficiency caused due to vascular disease and endothelial dysfunction can lead to erectile dysfunction. Diseases that can lead to vasculogenic ED include: Arterial insufficiency/peripheral arterial disease Veno-occlusive disease Hypertension Trauma
4. Secondary erectile dysfunction As the name suggests, an underlying medical disorder that can increase the risk of erectile dysfunction. Hepatic insufficiency Dyslipidemia (abnormal cholesterol levels) Renal insufficiency Chronic obstructive pulmonary disease Sleep apnea Benign prostatic hypertrophy Lower urinary tract infection symptoms
5. Latrogenic erectile dysfunction The most common iatrogenic cause of erectile dysfunction is radical pelvic surgery. Generally, the damage that occurs during these procedures is primarily neurogenic in nature. This is because of the close relationship between the cavernous nerves and the pelvic organs, surgery/radiation, etc. on these organs is a frequent cause of impotence. It includes conditions such as: Cavernous fibrosis Peyronie’s disease Penile fracture Drug-induced (antihypertensives, antidepressants, antiandrogens, etc.) After a surgery After radiation therapy (cancer, etc)
6. Hormonal erectile dysfunction Androgens are considered the major hormonal regulator of penile development and physiology. Androgens influence the growth and development of the male reproductive tract and secondary sex characteristics. Their effects on libido and sexual behavior are well established. This could happen due to: Hypogonadism Hyperprolactinemia Diabetes mellitus Thyroid disorder As erectile dysfunction can be caused by one or several of these factors, it is important to talk to your doctor to know the exact cause and treat these underlying health problems. Click Here For Consult

Risk Factors For Erectile Dysfunction

The factors that can cause or increase the risk of erectile dysfunction include: Sedentary life Unhealthy diet Certain medications including some antihypertensives and antidepressants Alcohol consumption Smoking Stress Anxiety Obesity Hypertension Diabetes Heart disease Atherosclerosis Hypercholesterolemia Depression Pelvic surgery Penile injuries Cancer surgery Diagnosis Of Erectile Dysfunction

The tests recommended for patients seeking medical care for erectile dysfunction include an evaluation of: An accurate medical and sexual history A careful general and focused genitourinary examination Radiological test like penile doppler Routine lab tests 1. Radiological tests Radiological tests like penile doppler are important for the diagnosis of ED. It is an advanced imaging technique used to measure the blood flow through the blood vessels in the penis. Blood flow is very important for a man’s erections.

1. Routine lab tests

The routine lab tests include hormonal and biochemical tests such as: Total and free testosterone Sex hormone-binding globulin Prolactin Thyroid hormone Total and high-density lipoprotein cholesterol Triglycerides Fasting glucose and glycosylated hemoglobin Prostate/testis/penis abnormalities Serum estrogen Dehydroepiandrosterone sulfate (DHEAS) Sex hormone binding globulin Planning to get yourself tested? Book a lab test now! Click Here! Prevention Of Erectile Dysfunction

Some of the common ways that can help you to prevent ED include: Keep a close tab on disorders, particularly diabetes or heart problems, as these can increase your risk of ED. Limit tobacco consumption as it can impact your sex life as well as your ability to get an erection. Overweight/obesity is a common risk factor for ED, so make sure you lose weight to improve your physical as well as sexual health. If you are on drugs such as antidepressants and antihistamines, talk to your doctor to change the medications or ways you can minimize the effect of these drugs on your sexual activity. Specialist To Visit

If you experience any signs associated with erectile dysfunction such as difficulty getting an erection, difficulty to maintain an erection enough for intercourse, or diminished sexual desire, you must consult an expert. Although general physician is what most people tend to go to when it comes to problems with sex life, you can even consult specialists such as: Urologist Sexologist Andrologist Psychiatrist Consult India’s best doctors online from the comfort of your place. Consult Now! Treatment Of Erectile Dysfunction

There are multiple non-invasive treatments for ED that include lifestyle changes, oral medications (phosphodiesterase type 5 inhibitors), vacuum-assisted devices, and intraurethral suppositories. While lifestyle changes and oral medications are typically first-line treatments for ED, more-invasive treatments including intracavernosal injections and surgically implanted prosthetic devices may be required for the management of complex cases.

1. Oral medications These medications inhibit the enzyme phosphodiesterase type 5 (PDE5), which keeps the level of cGMP (cyclic guanosine monophosphate) high and promotes erections. The most well-known of these PDE5 inhibitors is sildenafil, while other commonly used medications include: Tadalafil Vardenafil Avanafil
2. Intracavernosal injections (ICIs) These are an alternative to oral medications and are injected directly into the penile corpora (at the lateral base of the penis). The most commonly injected medication is prostaglandin E1 (PGE1), which stimulates cyclic adenosine monophosphate (cAMP) to induce smooth muscle relaxation and promote erections. It may be preferred in certain patients in whom oral medications may be contraindicated or nerves that stimulate erections are damaged.
3. Intraurethral suppositories These medications are preferred by patients who wish to avoid oral or injectable medications. While intraurethral suppositories improve erectile function, they are known to be less effective than ICIs.
4. Vacuum-assisted erection devices (VED) It is a device that is placed over the penis and pumped to create a vacuum, which pulls blood into the penis to cause engorgement and erection. The device may be challenging to use for patients with a large amount of lower abdominal fat and buried penis.
5. Penile implants (or prosthesis) It is a surgically implanted device that comes in an inflatable form (with two- or three-piece devices) and malleable form (with two rigid cylinders that are implanted within the penile corpora). This device remains rigid and may be simply positioned to allow for intercourse. These are usually recommended for people who fail to respond to less-invasive ED treatments, but in some cases are also considered to be the first line therapy.
6. Counselling It is also a recommended treatment approach for men with psychogenic ED. The reason being, most patients have symptoms of depression and anxiety related to sexual performance. This increases a man’s focus on the firmness of his erection, leading to self-consciousness and cognitive distractions that interfere with arousal and contribute to poor performance. In such a case, getting help from a psychiatrist or a sex counsellor can be of great help.

Do not think twice before getting professional help to treat ED. Get consultation from the best of the experts with a single click. Book Your Appointment Here Home-care For Erectile Dysfunction

Here are a few lifestyle changes that can help you deal with erectile dysfunction and improve your sexual life.

1. Exercise regularly It is essential to stay physically active. It helps to maintain regulated blood flow to the pelvic regions. Erectile dysfunction has been found to be more commonly reported in men who are not physically active2. Try different forms of physical workout such as running, swimming, or brisk walking. Regular workout helps to keep lifestyle problems such as cardiovascular diseases, obesity, high cholesterol, and stress away which also decreases the risk for erectile dysfunction.
2. Foods to eat and avoid A healthy, balanced diet plays a very integral role in maintaining the flow of blood to the sexual organs such as the pelvis and penis. Nutritious and healthy eating habits reduce an individual’s risk for lifestyle problems such as obesity, vascular diseases, and diabetes. Include fruits, vegetables, and whole grains in your daily diet. Reduce or avoid the intake of foods such as red meat and refined grains as it may increase the risk for erectile dysfunction.
3. Limit intake of medications Intake of several forms of antidepressants, sedatives, and antihistamines have been found to affect the male’s sexual response. The vascular network that produces an erection is often controlled by the nervous system. These medications have been found to interfere with the critical nerve signals and therefore impair the sexual response.
4. Get enough sleep Fatigue and stress have been found to severely affect sexual health. Psychological stress leads to increased adrenaline which further causes the contraction of the blood vessels. The contraction in the blood vessels inhibits the supply of blood to the pelvic region and helps adversely affect sexual health.
5. Get rid of your vices Drink in moderation. Excess of alcohol has been found to be detrimental to the overall health. Chronic heavy drinking has been found to affect organ systems, causing fluctuations in the sex hormones. Irregular fluctuations in the sex hormones have been found to affect the sexual health and are considered to be major triggers for conditions such as erectile dysfunction.

If you smoke, quit smoking. Nicotine narrows the blood vessels and hampers the flow of blood to the pelvic region (including the penis).

Complications Of Erectile Dysfunction

If left untreated, ED can lead to various health complications that can impact your sexual as well as mental well being. Some of the common complications that can result from ED include: An unsatisfactory sex life Being stressed or depressed Embarrassment or low self-esteem Problems in the relationship with your partner Inability to get your partner pregnant ED And Comorbidities

1. Diabetes

ED is common in men with both type 1 and type 2 diabetes. Studies show that diabetics are three times more likely to develop ED. Moreover, the risk of ED in men with diabetes increases with age and there is a high chance of getting ED around 10-15 years earlier than non-diabetics.

This can be attributed to factors such as longer duration of diabetes, old age, poor glycemic control, and neuropathy. Moreover, the condition is more severe and less responsive to medicines in diabetics. ED can cause an increase in mental stress, lead to disordered interpersonal relationships and interfere in their sexual life, thus affecting the overall quality of life in diabetics.

Diabetics, especially those with poor glycemic control, obesity, and those who are aged, are at a high risk of developing ED. Hence, keeping your blood glucose levels under control can play a key role in lowering your risk of ED.

1. Depression

Sexual dysfunction is a common symptom associated with depression. The chemical imbalances that occur when depressed can reduce a person’s ability to experience pleasure, both physical and emotional, which affects the sex drive and erection. Also a person suffering from depression experiences symptoms such as low self-esteem, anxiety, and guilt, which can cause ED.

As every patient with depression has a different sexual problem, it is wise to not depend on random search results but consult a psychiatrist, who is trained to diagnose clinical depression and also treat ED. Remember, both depression and ED are treatable conditions, so do not wait until the symptoms worsen. Instead, seek help as soon as possible to lead a healthy and happy life.

1. Obesity

As obesity affects a person both physically and mentally, these issues can, in turn, affect sexual well being. It can lead to difficulties with orgasm, decline in sexual frequency, lower sexual desire, and lack of satisfaction in men. Obesity can lead to hormonal imbalance, endothelial dysfunction, insulin resistance, psychological factors, and physical inactivity, which can lead to erectile dysfunction. This risk of erectile dysfunction increases with increasing body mass index (BMI).

Obesity is one of the most rapidly increasing and most common public health concerns in the world. Yet, it is also one of the most neglected health issues. So keep a close eye on your weight by eating a healthy diet, exercising regularly, staying away from stress, and avoiding any vices which can make you gain weight.

How healthy are YOU? Is your BMI normal? Here’s a quick way to know if you have normal BMI or are overweight/obese. Click Here To Know

1. Performance anxiety

Sexual performance anxiety, simply put as anxiety during/before sexual activity, is one of the most common sexual problems across the world that affects both men and women. It is responsible for premature ejaculation and erectile dysfunction in men. This is also commonly seen in men during the first night after marriage but is seen to improve with time.

Although there have been many cases of sexual performance anxiety, there is yet no diagnosis available for the condition. Also, there is no cause for concern, as it can be effectively treated with proper counseling or behavioral therapy. Consult a doctor who can help you improve your sexual performance and have a healthy sexual relationship. Alternative Therapies For Erectile Dysfunction

Acupuncture for ED

Studies suggest that acupuncture has been found to successfully reverse erectile dysfunction. It helps in improving the ability to maintain an erection, sustainable hardness during erection, and improved sexual satisfaction.

Ayurvedic medicine for ED

1. Ginseng: Ginseng root has been used as an important constituent in Chinese medicine . It is used for many beneficial properties and has been known to act as an effective remedy for ED. However, certain precautions need to be exercised since it can cause side effects like insomnia and few medicine interactions. The recommended dosage is 600 mg-1000 mg a day. It is available in powdered and capsule form.
2. Tribulus herb: This plant (tribulus terestris), also known as puncture vine, has been used in traditional Chinese medicine and Ayurveda since ancient times. It is known to increase the sexual drive in men and women. It is also considered as a cure for ED in men. The extracts of the roots and flowers are used in the tablets available.
3. Maca root: This root is known to improve hormonal balance, especially of the thyroid gland. It helps in improving stamina, energy, and overall sexual performance.
4. Horny goat weed: Chinese medicine has traditionally used horny goat weed for treating ED. It has shown positive results on rats but has not been tested on humans yet. Experts recommend Horny Goat weed more for boosting overall energy and hence increasing performance. Extracts from the plant can be taken in the form of capsules or tablets.
5. Yohimbe: The bark of the African Yohimbe tree contains yohimbine which has shown positive results in treating ED in humans. However, it may indicate serious side effects like lowered blood pressure, anxiety, and irregular heartbeat. Never take Yohimbe without a doctor’s supervision. It is available in the form of capsules, containing the bark extract.

Home remedies for ED

Some of the common herbal remedies that are known to boost sexual function and health include:

1. Garlic: Garlic acts as an aphrodisiac and serves as a tonic for those suffering from loss of libido or those who are unable to maintain an erection. Crush two or three cloves of garlic and eat them every morning.
2. Onion: Onion, known to have several health benefits, has been known to strengthen reproductive organs and also benefits those suffering from erectile dysfunction. Usually, white onions are recommended for such conditions.
3. Dark chocolate: More often known as a herb, it contains close to 70% cocoa, which helps to increase dopamine levels in the brain. It helps to uplift the mood, relaxes the body, and improves the body’s response to stimulation. Have it more often, without giving yourself an occasion to.
4. Lady finger : As per the Ayurvedic literature, lady finger helps to regain sexual vigour. It helps to treat sexual disorders and overall improves health. Grind the ladyfinger and add it to a glass of milk. Add sugar according to taste. Drink this everyday for significant results.
5. Drumstick (Sahjan): According to Ayurveda, this spindly vegetable may help relieve symptoms of functional sterility in both males and females. The dried bark of the tree has been found to be beneficial for conditions such as impotence, premature ejaculation, and lack of motility of sperm. Grind the bark, add the powder to the milk. Now, boil the mix and your healthy mix is ready, drink it every day. Frequently Asked Questions What causes erectile dysfunction in males? Is erectile dysfunction curable? What is the best Ayurveda remedy for ED? How can I get hard fast without pills? What food is a natural Viagra?/ What foods cure erectile dysfunction? Can you take sildenafil every day? References Sooriyamoorthy T, Leslie SW. Erectile Dysfunction. [Updated 2021 Apr 4]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2021 Jan. Ende J. Organic Impotence. In: Walker HK, Hall WD, Hurst JW, editors. Clinical Methods: The History, Physical, and Laboratory Examinations. 3rd edition. Boston: Butterworths; 1990. Chapter 187 Pastuszak AW. Current Diagnosis and Management of Erectile Dysfunction. Curr Sex Health Rep. 2014;6(3):164-176. Maiorino MI, Bellastella G, Esposito K. Lifestyle modifications and erectile dysfunction: what can be expected?. Asian J Androl. 2015;17(1):5-10. Mutha AS, Kulkarni VR, Bhagat SB, Beldar AS, Patel SB. An Observational Study to Evaluate the Prevalence of Erectile Dysfunction (ED) and Prescribing Pattern of Drugs in Patients with ED Visiting an Andrology Specialty Clinic, Mumbai: 2012-14. J Clin Diagn Res. 2015;9(7):PC08-PC11. Patel CK, Bennett N. Advances in the treatment of erectile dysfunction: what’s new and upcoming?. F1000Res. 2016;5:F1000 Faculty Rev-369. Krzastek SC, Bopp J, Smith RP, Kovac JR. Recent advances in the understanding and management of erectile dysfunction. F1000Res. 2019;8:F1000 Faculty Rev-102. Yafi FA, Jenkins L, Albersen M, et al. Erectile dysfunction. Nat Rev Dis Primers. 2016;2:16003. Lee JK, Tan RB, Chung E. Erectile dysfunction treatment and traditional medicine-can East and West medicine coexist?. Transl Androl Urol. 2017;6(1):91-100.

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Excessive sweating Also known as Hyperhidrosis Overview Excessive sweating, known as hyperhidrosis, is a condition characterized by uncontrollable and profuse sweating beyond what is necessary for temperature regulation. It can occur in specific areas such as the armpits, palms, and soles of the feet, or affect the entire body. It affects both men and women equally, but women tend to seek more care.

While the exact cause is not always known, excessive sweating can be due to certain underlying medical conditions, medications, or hormonal imbalances. It can also be triggered by certain foods and emotional stress.

Treatment options range from conservative measures such as antiperspirants, clothing modifications, and lifestyle changes, to more advanced approaches like medications, iontophoresis, botox injections, and surgical interventions. Key Facts Usually seen in All age groups Gender affected Both men and women Body part(s) involved Face Hands Feet Armpits Groins Mimicking Conditions Thyrotoxicosis Neuropathy Hypoglycemia Pheochromocytoma Menopause Lymphoma Tuberculosis Alcohol use disorder Necessary health tests/imaging Laboratory tests: Complete blood count (CBC), Thyroid-stimulating hormone, Erythrocyte sedimentation rate(ESR), Antinuclear antibody, Hemoglobin A1C (HbA1C), and Chest x-ray. Starch-iodine test Quantitative sudometry Filter paper test Treatment Topical application Antiperspirants Astringents

Oral Medications

Anticholinergics: Glycopyrrolate, Bornaprine, and Methantheline bromide

Alpha-adrenergic agonists: Clonidine

Calcium channel blockers: Diltiazem

Beta-blockers: Propranolol

Benzodiazepines: Diazepam

Botox injections

Surgery Specialists to consult Dermatologist Symptoms Of Excessive Sweating

Excessive sweating is usually seen in the palms, soles, face, head, or armpits. Other visible symptoms include:

Excessive body odor Sweat-soaked clothing Sweating even while sitting Difficulty in holding objects Extremely soft and white skin Skin peels off easily Skin infections Psychological symptoms

Increased heart rate Palpitations Gastric disturbances.

Is your excessive sweating causing body odor? Read more about 7 effective ways to get rid of it. Click now

Types of Excessive Sweating

There are two major types of excessive sweating:

Primary hyperhidrosis: It is usually seen if one of the family members may have had it. Studies suggest that primary hyperhidrosis begins in childhood and worsens with puberty, especially in women. Secondary hyperhidrosis: It is caused by some other condition or behavior like neurologic syndromes, thyrotoxicosis, diabetes mellitus, gout, menopause, chronic alcoholism, etc. Apart from these, there are other types of excessive sweating that include: Night sweats: These are generally associated with menopause, infection, malignancy, or endocrine disease. Also, fluctuating sleep depth due to sleep apnoea, pains, restless legs, etc., can cause excessive sweating. Food-triggered (Gustatory) sweating: Everyone knows that your face sweats when you consume highly spiced food. This gustatory hyperhidrosis is seen following salivary gland surgery and is then called Frey’s syndrome. It is also seen in uncontrolled diabetes. Causes Of Excessive Sweating

Our body has a mechanism to regulate sweating. However, in excessive sweating (hyperhidrosis), this mechanism may not work properly. The negative feedback to the hypothalamus, a structure deep within your brain, which tells it to stop signaling the sweat glands, may be impaired. As a result, the body ends up sweating more than necessary to cool down. Risk Factors For Excessive Sweating

Excessive sweating is a general feature seen during hot and humid conditions. However, if it is chronic then it can lead to discomfort. There are certain triggers that can lead to excessive sweating. They include: 1. Genetics Several studies suggest that primary hyperhidrosis has a genetic component as demonstrated by the high frequency of positive family histories. 2. Fever A fever or febrile illness is commonly associated with excessive sweating. Managing kids with fevers can be quite a task. Listen to our experts talk about natural remedies to get relief from fever.

Watch this video now

1. Certain Conditions Secondary hyperhidrosis can occur in the following conditions:

Diabetes mellitus Hyperthyroidism Parkinson’s disease Neurologic disorders

1. Medications Drugs that can induce hyperhidrosis, or sweating in excess include: Antidepressants Dopamine agonists Selective serotonin reuptake inhibitors (SSRIs) Antipsychotics Insulin
2. Menopause The excessive sweating associated with menopause is considered to be a form of secondary hyperhidrosis and is generally known as hot flashes.

Check out our exclusive range of menopause items to support your well-being and manage symptoms effectively. Buy them now 6. Anxiety Studies have shown that excessive sweating is a potentially disabling symptom, which is often triggered in social anxiety disorder (SAD). It is an intense, persistent fear of being watched and judged by others. 7. Chronic excessive alcohol consumption Excessive sweating in palms and soles is frequently observed in patients with a clinical history of chronic abnormal alcoholic intake. 8. Tumors Excessive sweating can occur in cancer or cancer treatment. Tumors such as pheochromocytoma (a rare tumor that usually forms in the adrenal glands, which are located on top of the kidneys) and lymphoma (cancer of the lymphatic system) known to cause hyperhidrosis. Diagnosis Of Excessive Sweating

To diagnose excessive sweating, it is important to first determine whether the source is primary or secondary and this can be done through a thorough history. The diagnosis consists of the following: 1. History and physical examination Diagnosis of excessive sweating is usually made by a visual inspection. A family history and medical history can determine primary or secondary hyperhidrosis. Primary hyperhidrosis is more commonly seen in the younger population. Symptoms that present later in life are mostly linked to a secondary cause. 2. Starch-iodine test In this test iodine solution is applied to the skin and starch powder is applied on top of that. As soon as those substances are in contact with sweat, they turn violet in color. The distribution pattern of the color (or absence of it) helps in the identification of excessive sweating. 3. Quantitative sudometry The quantitative sudomotor axon reflex test (QSART) is a quantitative test assessing sweat glands innervated by small nerve fibers. 4. Filter paper test This test is suitable to detect excessive sweating in the armpits. A pre-weighed filter paper is inserted into the armpit for a defined time period (60 sec or 5 min) and then weighed again. The difference corresponds to the amount of sweat released in mg/time can help diagnose hyperhidrosis. 5. Other tests If a secondary cause is suspected, a complete work-up is done to rule out infection, kidney dysfunction, malignancy, diabetes mellitus, thyroid disease, an inflammatory disorder, or connective tissue disease. Some of these tests include: Complete blood count (CBC) Basic metabolic panel Thyroid-stimulating hormone (TSH) Erythrocyte sedimentation rate(ESR) Antinuclear antibody Hemoglobin A1C (HbA1C) Chest x-ray

Worried about where you can find all these tests? Well look no further, we have got it covered for you.

Book your tests here Prevention Of Excessive Sweating

Here are a few things that you can adopt and a few you can avoid to prevent generalized excessive sweating. They include: Do’s Wear loose-fitting, breathable clothes to minimize signs of sweating Wear socks that absorb moisture Change your socks at least twice a day if possible Eat smaller frequent meals Keep your moisturizers in the fridge to get the cooling effect during summers Get a small handy fan to avoid sweating during hot weather. Don’ts Do not wear tight clothes or synthetic fabrics like nylon Refrain from wearing enclosed boots or sports shoes that may cause your feet to sweat more Avoid spicy food Limit alcohol and caffeine consumption

Want to know some more practical ways of preventing and curbing body odor caused due to excessive sweating? Enlighten yourself

Specialist To Visit

To address excessive sweating, it is crucial to identify its underlying cause. Consulting with a dermatologist(skin specialist) is essential as they can provide appropriate treatment for individuals experiencing this condition.

When to see a doctor? Excessive sweating for 6 or more months Sweating involves the armpits, palms, soles, and/or face Sweating is on both sides of the body in symmetry Decreased or no sweating at night Sweating episodes last at least 7 days Sweating impairs daily activities.

Consult India’s most trusted and well-qualified doctors if you are noticing these symptoms. Book your appointment Treatment Of Excessive Sweating

There are several treatment options available to manage or treat excessive sweating. These include: 1. Topical applications Generally, topical applications are suitable only for cases of focal hyperhidrosis. The most commonly used ones include: Antiperspirants: These are products designed to reduce sweat or perspiration on the skin. They are available in creams, powders, and sprays. Aluminum salts are added to many topical antiperspirants. Astringents: These act by contraction or tightening of body tissues. In case of excessive sweating, they work by constricting the skin’s pores, reducing sweat production, and providing a drying effect.

1. Oral Medications Oral medication is reserved for treatment-resistant cases or generalized hyperhidrosis. Medications used include: Anticholinergics: These are the most commonly used oral medications. Examples include: Glycopyrrolate Bornaprine Methantheline bromide

Alpha-adrenergic agonists: These are used to treat localized types of excessive sweating. Clonidine is the most commonly used drug.

Calcium channel blockers: Calcium channel blockers like diltiazem inhibit the calcium-dependent release of acetylcholine and help to reduce sweating.

Other drugs: Beta-blockers (like propranolol) and benzodiazepines (like diazepam) are used to reduce anxiety-related excessive sweating.

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1. Iontophoresis It is the process of passing a weak electrical current through the skin to block the sweat glands. The current is applied usually for 10-20 minutes per session, initially with 2 to 3 sessions per week. It is followed by maintenance sessions at 1 to 3 week intervals, depending upon the patient’s response. Iontophoresis may sound painful but is not.
2. Botox injections Injection of botox (botulinum toxin) is an effective therapy for excessive sweating of the armpits, hands, feet, armpit, and face. It works by inhibiting the release of acetylcholine, the chemical that activates sweat glands. The injections can be uncomfortable, but the use of a very small needle helps to minimize discomfort. They usually give around six months of relief from sweating.
3. Surgery It is the last resort when all other treatment modalities show no positive results. These include: Endoscopic thoracic sympathectomy: This surgery is used to treat sweating of the palms or face. The sympathetic nerves control sweating. A sympathectomy is an irreversible procedure during which at least one sympathetic ganglion (relay station between the nerves) is removed. Removal of axillary(armpit) sweat glands: Sweat glands in the armpit (axilla) is removed by means of axillary curettage (removal of tissue) or liposuction (removal of fat). Home Care For Excessive Sweating

The following home remedies are traditionally known to manage excessive sweating and gain some control over perspiration. However, make sure to take consent from your healthcare provider before trying these.

1. Apple cider vinegar: This is a natural astringent that tightens skin pores and helps control sweat production. It can also help rid your body of odor caused by bacteria by balancing the pH level. How to use it: Soak a cotton ball in apple cider vinegar and apply it to your problem areas at night just before you go to bed. Wash it off of your skin in the morning.

Buy apple cider vinegar products online. Tap now

1. Sage tea: It contains a natural astringent called tannic acid that has the ability to constrict and shrink your skin and pores to reduce sweat. Sage also helps to tackle the body odor of the armpits and feet. How to use it: Add two sage tea bags to two cups of boiling water and then let it cool. Dab a clean towel in it and wipe your underarms, arms, and feet. Repeat two or more times daily for best results. You can also soak your feet in warm water with sage tea bags in it.
2. Black tea: It is a great natural antiperspirant due to its high levels of tannic acid. How to use it: Add two bags of black tea to four cups of boiling water. When the water is cool enough, soak your palms or feet for 20 minutes.
3. Potatoes: These can absorb excess sweat on the body and act as a natural antiperspirant. How to use it: Take a small piece of potato, and rub it on your sweat-prone areas. Let the potato residue dry completely before getting dressed.

Know more benefits of potatoes. Click here

1. Baking Soda: Baking soda can be used to get rid of body odor. How to use it: Mix equal parts baking soda and cornstarch. Add lavender essential oil for its sweet fragrance and apply the mixture with a damp cloth to clean the underarms. Rinse it off after 20-30 minutes.

Here are 5 more effective home remedies to get that bad odor off your feet. Know more

1. Chamomile tea: Chamomile is one of the best herbs for eliminating stress and promoting relaxation which can help reduce sweating. How to use it: Drink two to three cups of chamomile tea each day to stay calm and refreshed. Complications Of Excessive Sweating

Excessive sweating may not be a life-threatening condition, but it sure has an effect on the quality of life. Some of the general complications include: Skin problems: Excessive sweating can lead to several skin complications due to prolonged moisture and the breakdown of the skin’s natural protective barrier. These include: Body odor Skin infections Dermatitis (redness, itching, and irritation of the skin) Friction between moist skin surfaces Eczema Acne breakouts Unusually soft or moist skin Skin discoloration

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Social embarrassment: It can be due to visible sweat stains and an unpleasant odor, making individuals self-conscious and affecting their confidence in social interactions. Emotional distress: This is caused by negative body image, and increased anxiety due to concerns about appearance and social interactions. Psychological distress: It can trigger feelings of embarrassment, shame, and self-consciousness, leading to anxiety, low self-esteem, and a negative impact on overall mental well-being. Work or school-related disability: Excessive sweating can interfere with productivity, concentration, and performance due to constant discomfort, distraction, and the need for frequent clothing changes at school or work.

Prioritize your mental health with our widest range of products to calm and nurture your mind. Explore mental wellness products. Buy now Did you know? Night sweats are common in COVID-19 infections. Studies demonstrate that profuse sweating can happen at night due to COVID-19. Know more about COVID-19 Alternative Therapies For Excessive Sweating

There are few alternative therapies that have shown good results in recent times to manage excessive sweating. They include:

1. Microwave thermolysis This is a non-invasive method that causes local destruction of sweat glands through microwaves. It is used to treat excessive sweating in the armpits.
2. Cryotherapy Topical cryotherapy uses a surface nitrous oxide cryoprobe applicator to freeze-damage the sweat glands.
3. Microneedle radiofrequency (MNRF) The mechanism of action is the destruction of the sweat glands by heating. The radiofrequency generated by microneedles targets both the odor-producing and the water-producing glands. The results of this treatment last a long time.
4. Photodynamic therapy This therapy involves using a photosensitizing agent. When the photosensitizer is exposed to specific light wavelengths, it generates reactive oxygen that targets and destroys sweat glands. It is a safe and effective treatment for excessive sweating, particularly in areas like the armpits and palms.
5. Laser therapy It is used for the treatment of underarm sweating, where lasers can precisely target, heat, and destroy the sweat glands. It is a safe, effective, and minimally invasive solution for excessive sweating.
6. Ultrasound Micro-focused ultrasound is also an effective and well-tolerated treatment for excessive sweating in the armpits. It works by delivering focused ultrasound energy to the deeper layers of the skin, targeting and reducing sweat gland activity. Living With Excessive Sweating

Living with excessive sweating can be challenging, as it can affect one’s confidence and social interactions, but with proper management, support, and understanding, individuals can lead fulfilling lives and minimize the impact of excessive sweating on their daily activities. Tips that can help include: 1. Pay attention to personal hygiene Individuals affected by hyperhidrosis should bathe daily and pay special attention to drying affected areas of skin (particularly the feet) to reduce any infections. Affected feet should be aired regularly. Also, changing the clothing once it is swat-soaked is a good option. 2. Use absorbent pads Individuals with excessive sweating, especially in the armpits may benefit from using absorbent pads to prevent sweat from soaking through clothing. 3. Select proper footwear For individuals with excessive sweating of feet, it is recommended to wear thick socks crafted from cotton or wool, regularly changing both socks and shoes. Optimal footwear options include leather, mesh, or canvas materials, while it is advisable to steer clear of synthetic materials.

Troubled with smelly feet? Know more about ways to manage it better. Read this now

1. Maintain a sweat journal Individuals who sweat a lot react to specific conditions. Heat, anxiety, and particular foods are a few common triggers that can cause excessive sweating. Finding out if you have triggers is crucial and they can be avoided to prevent sweating.
2. Focus on hydration Excessive sweating can result in dehydration if fluids are not replenished. Therefore, maintaining adequate hydration is an important aspect of managing the condition and preventing its negative effects.

Listen to our experts talk about more benefits of drinking water. Watch now

1. Stay calm and relaxed Practicing relaxation techniques may assist individuals to cope with emotional stimuli that trigger sweating. Apart from this other psychological therapies that one can try include:

Psychotherapy: Hypnosis, psychotherapy, and biofeedback are only effective only in limited individuals. The treatment typically can lead to improvements in quality of life. Behavioral therapy: These can help overcome anxiety benefitting individuals with anxiety-related sweating.

Tips for parents Each child’s experience with excessive sweating may vary, so it’s essential to be patient, empathetic, and proactive in finding strategies that work best for your child’s individual needs. Keep in mind the following things:

Talk openly with your child about excessive sweating to help them feel less self-conscious. Explain that it’s a common condition and reassure them that they are not alone Opt for lightweight, breathable fabrics such as cotton to help keep your child cool Encourage your child to maintain good hygiene by showering regularly and using an antiperspirant or deodorant suitable for their age. Teach them proper skincare routines to prevent skin irritation Ensure your child drinks enough water throughout the day Pack an extra set of clothes, including socks, for your child to change into if needed in school. Provide them with sweat-absorbing pads or talcum powder to help manage excessive sweating. Frequently Asked Questions What can cause excessive sweating in children? Can one use baby powder to stop sweat? Can hyperhidrosis be cured? What is the outlook for people with hyperhidrosis? References Brackenrich J, Fagg C. Hyperhidrosis. [Updated 2022 Oct 3]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan-. HYPERHIDROSIS: SIGNS AND SYMPTOMS. What are the signs and symptoms of hyperhidrosis? American Academy Of Dermatology. Rystedt A, et al. Hyperhidrosis – an unknown widespread “silent” disorder .J Neurol Neuromedicine (2016) 1(4): 25-33. Dermatol Ther (Heidelb) Hyperhidrosis: A Central Nervous Dysfunction of Sweat Secretion. (2023) 13:453–463. Cheshire WP, Fealey RD. Drug-induced hyperhidrosis and hypohidrosis: incidence, prevention, and management. Drug Saf. 2008;31(2):109-126. Davidson JR, Foa EB, Connor KM, Churchill LE. Hyperhidrosis in social anxiety disorder. Prog Neuropsychopharmacol Biol Psychiatry. 2002;26(7-8):1327-1331. Tugnoli V, Eleopra R, De Grandis D. Hyperhidrosis and sympathetic skin response in chronic alcoholic patients. Schlereth T, Dieterich M, Birklein F. Hyperhidrosis–causes and treatment of enhanced sweating. Dtsch Arztebl Int. 2009 Jan;106(3):32-7. What is Excessive Sweating? Excessive sweating (hyperhidrosis). National Health Institute (NHS UK). Jan 2021. ARORA et al. J Cosmet Dermatol. Treatment of Axillary hyperhidrosis. 2022;21:62–70 Zeidabadi A, Yazdanpanahi Z, Dabbaghmanesh MH, Sasani MR, Emamghoreishi M, Akbarzadeh M. The effect of Salvia officinalis extract on symptoms of flushing, night sweat, sleep disorders, and score of forgetfulness in postmenopausal women. J Family Med Prim Care. 2020 Feb 28;9(2):1086-1092. Mao JJ, Li QS, Soeller I, Rockwell K, Xie SX, Amsterdam JD. Long-Term Chamomile Therapy of Generalized Anxiety Disorder: A Study Protocol for a Randomized, Double-Blind, Placebo- Controlled Trial. J Clin Trials. 2014 Nov;4(5):188. Brackenrich J, Fagg C. Hyperhidrosis. [Updated 2022 Oct 3]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan-. Fathizadeh H, Taghizadeh S, Safari R, Khiabani SS, Babak B, Hamzavi F, Ganbarov K, Esposito S, Zeinalzadeh E, Dao S, Köse Ş, Kafil HS. Study presence of COVID-19 (SARS-CoV-2) in the sweat of patients infected with Covid-19. Microb Pathog. 2020 Dec;149:104556. Iannitti T, Palmieri B, Aspiro A, Di Cerbo A. A preliminary study of painless and effective transdermal botulinum toxin A delivery by jet nebulization for treatment of primary hyperhidrosis. Drug Des Devel Ther. 2014 Jul 14;8:931-5. Hyperhidrosis: Tips For Managing. American Academy of Dermatology Association.

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Fainting (Syncope) Also known as Passing out and Blackout Overview

Fainting (syncope) is the partial or complete loss of consciousness with disruption of awareness of oneself and one’s surroundings. It is followed by spontaneous recovery to full wakefulness. Syncopal episodes may occur suddenly with or without preceding signs or symptoms like dizziness, lightheadedness, nausea, and visual disturbances. The most common triggers for syncope include standing for long periods of time, exposure to heat, the sight of blood, fear, anxiety, or physical strain. Syncope can also occur due to any underlying condition affecting the heart or the nervous system. While syncope can occur to anyone, men above the age of 60 years are at a higher risk.

The best way to prevent syncope is to avoid the triggers, stay hydrated, eat meals on time, and not over-exert oneselves.

Fainting is relatively common and not life-threatening. However, some causes of fainting can be a warning sign of an underlying disease which needs proper diagnosis and treatment to prevent any episodes in the future. Key Facts Usually seen in Adults above 65 years of age Gender affected Both men and women, but more common in men. Body part(s) involved Nervous system Heart Prevalence World: ≥35% (2013) India: 15-39% (2014) Mimicking Conditions Hypoglycemia Seizures associated with aura Tonic-clonic activity Prolonged duration of unconsciousness Urinary and/or bowel incontinence Tongue biting and confusion after regaining consciousness Panic attacks Dehydration Diabetic neuropathy Diuresis Drug-induced orthostasis Dysautonomia Ectopic pregnancy Hemorrhage Hypotension Hypovolemia Multisystem atrophy Peripheral polyneuropathy Postural hypotension Subclavian steal Vasomotor insufficiency Necessary health tests/imaging Imaging: Electrocardiogram (ECG), Echocardiogram & Treadmill test (TMT) Blood tests: Complete blood count (CBC) Treatment Medications: Beta-blockers, Selective serotonin reuptake inhibitors & Fludrocortisone. Therapy: Tilt training and device therapy Surgery: Pacemaker See All Symptoms Of Fainting

Fainting (Syncope) can occur suddenly and with or without any preceding signs or symptoms. Some of the symptoms that start prior to syncope may include:

Dizziness Lightheadedness Nausea Visual disturbances Cold clammy skin Sweating Weakness Decreased heart rate Low blood pressure Headache Yawning Blackouts Did you know? The frequency of syncope is 15-39% in the general population. Know more about first aid tips for the management of syncope. Read this Causes Of Fainting

The brain requires blood flow to provide oxygen and glucose to its cells to sustain life. Fainting is caused by a decrease in blood flow to the brain because of the following reasons or a combination of them:

The heart fails to pump the blood. The blood vessels lack enough tone to maintain adequate blood pressure to deliver the blood to the brain. There is not enough blood or fluid in the blood vessels.

Some of the most common types of syncope and their causes are discussed below: 1. Vasovagal syncope It is the most common type of syncope caused by a sudden drop in blood pressure, which causes a drop in blood flow to the brain. The most common triggers for vasovagal syncope include: Prolonged standing Fear of injury Physical or psychological stress Dehydration Bleeding Pain Strain Heat exposure Sight of blood

When an individual stands, gravity causes blood to settle in the lower part of the body, leading to syncope. In some cases of physical trauma, the body lowers blood pressure and heart rate to reduce the amount of bleeding, which causes syncope. 2. Situational syncope Situational syncope occurs when a specific situation act as the trigger for a syncopal episode such as: Urination Defecation Forceful coughing Sneezing Swallowing Post-exercise Dehydration Intense emotional stress Anxiety Fear Pain Hunger Use of alcohol or drugs Breathing in too much oxygen and getting rid of too much carbon dioxide too quickly. 3. Cardiogenic syncope Various heart conditions can cause fainting. These include: Heart beating too fast or too slow Abnormalities of the heart valves Widespread disease of the heart muscle Blockage of blood flow from the heart

Take care of your heart with our extensive heart care range. Explore Now! 4. Orthostatic hypotension syncope It is a transient loss of consciousness due to reduced blood flow to the brain due to the following reasons:

Volume depletion: Inadequate fluid intake (hot weather), diarrhea, vomiting, etc. Drug-induced orthostatic hypotension: Alcohol, vasodilators, diuretics, and beta-adrenergic blockers Diseases of the nervous system: These include Parkinson’s disease(a progressive disorder that affects the nervous system causing tremors in the body), Lewy body dementia (a disease associated with abnormal deposits of a protein leading to forgetfulness), diabetes, amyloidosis (build-up of proteins called amyloids in the organs), and spinal cord injuries.

April 11th is observed as World Parkinson’s Day every year. The aim is to raise awareness about the condition. To know more about parkinson’s disease. Click Here! 5. Neurologic syncope It is caused by neurological conditions like: Seizure Stroke Migraine Abnormal build-up of cerebrospinal fluid (CSF) in the brain. 6. Postural orthostatic tachycardia syndrome (POTS) It is caused by a very fast heart rate (tachycardia) that happens when a person stands after sitting or lying down. Usually when a person stands, the nerves send signals to the blood vessels in the lower body to tighten. The tightening vessels work against gravity to keep blood from collecting in the legs. If there is not enough blood flow to the brain, a person may feel lightheaded or pass out every time they stand.

This condition is most common in women, but it can occur in men as well. 7. Other causes The lesser common causes of syncope include: Hypoglycemia (low blood sugar) Hypoxia (decreased oxygen) Symptomatic anemia Tumor in the heart Panic attacks Did you know? The cause of syncope is unknown In about one-third of patients. Understand better about anxiety and panic attacks. Click Here! Risk Factors For Fainting

Fainting (Syncope) is common in older adults, but younger people without cardiac disease may experience syncope while standing or have specific stress or situational triggers.

Risk factors include: Age >65 years Male gender Structural heart disease Heart failure Family history of fainting or cardiac conditions Syncope-related trauma Hypertension Palpitation Abnormal ECG High levels of troponin in the blood (an indicator of recent heart attack)

Know in detail about the symptoms, causes, risk factors and treatment for heart attacks. Read This Now!

Diagnosis Of Fainting

Fainting (Syncope) may not be life-threatening, but repeated syncopal episodes can be a cause of worry. Diagnosing the actual cause of syncope is very important to prevent further episodes. The syncope diagnosis includes: A. Medical history A thorough history can provide valuable information in determining the etiology of a syncopal episode. Information about current medications and pre-existing medical conditions such as diabetes, heart disease, or psychiatric illness can help pinpoint the cause of syncope. B. Physical examination Physical exams should focus on examining the vital signs of the patient through neurologic and cardiac examinations. The doctor will measure your heart rate and blood pressure to help determine if a rhythm disturbance or low blood pressure caused the syncope. You may be asked to sit or stand while the blood pressure is measured to test for orthostatic hypotension. C. Investigations Tests to effectively diagnose syncope include: Electrocardiogram (ECG): ECG is a widely available and inexpensive method that records the electrical signal from the heart and provides information about the potential and specific causes of syncopes like abnormal heart rhythms and other cardiac problems. Echocardiogram: This test uses ultrasound imaging to view the heart and is used in patients with unexplained syncope and with a positive cardiac history or abnormal ECG. Treadmill test (TMT): Also known as an exercise stress test that studies heart rhythms during exercise. It’s usually conducted while you walk or jog on a treadmill. Blood tests: These are routine blood tests like complete blood count (CBC) to check for anemia, which can cause or contribute to fainting spells. Tilt table test: This test is done when there are no heart problems associated with syncope. During the test, the patient is asked to lie flat on their back on a table that changes positions, tilting upward at various angles and a technician monitors the heart rhythms and blood pressure to see if changing their posture affects them. Blood volume determination: This test determines if the individual has the right amount of blood in the body, based on their gender, height, and weight. Studies show that measuring blood volume may explain the mechanisms of syncope in individuals with unknown causes of syncope. Rhythm monitoring: Heart rhythm monitoring may be recommended to diagnose rhythm problems that come and go and have not been detected with a routine ECG. These include: Holter monitor: This is a device that monitors your heart rhythm while performing normal daily activities at home for 24 or 48 hours. Event recorder: An event recorder may be recommended to capture rhythm problems associated with a syncopal episode. Implantable loop recorder: This provides a way to monitor rhythms over an extended period of time i.e 18 to 24 months. Electrophysiology study: An electrophysiology study (EPS) may be performed if you have heart disease or if you have rhythm problems. Susceptibility to abnormal rhythms can then be assessed under controlled, safe conditions. Electroencephalogram: It involves the measurement of electrical activity in the brain. It is used to diagnose seizures but may be part of the evaluation of unexplained “collapse” events. Hemodynamic testing: This test checks the blood flow and pressure inside the blood vessels when the heart muscle contracts and pumps blood throughout the body. Autonomic reflex testing: A series of tests that monitor blood pressure, blood flow, heart rate, skin temperature, and sweating in response to certain stimuli are done to check if there is nerve damage causing syncope. Did you know? Sometimes, fainting may be due to drops in a hormone called cortisol. Ask your doctor about testing for low cortisol. Book your tests now Specialist To Visit

Syncope can cause injuries from the loss of consciousness. Doctors that can diagnose any underlying cause of syncope and treat it include:

General physicians Cardiologists Neurologists

A cardiologist is a doctor who specializes in the study or treatment of heart diseases and heart abnormalities. A neurologist is a specialist who treats disorders of nerves and the nervous system.

Note: Syncope can be a sign of something more serious, such as a heart or brain disorder. Seek advice from our world-class doctor without any delay after a fainting spell, especially if you’ve never had one before. Consult Now! Prevention Of Fainting

Recurrent syncope has effects on quality of life and the degree of impairment is proportional to syncope frequency. Some things to keep in mind to prevent the next syncopal episode include: 1. Eat right Eat regular meals and do not skip meals as low blood sugar levels can also cause syncope. Increase your salt intake as it expands your blood volume by retaining fluids preventing a drop in your blood pressure. 2. Know your triggers Having an understanding of what causes syncope for you and then avoiding it can help prevent future episodes. Talk to your doctor to understand the cause of your episodes and take all your medications on time as prescribed by the doctor. 3. Manage presyncope symptoms Lie down when you feel the symptoms of syncope starting and do not exert yourself too much. Do not exert yourself too much and if you stand in a place for a long time make sure to keep moving your legs. You can also try simple exercises to raise blood pressure like leg crossing, squatting, and tensing of legs and buttocks. 4. Use compression stockings By exerting pressure against the legs, compression stockings reduce the diameter of the veins and increase blood flow in the legs. 5. Stay hydrated Dehydration can be one of the most important yet neglected causes of syncope. Dink at least 2 liters of water a day to keep yourself wee-hydrated. 6. Avoid long and hot showers Heat causes blood to shift to the superficial tissues and hot water dilates blood vessels, thus, dropping the blood pressure. 7. Cope up with your anxiety If you have anxiety make sure to calm down to prevent syncope. Find ways of managing your anxiety with meditation, yoga, or exercise.

Yoga is more than just exercise. Read more about the 12 health benefits of yoga. Tap Now! 8. Stop smoking Tobacco can cause the blood vessels to constrict and if it is done while standing it can trigger orthostatic syncope.

Try our smoking cessation range if you are keen on quitting this deadly habit. Browse Now!

Treatment Of Fainting

Treatment of the underlying cause is the focus of treatment in fainting. During an acute episode, patients should be made to sit or lay down quickly, and raising the legs help recovery. Treatment of any injuries sustained during a sudden fall from syncope should be given immediate attention. Treatment options depending on types of syncope include: 1. Vasovagal syncope Conservative measures include avoiding situations or stimuli that have caused them, increasing the use of salt and fluid, and making lifestyle modifications. Other modalities include: Drug therapy: Many agents have been prescribed for vasovagal syncope that might be useful if conservative measures fail, there include: Beta-blockers Selective serotonin reuptake inhibitors Hydro fludrocortisone Proamatine Fludrocortisone Alpha Agonists Tilt Training: This consists of long periods of upright posture and has been recommended in patients who have high symptoms of syncope. Long-term benefit has yet to be demonstrated with attrition of compliance with the rule. Device Therapy: On the basis of limited yet compelling randomized, controlled trial data, permanent pacing is indicated in carotid sinus syndrome, and this response clinically manifests as syncope. 2. Orthostatic hypotension The treatment for this type of syncope is generally conservative consisting of: Rising slowly from sleeping and sitting position Avoiding medications like diuretics, and vasodilators Use of compression stocking to improve blood circulation Intravenous fluids in patients who are dehydrated Using protamine in unmanageable cases. 3. Cardiac syncope Treating underlying conditions is the goal of this kind of syncope. Patients with syncope and underlying heart disease need regular follow-ups with their physician and cardiologist. The goals of treatment are to reduce mortality, injury, and recurrences. Treatment is obviously best directed at the correction of the underlying cause when this is possible. Surgery to incorporate a pacemaker may be required in conditions like slow or rapid heartbeats.

A healthy heart is the key to a healthy body. Learn tips and tricks to keep your heart healthy.

Home-care For Fainting

Fainting (Syncope) may be caused by a serious underlying health condition, so, always check with your doctor before taking any herbs or supplements. Some of the home remedies that can help you with recurrent episodes of syncope include: A. Nutrition and supplements Omega-3 fatty acids: Such as fish oil may help reduce inflammation and improve heart health. Cold-water fish, such as salmon or halibut, are also good sources.

Buy omega-3 and fish oil products online from the comfort of your home to amp up your health. Shop Now! Alpha-lipoic acid: It is an antioxidant that may be good for heart health. People who take thyroid hormone should ask their doctors before taking alpha-lipoic acid. L-arginine: This is an antioxidant that may help promote good circulation. People who have a history of a heart attack, heart disease, low blood pressure, or circulatory issues should speak to their doctors before taking L-arginine. Whole grains: Add high-fiber foods such as beans and whole grains. Lean protein meat like fish and chicken are also good choices. These take longer to digest and do not cause a sudden drop in blood pressure.

Read how whole grains can help you stay healthy and slim. Click To Know! B. Herbs Herbs have been used to strengthen the body and treat diseases. However, herbs can trigger side effects and interact with other herbs, supplements, or medications. Always talk to your doctor before starting anything new. Some of hers that can prove to be very beneficial include: Green tea: It is rich in antioxidant and anti-inflammatory substances that may be good for your heart health. Blueberry: This is an antioxidant that helps promote good circulation. These may increase the risk of bleeding, especially if you also take blood thinners. Apple cider vinegar: One common cause of dizziness is low blood sugar, but apple cider vinegar might help with that, according to a study in diabetes care. Ginger (Adrak): Ginger delivers a lot of surprising benefits including reducing nausea, which can be a proponent of symptoms prior to the syncopal episode. Complications Of Fainting

Fainting (Syncope) is not a sign of a fatal disease, particularly if it only happens once. Complications of syncope are injuries or fractures from falls or fainting. The elderly have a higher risk for injury than younger people who go into syncope. Did you know? Syncope is not a common manifestation of COVID-19, but certain studies suggest that it may occur in some cases. Know more about COVID-19 Alternative Therapies For Fainting

Always remember to get approval from your doctor before starting any complementary or alternative therapy as some of the therapies may be contraindicated from the ongoing treatment. Alternative therapies, that can prove beneficial in managing or preventing syncope include: 1. Homeopathy Syncope has been treated by homeopathy and requires detailed specific prescribing of the “right” homeopathic remedy. An experienced and certified homeopath will assess your individual constitution and symptoms, and then recommend remedies. Explore Now! 2. Acupuncture Acupuncture may help treat syncope. Studies have shown that acupuncture uses the technique to regulate yin and yang which promotes the reproduction of the body fluids and replenishes and restores circulation. Acupuncture does not often cause side effects or complications, although some people may faint during acupuncture treatments, it is not considered a serious complication. 3. Massage therapy You can actually activate your body’s acupressure points to relax and self-treat. But getting a massage is a more fun and relaxing activity that promotes a sense of calm and can help short-circuit dizziness. A soothing massage with lavender essential oil may help you if you’re prone to feeling anxious.

Check out our range of body massagers to get rid of those tense muscles and relax. Fill Your Cart Now! Frequently Asked Questions 1. Is there a difference between syncope and fainting? 2. Why is it important to see a specialist after syncope? 3. How will syncope affect my life? 4. Can vertigo cause syncope? 5. Can the sight of blood cause syncope? References Grossman SA, Badireddy M. Syncope. [Updated 2022 Jun 21]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan-. Benditt D, et al. Syncope (fainting). 3421 V26. Oct 2022. Jeanmonod R, Sahni D, Silberman M. Vasovagal Episode. [Updated 2022 Jul 18]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan-. Uppoor RB, Patel K. Syncope: Diagnostic Yield of Various Clinical Investigations. Cureus. 2022 Mar 29;14(3):e23596. 2018 ESC Guidelines for the diagnosis and management of syncope. European Heart Journal (2018) 39, 1883–1948. What causes syncope? Syncope (Fainting). Heart.org. Jun 2017. Momodu II, Okafor CN. Orthostatic Syncope. [Updated 2022 Jul 4]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan-. K Venkata, et al. Syncope: Classification and risk stratification. Journal of Cardiology 63 (2014) 171–177. Fouad-Tarazi F, Calcatti J, Christian R, Armstrong R, Depaul M. Blood volume measurement as a tool in diagnosing syncope [published correction appears in Am J Med Sci. 2016 Nov;352(5):543]. Am J Med Sci. 2007;334(1):53-56. Udyavar A, et al. Evaluation and Management of Reflex Vasovagal Syncope—A Review. Indian Journal of Clinical Cardiology 3(1) 34–46, 2022. de Freitas RF, Torres SC, Martín-Sánchez FJ, Carbó AV, Lauria G, Nunes JPL. Syncope and COVID-19 disease - A systematic review. Auton Neurosci. 2021;235:102872. Saklani P, Krahn A et al. Syncope. Circulation. 2013;127:1330–1339. Morgan, Joanna, et al. The Potential of Apple Cider Vinegar in the Management of Type 2 Diabetes. International Journal of Diabetes Research 2016, 5(6): 129-134. Deng S. Acupuncture treatment of syncope based on differentiation of signs and symptoms. J Tradit Chin Med. 1990;10(3):182-188.

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Fatty liver disease Also known as NAFLD, Steatosis, Hepatic steatosis, and Fatty Liver Hepatitis Overview

The liver is a critical organ in the human body that helps support metabolism, immunity, digestion, detoxification, and vitamin storage, among other functions. Fatty liver disease is the accumulation of abnormal amounts of fat within the liver cells that compromise the liver’s ability to perform.

Fatty liver disease can be caused by excess alcohol consumption or other causes, which is known as nonalcoholic fatty liver disease(NAFLD). Most people do not know that they have NAFLD during the initial stages. It only presents symptoms or signs in case of a progression to liver failure.

NAFLD has become increasingly common with the increasing prevalence of its risk factors like obesity, diabetes, high blood pressure, and high cholesterol.

The treatment of NAFLD is based on the cause and how far the disease has progressed. Lifestyle modifications such as regular exercise, a healthy diet, managing weight, and keeping blood sugar and cholesterol under control are the cornerstone of managing this condition. A liver transplant may be required in severe cases. Types Of Fatty Liver Disease Fatty liver disease is broadly categorized into 2 types. These are:

1. Alcohol-related fatty liver disease (AFLD) Alcoholic fatty liver disease occurs due to the consumption of alcohol in excessive amounts.
2. Nonalcoholic fatty liver disease (NAFLD) Nonalcoholic fatty liver disease (NAFLD) is not related to alcohol consumption. We will be focusing on this type in detail. NAFLD is further classified as: Fatty liver (isolated fatty liver or IFL) Nonalcoholic Steatohepatitis (NASH)

In both isolated fatty liver and NASH there is a high amount of fat in the liver cells, but, in addition, in NASH there is inflammation within the liver, and, as a result, the liver cells are damaged and are replaced by scar tissue. Key Facts Usually seen in Adults above 60 years of age Gender affected Both men and women Body part(s) involved Liver Kidneys Pancreas Prevalence Worldwide: 25.24% (NAFLD) India: 9-32% (NAFLD) Mimicking Conditions Alcoholic liver disease Uncontrolled type 1 diabetes Wilson disease Hepatitis C (particularly genotype 3) Medication induced steatosis (amiodarone, methotrexate, tamoxifen, glucocorticoids, valproate, anti-retroviral agents for HIV) Reye syndrome Mitochondrial hepatopathies Kwashiorkor Anorexia nervosa Mitochondrial disorders Cholesterol Ester Storage Disease (Lysosomal acid lipase deficiency) Necessary health tests/imaging Blood tests: Liver function test (LFT), Complete blood count (CBC), and Fasting serum glucose Imaging tests: Abdominal ultrasound, Abdominal computed tomography (CT), and Magnetic resonance imaging (MRI) Liver biopsy Treatment Dietary Modifications Exercise Regime Weight loss medications: Orlistat Bariatric surgery Dietary supplements: Vitamin E, Vitamin C, Vitamin D Liver transplant Medications for cholesterol and triglycerides: Atorvastatin and Lovastatin Medications for Viral hepatitis: Lamivudine, Entecavir and Tenofovir disoproxil fumarate Medications for Diabetes or insulin resistance: Rosiglitazone and Pioglitazone See All Symptoms Of Fatty Liver Disease

Fatty liver disease can progress through four stages, which include: Simple fatty liver: It refers to the deposition and buildup of excess fat in the liver. It is usually harmless if it doesn’t progress. Steatohepatitis: This refers to when there is inflammation in the liver along with fat deposition. Fibrosis: This stage occurs when constant inflammation in the liver begins causing scarring. However, the liver can still function normally. Cirrhosis: In this stage, scarring of the liver has become widespread, weakening the liver’s ability to function. This is a serious stage and is irreversible.

With NAFLD there are usually no symptoms in the early stages. However, in a few cases, the patient may feel tired and have discomfort in the upper right side of the abdomen. In cirrhosis (latter stages of NAFLD), the following symptoms can be observed: Weakness or fatigue Swollen belly Abdominal pain Loss of appetite Weight loss Confusion Enlarged blood vessels underneath your skin Larger than normal breasts in men Edema (swelling), especially in the legs Fluid accumulation in the abdomen (ascites) Skin and eyes appear yellow due to jaundice Dark-colored urine Pale stools

Did you know? The liver excretes bilirubin, a substance that helps the metabolism of proteins, carbohydrates, and fats. It also helps to remove wastes and toxic matter from the blood. A malfunctioning liver cannot excrete adequate amounts of bilirubin, and is one of the primary causes of jaundice. Learn more about jaundice Causes Of Fatty Liver Disease

In fatty liver disease, excess fat gets stored in liver cells.

Insulin resistance is the primary reason leading to NAFLD. Insulin resistance is when cells in your muscles, fat, and liver don’t respond to insulin, leading to excessive glucose (sugar) in your blood. Also, elevated insulin levels and insulin resistance promote the continuous synthesis of fat in the liver.

Numerous risk factors for the development of NAFLD have been espoused, with most having some form of metabolic defect or insulin resistance at the core.

Don’t toy with your liver. Read about 6 habits that could be damaging it. Click To Know More Risk Factors For Fatty Liver Disease

NAFLD is primarily caused by the deposition of fats in the liver and the various risk factors include: 1. Diet and dietary habits High frequency of eating fast foods, and larger food portions that contain high saturated fats and refined carbohydrates can increase the risk of NAFLD. Dietary habits like inappropriate mealtimes, including the habit of eating too much at evening and night, missing breakfast, and eating too rapidly also predispose to insulin resistance and thereby NAFLD.

1. Overweight or obesity Obesity is a strong risk factor for NAFLD. According to a study, up to 75% of people who are overweight and 90% of people who are obese are suffering from NAFLD.
2. High BMI Another study suggests that adults with a high BMI (Body mass index is a measure of body fat based on the height and weight of an adult) rate may have a risk of NAFLD.
3. Age The risk of developing NAFLD increases with age because older people begin experiencing organ dysfunction. A relatively high proportion of individuals with progressive forms of NAFLD develop cirrhosis by the time they are in their 70s or beyond.
4. Family history Research shows that liver fat fraction and fatty liver condition are inherited traits and tend to run in families.
5. Type 2 diabetes Diabetes significantly raises the risk of nonalcoholic fatty liver disease. In most cases, Type 2 diabetes mellitus and NAFLD exist together.
6. High cholesterol Dyslipidemia, i.e. high levels of triglycerides and LDL (bad cholesterol) or low levels of HDL (good cholesterol) in the blood can predispose to NAFLD.
7. Metabolic syndrome Metabolic syndrome is a combination of risk factors which predispose a person to developing type Ⅱ diabetes and cardiovascular disease.

The current diagnostic criteria require having 3 of 5 of the following factors: Triglycerides (150 mg/dL or greater) HDL cholesterol (less than 40 mg/dL in men and less than 50 mg/dL in women) High fasting glucose (100 g/dL or greater) Increased waist circumference (defined by population specific data) High blood pressure (greater than 130/85 mmHg)

It is observed that the incidence of NAFLD has been increasing in concert with the rising rates of metabolic syndrome.

1. Polycystic ovary syndrome (PCOS) The prevalence of NAFLD is higher in women suffering from PCOS. PCOS puts women at increased risk of insulin resistance, a critical factor in liver damage.
2. Obstructive sleep apnea Evidence shows that obstructive sleep apnea can induce non-alcoholic fatty liver disease by increasing insulin resistance, inflammation, and dyslipidemia.
3. Hepatitis infections HBV and HCV (hepatitis B and C viruses respectively) affect millions of people globally and are a major cause of chronic liver disease, including NAFLD (non-alcoholic fatty liver disease).
4. Genetic conditions Defective LIPA gene which is clinically known as Wolman’s disease and cholesterol ester storage disease (CESD) can lead to chronic liver diseases. Fibrosis leading to cirrhosis is seen in two-thirds of patients with LIPA deficiency.
5. Certain medications Side effects of certain medicines, such as corticosteroids, antidepressants, and antipsychotics can induce fatty liver disease.
6. Smoking Smoking predisposes to the development of insulin resistance and metabolic syndrome, which are significant risk factors for fatty liver disease.

Tobacco kills more than 7 million people in the world. Try our widest range of smoking cessation products to keep this deadly habit at bay. Buy NOW Diagnosis Of Fatty Liver Disease

NAFLD can be hard to diagnose because many people do not have any signs and symptoms initially. A combination of laboratory and imaging tests is required to confirm a diagnosis. The diagnostic procedure include: 1. Medical history Your doctor will evaluate the presence of risk factors and also the absence of excessive alcohol intake. 2. Physical examination During a physical examination, your doctor will look for any physical signs of impaired liver function like pale yellow skin, jaundice, red palms, enlarged breasts tissue in men (gynecomastia), small or enlarged testicles, and swelling of the upper stomach. To check for liver inflammation, they may press on your abdomen as an enlarged liver can be felt along the lower edge of the right rib cage. 3. Blood tests Liver function test (LFT): This test helps show the abnormal levels of enzymes and proteins produced by the liver, including bilirubin, albumin, lactate dehydrogenase, etc. Complete blood count (CBC): This test may help detect any infection or anemia that may be caused due to internal bleeding. Fasting serum glucose: Increased levels of fasting serum glucose correlate with the degree of steatosis in NAFLD patients and may be used as a marker of severe hepatic steatosis. Hepatitis antibody test: This test may help to rule out hepatitis B and C (mainly) virus infections that may cause serious liver inflammation and damage. Other blood tests: Antibodies are screened for autoimmune liver conditions, which include antinuclear antibody (ANA), anti-smooth muscle antibody (SMA), and anti-mitochondrial antibody (AMA) tests. 4. Imaging tests The doctor may advise imaging tests to get a better understanding of the patient’s condition. The following imaging tests can show the size, shape, texture, and inflammation of the liver:

Abdominal ultrasound: It is a non-invasive, widely available, and accurate procedure for the detection of fatty liver disease. On ultrasound images, fatty liver looks brighter than normal liver, and cirrhotic livers (advanced stage) look lumpy and shrunken. Abdominal computed tomography (CT): This procedure uses x-ray equipment with computers to produce multiple and detailed digital images of the liver. It can help detect mild to advanced steatosis as well as other liver diseases. Magnetic resonance imaging (MRI): This technique requires a magnetic field, radio frequency pulses, and a computer to produce detailed pictures of the liver. A dye that is injected into the veins of the patient, helps the liver to be seen more clearly on the scan. It allows accuracy for the detection of damage caused by various liver diseases. Magnetic resonance cholangiopancreatography (MRCP): MRCP is a special type of MRI that is used to evaluate a part of the liver and gallbladder. Magnetic resonance elastography (MRE): This test assesses the stiffness, inflammation, and severity of scarring in the liver. Transient elastography (fibroScan): This test helps quantify liver fibrosis (scarring).

1. Liver biopsy In this procedure, fine tissue samples are collected from the liver with a needle or during surgery. The liver biopsy should be considered in all patients with unexplained elevations in serum aminotransferases (e.g., with findings negative for viral markers or with no history of alcohol use). It offers high accuracy in the detection of fatty liver disease.

Be it a basic wellness check or a specific test, you can now get them done in the comfort and safety of your house with just a click. Book Now

Prevention Of Fatty Liver Disease

A healthy lifestyle prevents fatty liver disease and its potential complications. Following are a few tips to keep the liver, the only body organ with the superpower to grow back, healthy: 1. Eat right A wholesome, well-balanced, healthy diet is the cornerstone for preventing fatty liver. This can be achieved by: Consuming green vegetables, fresh seasonal fruits, whole grains, lean protein sources, nuts, seeds, low-fat dairy products, etc Adding healthy fats (Polyunsaturated omega-3 fats) to the diet and staying away from saturated and trans fats Increasing intake of dietary fiber Avoiding fast food, canned and packaged food items Limiting sugar intake

If you’re trying to reduce the sugar and calories in your diet, you may be turning to artificial sweeteners or other sugar substitutes. Watch this video to learn whether sugar alternatives are really as healthy as they claim to be and how you can include healthy alternatives to sugar in your life. https://www.youtube.com/watch?v=v6D94qq4ynY

1. Keep your weight in check Moderate amounts of weight loss is associated with improvement in insulin sensitivity. Energy restriction of about 25–30 kcal/kg/day with a target weight loss of about 10% of body weight over six months can prevent and keep fatty liver in check.

Struggling to lose weight? Here are a few weight loss tips and tricks that can work like magic! Read Now

1. Always take out time to exercise Regular exercise is a must to prevent fatty liver. Set realistic goals while working out, such as daily 15-min walks and 15-min exercises. Small, achievable goals will also help you to be consistent and make working out a part of your daily routine.
2. Protect yourself from hepatitis By avoiding hepatitis infection (particularly hepatitis B and C), the risk of developing liver cirrhosis can be limited.

Use the following methods to reduce the risk of infection: Avoid unprotected sex

Try our range of condoms and protect yourself from STDs (sexually transmitted diseases) Explore Now

Do not get body piercings or tattoos in an unsterilized environment Get vaccinated for hepatitis B and hepatitis C Do not share needles Vaccination is not just for children. In fact, as you grow old, your immunity decreases which in turn makes you susceptible to various diseases. Read more about various adult vaccines. Click Here

1. Manage diabetes and cholesterol These two conditions can be the primary culprit causing NAFLD. It is essential to keep them in check by consuming a healthy, wholesome diet, adding exercise to your daily routine, monitoring levels, and seeing your doctor regularly for follow-ups. NAFLD is a growing epidemic not just in India, but worldwide. Listen to our experts talk about liver detox tips that help you take care of your liver.

Click To Watch Video

Specialist To Visit

A general physician can evaluate the causes of liver abnormalities and refer to the following specialists for assessment. They include: Gastroenterologist Hepatologist A gastroenterologist is a specialist with expertise in the treatment & management of disorders related to digestive tract organs, including the liver, while a hepatologist specializes in disorders and diseases that affect the liver biliary tract, gallbladder, & pancreas.

If you are facing any issues, seek help. Consult our healthcare professionals today. Consult Now Home Care For Fatty Liver Disease

The following home remedies can be used as an adjunct to lifestyle modifications and other treatment options for fatty liver : 1. Coffee: A study has found that coffee of all kinds lowers the risk of fatty liver disease, with a significant risk reduction of fibrosis.

Know more about the benefits of drinking coffee. Watch this video by our expert. Tap Here

1. Turmeric: It has antiseptic, antibacterial, antifungal, and antioxidant properties and can do wonders in treating liver disease. Add a pinch of turmeric in hot milk with honey and drink it once a day.

Have all your questions answered regarding turmeric tea. Click To Watch The Video

1. Apple cider vinegar (ACV): ACV helps improve fat metabolism and detoxify the liver.

Quick Tip! Always consume ACV with a straw. This helps prevent tooth erosion.

Buy apple cider vinegar products online with just a click. Click Here

1. Green tea: It has high antioxidant properties that reduce oxidative stress, which initiates fibrosis and cirrhosis of tissues. It also gives a protective effect against liver disease and has antiviral properties that help fight viral hepatitis.

Explore our wide range of green teas. Click To Shop

1. Milk thistle: Studies show that it is a powerful liver cleanser and has the property of rebuilding the liver cells. It helps in reducing liver damage and removing toxins from the body that are processed through the liver. The liver is the quality controller of the human body. Everything that goes in the body undergoes a quality check in the liver. So, detox your liver and boost its overall functioning.

Explore Our Liver Care Range Treatment Of Fatty Liver Disease

The first-line treatment for fatty liver disease is lifestyle intervention with diet modifications and exercise regime. Dietary Modifications Healthy, mindful eating is key to induce weight loss without malnutrition. The following tips can be of great help. However, it is always advisable to work in conjunction with regular interactions with a dietician. Avoid fast food, canned and packaged food items Limit sugar intake Count your calories. It is advisable to consume 1000‐1200 calories per day for women and 1200‐1600 calories per day for men. Goal is to achieve a weight loss of 0.5 to 1.0 kg per week. Aim for gradual but consistent weight loss over 6 to 12 months.

At the same time, macronutrients including carbohydrate, protein, fat and micronutrients including vitamins, minerals, and supplements must be well balanced.

Here is your guide to eating habits that lead to a healthy weight without compromising on all-round nutrition. Watch This Vedio

Exercise Regime 120 minutes of aerobic exercise, such as running and swimming every week, increases glucose uptake by improving insulin sensitivity and reducing hepatic fat content. NAFLD is also improved with resistance exercises, which may be more tolerable for patients who suffer from poor cardiorespiratory fitness and cannot tolerate intense aerobic workouts. A study has also shown that modified high-intensity interval training (HIIT) of five cycles of high-intensity cycling followed by 3-min recovery periods, three times/week for 12 weeks, leads to a reduction in liver fat. However it is important that an individualized exercise be developed based on The severity of underlying liver dysfunction from NAFLD Class of obesity Exercise tolerance status Presence of individual components of metabolic syndrome and other comorbid medical problems Weight loss using medications While weight can be mostly managed by caloric restriction from dietary modifications and physical exercise, medications like Orlistat can aid in moderate weight loss by reducing the absorption of fat. Bariatric surgery Sometimes, exercise and diet modifications fail to lose weight in excessively obese people. It increases insulin sensitivity in the liver, muscles, and fat along with improving overall metabolic health.

Dietary supplements Certain vitamin supplements can give a helping hand in managing fatty liver disease. These include:

Vitamin E: It reduces triglycerides as well as oxidative stress, which contributes to decreasing the progression of fatty liver in patients. Natural sources include wheat germ oil, sunflower seeds, almonds, peanuts, spinach, pumpkin, and red bell pepper. Supplements can also be considered if your diet is not able to meet the demands.

Check out our extensive range of vitamin E supplements. Fill Your Cart Now

Vitamin C: Vitamin C gives protective effects against liver oxidative damage. It also prevents fatty accumulation in the liver.

Include vitamin C-rich items like lemons, oranges, strawberries, blackcurrants, broccoli etc. in your diet. You can also take vitamin C supplements to cover any gaps in your diet. Shop Now

Vitamin D: Deficiency of Vitamin D can result in insulin resistance, metabolic syndrome, and NAFLD. A study found that 70% of patients with NAFLD have vitamin D deficiency. Therefore, appropriate levels of vitamin D can help in management of fatty liver disease. Bask in the morning sunshine to boost your Vitamin D levels. You can also augment it by taking Vitamin D supplements. Click To Shop

Medications There are no specific medicines for fatty liver disease. However, the doctor may prescribe medicines for the management of underlying conditions like: High Triglycerides and cholesterol: Medications include: Atorvastatin Lovastatin Viral hepatitis: If fatty liver disease is long-term, the doctor may prescribe antiviral medicines like Lamivudine Entecavir Tenofovir disoproxil fumarate Diabetes or insulin resistance: Antidiabetic medicines include: Metformin Rosiglitazone Pioglitazone Liver transplantation In advanced cases of fatty liver disease, when the liver completely loses its ability to function, a liver transplant is the last treatment option. It is a procedure to replace a patient’s liver with a healthy liver from a deceased donor or with part of a liver from a living donor. Candidates for liver transplants undergo extensive testing to find whether they are healthy enough to have a good outcome following surgery. Complications Of Fatty Liver Disease

Fatty liver disease can turn into a life-threatening condition if it progresses into inflammation, fibrosis, and cirrhosis of the liver. And, if left untreated, it can eventually lead to the following: 1. Bleeding Inflammation, fibrosis, and cirrhosis can affect the liver’s ability to make enough clotting factors. Hence, the chance of severe bleeding increases.

1. Jaundice Fatty liver diseases may affect the liver’s ability to eliminate high levels of bilirubin, a waste product, from the blood leading to jaundice.
2. Infections Fatty liver disease also reduces the body’s immunity to fight infections. Fatty liver is associated with recurrent bacterial infections.
3. Chronic viral hepatitis Progression to fibrosis and cirrhosis is more rapid when there is any form of concomitant liver infection with fatty liver disease.
4. Osteoporosis Some patients tend to lose their bone strength and are at a higher risk of bone fractures. Research shows that patients with NAFLD were 1.35 times more likely to develop osteoporosis when compared to individuals without NAFLD.
5. Diabetes Diabetes may worsen if someone already has it and develops cirrhosis and complete liver damage.
6. Liver failure Patients who are suffering from long-term fatty liver disease have the highest risk of liver failure.
7. Liver cancer Scarring and cirrhosis increase the chances of liver cancer, most commonly a type called hepatocellular carcinoma (HCC).
8. Acute fatty liver of pregnancy (AFLP) It is a rare but serious complication that occurs during the 3rd trimester of pregnancy. Proper delivery and supportive care can help the patient with better recovery.

Note: Liver health will likely return to normal within a few weeks of giving birth. Alternative Therapies For Fatty Liver Disease

Complementary therapies that can help on managing the symptoms of NAFLD include: 1. Traditional Chinese Medicine (TCM) TCM has been widely used to treat NAFLD for centuries in Asia, and its holistic concept shows advantages in the treatment of this condition. This treatment is mainly focused on preventing damage to the liver, increasing insulin sensitivity, and improving the immune system.

1. Acupuncture therapy This is another traditional Chinese medicine-based approach, in which thin needles are inserted into the body that helps in healing. A study has demonstrated that acupuncture can effectively treat NAFLD by inhibiting inflammation and promoting fat metabolism in liver cells.
2. Yoga Yoga positions can strengthen and stimulate the liver and aid in releasing stored fat in the form of energy. Certain yoga positions help improve liver functions and fatty liver diseases.

Garland Pose (Malasana) Bhujangasana (Cobra Pose) Adho Mukha Svanasana (Downward facing dog pose) Naukasana (Boat Pose) Plough Pose (Halasana) Balasana (Child pose) Mandukasana (Frog Pose) Dhanurasana (Bow Pose) Anulom Vilom Pranayama (Alternate Nostril breathing) Kapalbhati Pranayama (Skull shining breath)

Yoga can not only benefit you with your liver condition but can have a very positive impact on your overall well-being. Know more about other benefits of yoga. Tap Here

Frequently Asked Questions How does fatty liver disease progress? What are some of the common symptoms that indicate a person is moving towards a liver disease? What should I avoid eating and drinking if I have fatty liver disease? Is NAFLD contagious? Is chicken good for fatty liver? Is coconut water good for the liver? References About Fatty Liver Disease, Updated on: 22th of September 2021. What is chronic liver disease? Overview. Stanford Health Care. Symptoms For Fatty Liver Disease, National Institute of Diabetes and Digestive and Kidney Diseases, Updated on: April 2021. Schwimmer JB, Celedon MA, Lavine JE, Salem R, Campbell N, Schork NJ, Shiehmorteza M, Yokoo T, Chavez A, Middleton MS, Sirlin CB. Heritability of nonalcoholic fatty liver disease. Gastroenterology. 2009 May;136(5):1585-92. Dharmalingam M, Yamasandhi PG. Nonalcoholic Fatty Liver Disease and Type 2 Diabetes Mellitus. Indian J Endocrinol Metab. 2018 May-Jun;22(3):421-428. Brown AJ. Viral hepatitis and fatty liver disease: how an unwelcome guest makes pâté of the host. Biochem J. 2008;416(2):e15-e17. Severson TJ, Besur S, Bonkovsky HL. Genetic factors that affect nonalcoholic fatty liver disease: A systematic clinical review. World J Gastroenterol. 2016 Aug 7;22(29):6742-56. Tobacco. Key Facts. World Health Organization. May 2022. Diagnosis, Causes, Prevention Of Fatty Liver, National Health Portal of India, Updated on: 4th of April, 2021. Chen,MD Hon-Jhe,Yang, et al. Increased risk of osteoporosis in patients with nonalcoholic fatty liver disease.A population-based retrospective cohort study.Medicine (2018) 97:42. Diagnosis Of NAFLD & NASH, National Institute of Diabetes and Digestive and Kidney Diseases, Updated on: April 2021. What Is Alcoholic Liver Cirrhosis? Stanford Health Care. Sven M. Francque,Marchesini Giulio,Kautz Achim,et al. Non-alcoholic fatty liver disease: A patient guideline. Published online 2021 Sep 17. Chen Hongwei,Wang Jue,Li Zheng,et al. Consumption of Sugar-Sweetened Beverages Has a Dose-Dependent Effect on the Risk of Non-Alcoholic Fatty Liver Disease: An Updated Systematic Review and Dose-Response Meta-Analysis. Published online 2019 Jun 21. Zhang Tiefeng,Han Duan,Zhang Tianqi,et al. Complementary and alternative therapies for non-alcoholic fatty liver disease. Published online 2021 Jan 29. Dai Xianmin,Feng Jiayi,CHen Yi, et al. Traditional Chinese Medicine in nonalcoholic fatty liver disease: molecular insights and therapeutic perspectives.Published online 2021 Aug 3. Chen Peiwen,Zhong Xin,Dai Yunkai,et al. The efficacy and safety of acupuncture in nonalcoholic fatty liver disease.Published online 2021 Sep 24. Panda Ashok, Palei Deepti, Mohanty Rakesh, et al.Effectiveness of Yogic Intervention in Non-Alcoholic Fatty Liver Disease: Case Series. International Journal of Current Research and Review. Published online January 2021.

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Female infertility Also known as Sterility and Barrenness Overview Female Infertility refers to the inability to conceive in spite of trying through unprotected intercorse for at least a year.

Infertility in women is linked to advancing age, especially over 35 years, underlying medical conditions, interference with ovulation, damage of anomalies in the female reproductive system,or any hormonal imbalance.

Also, unhealthy habits like overconsumption of alcohol and smoking along with stressful and sedentary lives have increased infertility rates in recent years.

The best way to conceive is to create a cohesive healthy environment that can help you get pregnant faster. Eating a healthy well balanced diet, exercising regularly, getting sufficient sound sleep, and managing your stress can help you in this journey.

If you think you need treatment, you may consider talking to a fertility specialist or gynecologist. They can recommend the best fertility treatment option for you. Key Facts Usually seen in Women above 35 years of age Gender affected Female reproductive system Mimicking Conditions Endometriosis Androgen-producing ovarian tumors Adrenal tumors Nonclassic congenital adrenal hyperplasia Cushing syndrome Prolactinemia disorders Thyroid disorders Polycystic ovarian syndrome (PCOS) Necessary health tests/imaging Laboratory tests: Follicle-stimulating hormone (FSH), Inhibin-B, Anti-mullerian hormone, and Hormone profile.

Imaging tests: Hysterosalpingography and Lower abdomen ultrasound. Treatment Medications: Clomiphene, Gonadotropins, Letrozole, Bromocriptine, and Metformin. Surgery: Laparoscopy and Tubal surgery Assisted reproduction: Intrauterine insemination, IVF (in-vitro fertilization), GIFT (gamete intrafallopian transfer), and ZIFT (zygote intrafallopian transfer). Specialists to consult Endocrinologist Gynecologist IVF specialist Symptoms Of Female Infertility The main symptom of infertility is not being able to get pregnant. Symptoms can also depend on many health conditions that can make it difficult to conceive a child. Some of the symptoms include:

Abnormal, irregular, or no periods Bleeding during menstruation is heavier or lighter than usual Painful periods with back pain, pelvic pain, and cramping Pain during intercourse Other symptoms indicating hormonal imbalance, such as: Acne and skin problems Changes in sex drive and desire Dark hair growth on face Thinning or loss of hair Weight gain

Confused about irregular periods? What is a Normal Period? Read this article to answer the questions Tap here

Causes Of Female Infertility

To understand the cause of infertility we should understand the steps in conception first and how any problem in each step can hamper your chances of getting pregnant. These include: 1. Sperm transport The sperms need to travel through the female vagina and cervix to the site of fertilization for the pregnancy to occur. Any changes in the female environment due to hormonal imbalance can destroy the sperm, inhibiting fertilization. 2. Egg transport This process starts during ovulation (release of an egg from one of the ovaries) where the egg is then picked up by the fallopian tubule where it travels to the uterus. Conditions such as pelvic infections and endometriosis can permanently impair the function of the fallopian tubes, leading to infertility. 3. Fertilization and embryo development This is the most important step that consists of a union between the sperm and egg for the pregnancy to occur. Any impairments in the fallopian tubule can result in fertilization taking place in the tubules itself leading to ectopic pregnancy (pregnancy outside the uterus). 4. Implantation It is a process in which the embryo attaches to the surface of the uterus and starts developing into a baby. Abnormalities in the uterus, hormonal or metabolic imbalances, infections, or immunological factors can lead to defective implantation, causing miscarriages.

The various factors that can cause infertility in females include: 1. Ovarian causes Polycystic ovary syndrome (PCOS): It is a hormonal disorder in which ovaries produce large amounts of male sex hormones or androgens which interfere with the development and release of eggs. Some of these eggs develop into cysts, which are little sacs filled with liquid, hence the name, polycystic ovary syndrome. PCOS has been linked to infertility in women.

Learn from our experts more about PCOS, its symptoms, and lifestyle changes to manage it better. Watch this video now Premature ovarian failure (POF): Refers to the loss of function of the ovaries before the age of 40. It is characterized by a decrease in the hormone estrogen, loss of female egg cells, and infertility. Hyperprolactinemia: High levels of the hormone Prolactin, interferes with the normal production of other female hormones, like estrogen and progesterone. This can change or halt ovulation. It can also lead to irregular or missed periods. 2. Tubal and peritoneal causes Inflammatory diseases: Infection of one or more of the upper reproductive organs, including the uterus, fallopian tubes, and ovaries can cause inflammation and predispose to infertility issues. Endometriosis: It is a condition characterized by the growth of tissue resembling the lining of the uterus outside the uterus. This extra tissue and its surgical removal can cause scarring, blocking the fallopian tubes and making it difficult for the egg and sperm to meet. 3. Structural abnormalities Uterine anomalies: The uterine malformations characterized by adhesions and/or fibrosis within the uterine cavity can lead to infertility. Fallopian tube anomalies: Any obstruction in the tubules doesn’t let the ovum and the sperm converge, making fertilization unfeasible. Cervical anomalies: Cervical stenosis (narrowing or closing of the passageway through the cervix- the lower part of the uterus) might affect natural fertility by impeding the passage of semen into the uterus. Risk Factors For Female Infertility

1. Age Fertility declines with advancing age. The 20s and early 30s are usually the best time to conceive. It becomes difficult to conceive after the age of 35.
2. Being underweight or overweight BMI (body mass index) plays an important role in fertility. Being significantly overweight or underweight can cause hormonal changes that can affect fertility rates.

Trying to get rid of that stubborn fat? These tips might help you 3. Stress Stress alone cannot cause infertility, but it can interfere with your ability to get pregnant. Research has shown that anxiety also can prolong the time needed to achieve pregnancy.

Stressed? Try these relaxation techniques to help you battle chronic stress. Read this 4. Genetic factors Gene mutations can cause female infertility and pregnancy disorders. 5. Environmental factors These include exposure to pesticides, radiation, air pollution, heavy metals, and other chemicals that can disrupt the hormones leading to infertility. 6. Hormonal disorders Thyroid conditions: Thyroid diseases are associated with an increased risk of prematurity or stillbirth and can affect fertility. Diabetes: Studies show that diabetic women are at increased risk of infertility, delayed puberty, absence of periods, menstrual irregularities and possibly earlier menopause. Don’t let diabetes slow you down. Up your diabetes care game with our products to meet all your diabetes care needs. Check them out now Others: Excess growth hormone and testosterone also increase the risk of female infertility. 7. Lifestyle Diet: Food items with a high glycemic index (shows how your blood sugar (glucose) level changes after eating a specific food item) can cause infertility among women. Moreover, packaged, processed, and fried foods predispose to obesity and diabetes, both known risk factors for female infertility. Smoking: In women, smoking can increase the risk of miscarriage and ectopic pregnancy (when fertilized egg implants and grows outside the uterus.) Do you really know how much harm smoking can do? Read more about 5 ways how your body reacts to the smoke. Click here Excessive alcohol: Excessive alcohol intake can lower the fertility rate in women. According to the American Cancer Society, it is best not to drink alcohol. Women who choose to drink alcohol should limit their intake to no more than 1 drink a day.

Did you know? Can drink caffeine cause infertility? Studies have found that women who drink large amounts of caffeine may take longer to become pregnant. High concentration of caffeine is also found in energy drinks. Know if energy drinks are really good for you. Click here

1. Sexually transmitted disease (STD) STDs are often associated with the risk of decreased fertility. Some of the identified STDs are syphilis, Chlamydia, gonorrhea, herpes simplex virus, human papillomavirus, HIV, etc.

Protect yourself from STDs with our wide range of contraceptives. Click to shop 10. Chemotherapy Studies have shown that ovarian function decreases with chemotherapy increasing the risk of infertility in women. Diagnosis Of Female Infertility

Infertility can be caused by multiple factors. Arriving at a correct diagnosis can help plan the treatment accurately focusing on treating the problem. The diagnosis mainly consists of the following: 1. History A detailed history must consist of the duration of infertility, menstrual history, gynecological history to include a history of sexually transmitted infections, and sexual history to include frequency and timing of intercourse. Social and lifestyle history along with the family history is also taken into account. 2. Physical examination The physical exam includes vital signs and BMI, thyroid evaluation, the appearance of an abnormal vagina, pelvic masses or tenderness, and uterine enlargement or irregularity. 3. Laboratory tests Hormone testing: A hormonal imbalance may be one of the indicators of infertility. Various hormone levels are analyzed for the diagnosis and treatment of infertility. These include: Progesterone Luteinizing hormone (LH) Follicle-stimulating hormone (FSH) Inhibin-B Anti-mullerian hormone Prolactin Thyroid Stimulating Hormone (TSH) Dehydroepiandrosterone Sulphate (DHEAS) Estradiol (E2) Testosterone Insulin-like growth factor-1 (IGF-1)

Post-coital test: This test analyzes cervical mucus within a few hours of sexual intercourse to inspect the interaction between sperm and cervical mucus. Antisperm antibody tests: This test detects if a woman’s immune system may produce proteins that attack sperm (anti-sperm antibodies). Clomiphene citrate challenge test (CCCT): It is a sensitive test that picks up a decreased ovarian reserve. It checks both FSH and estradiol levels between days 2 and 4 of the menstrual cycle. 4. Imaging tests Hysteroscopy: This test is a gold standard for assessing the uterine cavity. It allows direct visualization of the intrauterine pathology and provides an opportunity for immediate surgical correction. Hysterosalpingography: It is one of the common tests which is used to examine the fallopian tubes and help in the detection of any blockage or damage of the fallopian tubes and uterine cavity. Laparoscopy: Just like the hysterosalpingogram, this test also helps to detect any abnormalities in the fallopian tubes. In this test, a small instrument known as a laparoscope is inserted into the body through a cut in the abdomen. The instrument helps to view and examine the female reproductive organs. In some cases, it can be used to remove the blockages, if any, found in the body. Lower abdomen ultrasound: It is a procedure that uses high-frequency sound waves to scan the internal organs located in the lower abdomen of the body including the pelvic cavity and reproductive system. Transvaginal ultrasound: It is an ultrasound test that helps the doctor look inside the uterus for abnormalities such as scarring, fibroids, or polyps. In this, a wand that is inserted into the vagina produces sound waves which give a clear picture of the reproductive organs including the ovaries and uterus. Sonohysterograms: This is a special kind of ultrasound that uses sterile saline and air to observe the inner lining of the uterus. The pelvic organs are visualized through a transvaginal ultrasound. Magnetic resonance imaging (MRI): MRIs can be helpful in detecting lesions or rare abnormalities inside the pelvis and uterus.

Book your tests now from the comfort of your home. Tap here

1. Endometrial biopsy A sample of the cells lining the uterus (endometrium) after ovulation is evaluated for signs of inflammation and changes in the endometrium (due to ovulation). It is generally performed about 7 to 12 days after ovulation. Celebs affected Farah Khan The famous Indian choreographer and director, Farah Khan, opted for IVF in 2008. She has talked about the subject on several occasions. She gave birth to healthy triplets when she was 43. Prevention Of Female Infertility

Harmful lifestyle choices have been found to have a lasting impact on health and are a major contributing factor to female infertility. Here are a few things you can do to prevent and manage infertility. These include: 1. Maintain a healthy weight Maintaining a healthy weight lowers the chances of ovulation disorders. To do this, you can exercise regularly and eat a healthy well balanced wholesome diet.

Keep track of your weight with our widest range of weighing scales to choose from. Shop now 2. Say No to smoking Tobacco not only harms your overall health, it adversely affects fertility as well. If you are planning to get pregnant, you should consider quitting smoking. Get rid of this deadly habit with our smoking cessation products. Buy now 3. Avoid or limit the consumption of alcohol Heavy drinking can increase the risk of ovulation disorders. While it is best not to drink alcohol, women who choose to drink alcohol should limit their intake to no more than 1 drink a day. 4. Manage stress  
Everyone suffers from stress from time to time. But if there is continued stress, it can mess up your ovulation. Moreover, in a vicious cycle, infertility can inevitably cause stress and stress can hamper the results of infertility treatment. You can manage your stress effectively by working out, reading, and meditating amongst other stress-coping techniques. 5. Practice safe sex Sexually transmitted infections can lead to infertility in both sexes. Such infections can spread through the reproductive system, causing damage, scarring, and inflammation in reproductive organs, leading to infertility.

Use the right protection to safeguard yourself and your partner from sexually transmitted infections. Check out our range of contraceptives. Tap here 6. Treat existing conditions Identifying and controlling chronic diseases increases your chances of conception. Regular physical examinations (including Pap smears) help to detect early signs of infections or abnormalities. Specialist To Visit If you have tried conceiving for a year or six months or if you are 35 or above, you may consider going to the following doctors: Gynaecologist Endocrinologist IVF specialist

A gynecologist is a doctor who treats issues related to the female reproductive tract. An endocrinologist is a doctor who has special training in diagnosing and treating disorders of the glands and organs that make hormones. An IVF specialist is a doctor who specializes in treating infertility. Consult India’s best doctors online to give you all the care and guidance you need in this journey. Connect here

Treatment Of Female Infertility

Treatment of fertility problems needs an accurate diagnosis of the condition and a comprehensive and holistic approach. It consists of the following: Medications Fertility treatments are most commonly focused on infertility due to problems with ovulation. The most common medications used to treat infertility help stimulate ovulation. Some of them are: Clomiphene Gonadotropins Letrozole Bromocriptine Metformin

Ordering medicines has never been easier! Upload your prescription now Hormonal therapy Hormone treatment is particularly suitable for women with impaired egg maturation or impaired no ovulation at all. It includes: Gonadotropins Human menopausal gonadotropin (HMG) Follicle-stimulating hormone (FSH) Luteinising hormone (LH) Pergonal Clomiphene citrate-human menopausal gonadotropin (CC-HMG) combination Surgery If infertility is due to anomalies in the reproductive organs like the uterus or fallopian tubes, the following surgeries might be advised: Laparoscopic surgery: It helps with problems with the uterus (womb) by removing endometrial polyps and fibroids (growths made of the uterine muscle). Tubal surgery: If the fallopian tubes are found to be blocked, scarred, or damaged, they can be repaired surgically. Assisted reproduction Intrauterine insemination: In this, many sperms that are washed and concentrated are placed in your uterus around the time of ovulation. It can help if you or your partner have a low sperm count, mild endometriosis, unexplained infertility, or issues with ejaculation or erection. IVF (in-vitro fertilization): During this process, mature eggs are taken and fertilized by sperm in a lab. The fertilized egg/eggs are then transferred to the uterus. This procedure is suggested if you have endometriosis, blockage in fallopian tubes, genetic disorder, or unexplained infertility. GIFT (gamete intrafallopian transfer) and ZIFT (zygote intrafallopian transfer): In these procedures, the sperm and egg are collected and placed in the fallopian tube. In GIFT, both the sperm and egg are placed without fertilization. But in ZIFT, the sperm and egg are fertilized, and the embryo is placed in the fallopian tube. Home-care For Infertility in Females

An amazing way to manage infertility is to have a healthy lifestyle. Here are a few home remedies that can help you: 1. Tweak your diet We all know the importance of food and diet in fertility. Adding these foods can prove to be very beneficial while trying to conceive: Pomegranate (Anaar): It is very useful in treating female infertility. Have at least one fresh pomegranate every day to keep your ovaries healthy. Know more about other benefits of pomegranate. Click here

Indian ginseng (Ashwagandha): Using this herb powder in milk balances hormones and reproductive organs. Cinnamon (Dalchini): Studies suggest that cinnamon has been found to have a positive effect on hormones and improve menstrual cyclicity in women with PCOS. Dates (Khajoor): Adding dates to your diet helps in reducing the risks of infertility.

1. Cut down on caffeine Caffeine in small quantities does not affect female infertility. But you may consider cutting down on it if you are trying to conceive. If you have already conceived, then it is best to stay away from it altogether.
2. Make no excuse to skip exercise Exercise can positively influence fertility in women. Women who do regular, moderate exercise may get pregnant quicker than women who don’t exercise at all.

Too lazy to go to the gym and sweat? Try our range of exercise equipment to help you get that daily dose of activity at home. Explore now 4. Take time to relax Infertility comes with numerous tests and visits to the doctor. So it is not surprising that it can be stressful. It can mess up hormones in women as well. So take time to relax and unwind from time to time. 5. Add supplements Micronutrients have essential roles in fertility, and inadequate levels can have an adverse impact on the ability to conceive. Taking folic acid, vitamin D, and omega-3 fatty acids can help improve fertility. Explore our widest range of vitamin and mineral supplements to meet all your needs. Fill your carts now

Complications Of Female Infertility

Infertility and infertility treatments can lead to a few complications. Here are some of them: 1. Multiple pregnancies: One of the most common complications of infertility treatment is the chance of multiple pregnancies. Having twins, triplets, or more can put you at risk of premature labor and delivery. 2. Ovarian hyperstimulation syndrome (OHSS): It is an exaggerated response to hormones. Some fertility medicines can cause your OHSS in which the ovaries become swollen and painful. 3. Infections: Although rare, there are chances of getting an infection with reproductive surgery. 4. Psychological stress: Infertility procedures can increase degree of stress leading to depression and anxiety during the entire therapy procedure, due to lack of emotional and educational support. Infertility can sometimes lead to difficulties in marriages as well. Alternative Therapies For Female Infertility

Alternative options can act as an adjunct to the conventional treatment for infertility and help in your journey to conception. Some of these therapies include: Relaxation techniques Multiple relaxation techniques like meditation, deep breathing, guided imagery, and yoga, have been shown to reduce anxiety scores in women undergoing infertility treatment. Yoga, specifically, increases the quality of life and decreases negative feelings and thoughts that are associated with infertility.

Understand other benefits of yoga that even doctors swear by! Read this piece now

Acupuncture It works by putting tiny, delicate needles into particular body locations. Acupuncture may assist boost blood flow to the reproductive organs, stimulate hormones, control ovulation, and reduce stress, all of which may help in conceiving. However, it is better to consult your doctor before starting acupuncture therapy. Living With Female Infertility

Infertility treatment can take a physical and emotional toll on you. Living with it can be difficult as it can cause feelings of hopelessness and frustration in you and your partner. Here are a few aspects of infertility and infertility treatment that can help you out. Psychological impact Infertility can cause anger, depression, and anxiety. Women with infertility have a number of psychological commonalities like fear of complications during pregnancy, delivery, or maternity. Moreover, the negative thoughts of fear of losing your life or the child during delivery, or fear of failing as a mother are some of the underlying causes of stress that can hamper your chances of being pregnant.

Addressing these psychological problems is the basis of good overall health and increases the chances of conception. The following points can help you out: Learn stress-coping techniques Have realistic expectations from every phase of treatment Talk to your partner about every aspect of your physical and mental health Opt for infertility counseling by a qualified medical health practitioner Take professional help for psychological issues Psycho-Social impact This includes low self-esteem, poor quality of life, and social isolation which is associated with infertility treatment. Also, comparisons between women undergoing repeated IVF cycles and first-time participants may lead to an increase in depressive symptoms. As you navigate through things, you have to make sure: That you do not rely on only one option Know the other alternatives Learn ways to manage stress and anxiety Communicate your fears and apprehensions with your partner Keep your doctors updated about your mental and physical conditions Psycho Economical impact Treatment of infertility can have an economic impact on the couple’s lives. Hence, it is important to keep in mind the financial aspect as well. The tips that can help you are :

Talk to your partner about all the expenses and chart out a proper financial plan Select a treatment that fits your budget and expectations Know if there is any insurance coverage

Are you tired of hearing all that you need to do to get pregnant? Here are all the myths debunked for you. Enlighten yourself now

Frequently Asked Questions Does infertility affect only women? Can my overall health affect fertility? Can leading a stressful lifestyle cause infertility? Should my partner get evaluated for infertility? References Walker MH, Tobler KJ. Female Infertility. [Updated 2022 May 26]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan-. Kaiser UB. Hyperprolactinemia and infertility: new insights. J Clin Invest. 2012 Oct;122(10):3467-8. Moghadam et al. Epidemiology of Female Infertility; A Review of Literature. Biosci., Biotech. Res. Asia, Vol. 10(2), 559-567 (2013) Olooto , Wasiu Eniola et al J. A review of Female Infertility; important etiological factors and management. Microbiol. Biotech. Res., 2012, 2 (3):379-385. Rossi BV, Abusief M, Missmer SA. Modifiable Risk Factors and Infertility: What are the Connections? Am J Lifestyle Med. 2014;10(4):220-231. Rooney KL, Domar AD. The relationship between stress and infertility. Dialogues Clin Neurosci. 2018 Mar;20(1):41-47. James JE. Maternal caffeine consumption and pregnancy outcomes: a narrative review with implications for advice to mothers and mothers-to-be. BMJ Evid Based Med. 2021;26(3):114-115. Olooto, Wasiu Eniola et al J. Microbiol. Biotech. Res., 2012, 2 (3):379-385. Deadmond A, Koch CA, Parry JP. Ovarian Reserve Testing. [Updated 2022 Dec 21]. In: Feingold KR, Anawalt B, Blackman MR, et al., editors. Endotext [Internet]. South Dartmouth (MA): MDText.com, Inc.; 2000-. Fertility treatment for females. National Institute of Child Health And Human Development. Jan 2017. What is Assisted Reproductive Technology? Assisted reproductive Technology (ART). Centre for Disease Control And Prevention. Oct 2019. Dou L, Zheng Y, Li L, Gui X, Chen Y, Yu M, Guo Y. The effect of cinnamon on polycystic ovary syndrome in a mouse model. Reprod Biol Endocrinol. 2018 Oct 19;16(1):99. Schaefer E, Nock D. The Impact of Preconceptional Multiple-Micronutrient Supplementation on Female Fertility. Clin Med Insights Women’s Health. 2019 Apr 23;12:1179562X19843868. Ried K, Stuart K. Efficacy of Traditional Chinese Herbal Medicine in the management of female infertility: a systematic review. Complement Ther Med. 2011;19(6):319-331. Katole A, Saoji AV. Prevalence of Primary Infertility and its Associated Risk Factors in Urban Population of Central India: A Community-Based Cross-Sectional Study. Indian J Community Med. 2019 Oct-Dec;44(4):337-341. Sharma A, Shrivastava D (October 15, 2022) Psychological Problems Related to Infertility. Cureus 14(10): e30320. SIMIONESCU et al: INFERTILITY AND PSYCHOLOGICAL DISTRESS. EXPERIMENTAL AND THERAPEUTIC MEDICINE 21: 306, 2021. Kumar P et al. Psychological aspects of infertility. BJMP 2010;3(3):a336 Infertility. National Health Portal. Aug 2016.

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Fistula Also known as Fistulae Overview A fistula is an abnormal passage that connects two organs or cavities in the body. It may occur anywhere in the body but they’re most common in the anus and rectum because these areas are prone to infection. General symptoms include pain, diarrhea, constipation, fever, weight loss, nausea, vomiting, and fatigue.

A fistula forms when bacteria get into the tissues around the area where two organs join together. It is commonly caused by injury, infection, cancer, or congenital defects. A fistula may be congenital (present at birth) or acquired (develop later in life).

Fistula can be categorized depending on the type, nature and location. Fistulae are usually hard to deal with but can be prevented and treated. Treatment for fistulas depends on how severe the problem is. If the fistula fails to respond to the medications and antibiotics, surgical treatment might be needed to remove the fistula. Key Facts Usually seen in Adults above 40 years of age Gender affected Both men and women Body part(s) involved Anus Cervix Lung Heart Rectum Vagina Uterus Stomach Brain Colon Urinary bladder Mimicking Conditions Bowel continence Urine leakage Necessary health tests/imaging Anoscopy Complete blood count Endoscopy CT Scan X-ray Magnetic resonance imaging (MRI) Treatment Surgery: Fistulotomy, Transabdominal surgery & Laparoscopic surgery Antibiotics: Metronidazole and Ciprofloxacin Anti-inflammatory medicines Immunomodulatory drugs: Azathioprine Pain relief medications Non-invasive treatment: Fibrin glue & Collagen plugs Specialists to consult Gynecologist Urogynecologist Urologist Colorectal surgeon Gastroenterologist See All Types Of Fistula

Fistulas can occur in different parts of the body, thereby can be defined and termed differently as well. A fistula can form between: Artery and a vein Cervix and the vagina Neck and throat Bile ducts and surface of the skin Skull and nasal sinus Bowel and vagina Stomach and the surface of the skin Navel and the gut Artery and the vein in lungs Uterus and peritoneal cavity (space between the abdomen and internal organs) Colon and surface of the body, causing feces to exit through an opening other than the anus Based on the nature Based on the nature, the different types of fistula:

Blind: As the name suggests, the fistula that opens in only one end and is closed at the other end is called the blind fistula.

Complete: A complete fistula has openings both outside and inside the body.

Horseshoe: A horseshoe fistula connects the anus to the surface of the skin after going around the rectum.

Incomplete: An incomplete fistula is a tube from the skin that is closed on the inside and does not connect to any internal structure.

Based on anatomical location Based on the location, the different types of fistulae are listed below:

Anal fistulas: Anal fistulas are the most common type of fistulas. The anal fistula is developed between the anus and another organ system such as the rectum, vagina and colon. These three therefore can be defined as three subcategories of aval fistulas: Anorectal fistula Colovaginal fistula Anovaginal fistula Intestinal fistulas: Intestinal fistula is developed between the small intestine and the skin or colon and the skin.

Bladder or urinary tract fistula: A bladder fistula is when an opening forms between the bladder and some other organ or the skin. Commonly the bladder opens to the bowel (enterovesical fistula) or the vagina (vesicovaginal fistula).

Gastrointestinal fistula: It is an abnormal opening in the stomach of intestines that allows the leakage of contents. They can be classified as enteroenteric (where the leaks go through a part of the intestines) or enterocutaneous (where the leaks go through to the skin) fistula.

Obstetric fistula: It is an abnormal opening formed between the birth canal (genital tract) and the urinary tract or rectum due to obstructed labor during childbirth.

Vaginal fistulas: It is an abnormal opening that connects the vagina to another organ such as the bladder, colon or the rectum. The different types of vaginal fistulas include:

Vesicovaginal fistula: Also called bladder fistula, it is a common type of vaginal fistula. The opening develops between the vagina and urinary bladder.

Urethrovaginal fistula: It is also called urethral fistula. This type of fistula develops between the vagina and the tube that carries urine out of the body (urethra).

Ureterovaginal fistula: This type of fistula develops between the vagina and the ducts that carry urine from the kidneys to the ureters (bladder).

Rectovaginal fistula: This type of fistula develops between the vagina and the lower portion of the large intestine (rectum).

Colovaginal fistula: This type of fistula develops between the vagina and the colon.

Enterovaginal fistula: This type of fistula develops between the vagina and the small intestine. Symptoms Of Fistula

Symptoms vary depending upon where the fistula is located. They range from mild to serious ones. Most commonly, there will be no specific symptom until the condition becomes more advanced. However, some individuals experience one or two symptoms only. But others might develop multiple symptoms simultaneously.

Some of the commonly observed symptoms of fistula are: Body pain Pain around the anus Vague feeling of being unwell or uncomfortable Constant urine leakage from the vagina Irritation in the external female genital organs Nausea Abdominal pain Vomiting Fever Weight loss Diarrhea Constipation Frequent urinary tract infection Causes of Fistula

Depending on the type and location of the fistula, there could be different reasons for occurrence. In some cases, they could be formed naturally and in others could be an after-effect of an injury or surgery.

Gastrointestinal diseases: People suffering from gastrointestinal diseases such as Crohn’s disease, colitis and irritable bowel diseases are at a higher risk of developing fistulas near the anus. Around 1 in 3 people with Crohn’s will likely develop a fistula at some time.

Diverticular diseases: Diverticular disease is a digestive disease. Diverticulosis is a condition that occurs when small sacs form and push outward through weak spots in the wall of the colon.

Radiation therapy: Patients undergoing radiation therapy as a cancer treatment or otherwise, are at a high risk of developing fistulas.

Certain infections: Some infections and diseases such as HIV and tuberculosis can also cause fistulas.

Women’s health and childbirth: Prolonged or obstructed childbirth, injury during pelvic surgery, radiation treatment in the pelvic or genital area are common causes for vaginal fistulas.

Surgical and medical treatment: Certain surgical treatments can lead to fistulas.eg. Complications from gallbladder surgery can lead to biliary fistulas. Radiation therapy to the pelvis can lead to vesicovaginal fistulas.

Therapeutic use: In people with kidney failure, requiring dialysis, a cimino fistula is often deliberately created in the arm in order to permit easier withdrawal of blood for hemodialysis. During treatment of portal hypertension, surgical creation of a portacaval fistula produces an anastomosis between the hepatic portal vein and the inferior vena cava. This spares the portal venous system from high pressure which can cause many complications.

The cause for developing different types of fistulas vary according to the type and are discussed separately below:

Anal fistula: Anal fistula are more common in men aged between 30-50 years of age. Anal fistulas can be caused by damaged tissues and is often linked to cysts or an infection of the anal glands.

Clogged anal glands Anal abscesses Crohn’s disease Tuberculosis Diverticulosis Cancer Radiation therapy Trauma Sexually transmitted diseases Vaginal fistula: In women, fistulas involve the genitals and urinary tracts. Common causes of these fistulas are: Prolonged or obstructed childbirth Injury during pelvic surgery Radiation treatment in the pelvic or genital area Infection and inflammation Did you know? Obstetric fistula is one of the most serious childbirth injuries.According to the World Health Organization (WHO), between 50,000 to 100,000 women are affected by obstetric fistula every year. Here are top 5 pregnancy tips every woman must know. Click To Know! Risk Factors For Fistula

Though the exact cause of fistula is still unknown. However, there are conditions that put some individuals at a higher risk of developing fistulas. Some of these risk factors include:

Previous history of anal abscess or fistula Anal fistulas can be caused by damaged tissues and is often linked to cysts or an infection of the anal glands.

Crohn’s disease As per studies, 70% of Crohn’s disease patients suffer from fistula and resulting intestinal obstruction during their disease course.

Certain infections Some infections and diseases such as HIV and tuberculosis can also cause fistulas.

Previous surgery or radiation therapy Patients who have had surgeries in the past or are undergoing radiation therapy as a cancer treatment or otherwise, are at a high risk of developing fistulas.

Can aging cause constipation? This & 5 more myths about constipation! Know More!

Diagnosis Of Fistula

Fistula has characteristic symptoms. When you experience the symptoms, book an appointment with your physician at the earliest. Your doctor may ask you questions and enquire about your medical history. Based on the answers, he may suggest some medical tests and physical examination to confirm the presence of the disease.

During the physical examination, he may use a speculum (a metal or plastic device used during a pelvic exam) to look at the vaginal walls.

Medical tests that the doctor may ask you to get done: Urine test The doctor may suggest getting a laboratory test done to confirm the presence of a urinary tract infection by taking a urine sample.

Anoscopy It is an examination of the anal canal with a scope to detect the presence of the fistula. Use a dye in the vagina or bladder or rectum to find all signs of leakage

Complete blood count (CBC) A complete blood count (CBC) is a blood test used to detect a wide range of disorders and infections. The test measures several components of the blood, including : red blood cells, white blood cells, platelets and others.

X-rays scan  
Fistula can cause tissue damage at the site of infection. An X ray produces images of the organs and confirms the presence of any tissue damage due to fistula.

Magnetic resonance imaging (MRI) It is an imaging test that uses a magnetic field to take pictures of organs and structures inside the human body.

CT scan A CT scan (also known as computed tomography) is a machine that takes a series of x-rays to make a picture with minute details. The scan helps to image bones, blood vessels and soft tissues from different angles.

Endoscopy It is a common imaging test that uses a thin, flexible, light viewing instrument called an endoscope that allows the doctor to examine the inside of the organs, canals and cavities in the body.

Fistulogram It is a special type of X-ray that provides a detailed imaging of the fistula. It is a procedure during which a dye is injected into the fistula to make imaging better. In a case where the fistula connects to the outside of the body, a catheter may be used to insert the dye. Whereas, if the fistula is present in the rectum, the dye will be injected via the anus before taking the X-rays images.

Intravenous pyelogram It is a type of X-ray commonly used for diagnosing bladder fistulas. Prior to the procedure, you may be asked to follow a liquid diet or fast in order to make sure the colon does not contain any remains of stool at the time of imaging. Presence of stool can block the view of the bladder and therefore obstruct the diagnosis. In this case as well, a dye is injected into the body (usually via the arm) to get better images. Did you know? Anorectal fistulas are more common in men than in women. Most anorectal disorders can be caused by diet, lifestyle, body structure, or bacteria present in the waste produced by the body. Here’s more about the common anorectal problems. Read More! Prevention Of Fistula

Fistulae are preventable and treatable. The risk of certain types of fistula (such as anal fistula) can be lowered by: Practicing good hygiene Carefully cleaning and treating the anal/ rectal wounds Managing the risk for other health conditions that increases the chances of fistula As per WHO, fistulas such as obstetric fistula can be prevented by: Delaying the age of first pregnancy Cessation of harmful traditional practices Access to obstetric care In many cases, the cause of fistula is unknown and therefore it becomes difficult to suggest a prevention strategy. Patients with Crohn’s are at an increased risk of developing fistula at some point in life. Specialist To Visit

If you observe any of the relevant symptoms, do not delay consulting a physician. The physician will ask for your medical history and do an examination to determine if a fistula exists. In most cases, the physician will examine the area around which the fistula is expected. The physician may recommend you to get some tests such as MRI or ultrasound done to get better clarity.

Depending on the location and severity of the fistula, the physician may recommend you to see a specialist such as: Gynecologist General surgeon Urogynecologist Urologist Colorectal surgeon Gastroenterologist Consult India’s best doctors online from the comfort of your home. Consult Now!

Treatment Of Fistula

If proper medical care is provided to the patient, fistulas can be treated and prevented. Different treatment options for fistula includes:

Surgical treatment If the fistula fails to respond to the medications and antibiotics, surgical treatment might be needed to remove the fistula.

Fistulotomy It is the most effective and common type of surgery that involves cutting along the whole length of the fistula to open it up so it heals as a flat scar. It is a surgical treatment for many fistulas (such as anal fistula) that do not pass through much of the sphincter muscles, as it may cause a risk of incontinence.

Transabdominal surgery It is the simple procedure wherein the rectovaginal septum is dissected, the fistula is divided and the rectum and vagina are closed primarily without bowel resection.

Laparoscopic surgery It is a minimally invasive surgery that involves a tiny incision and the use of cameras and small tools to repair the fistula.

Endorectal flap procedure It is a procedure where healthy tissue is pulled over the internal side of the fistula to keep feces or other material from reinfecting the channel.

Medications Depending on the condition and severity of the disease, the doctor prescribes medications that include: Antibiotics will help fight against bacterial infection that if left untreated could worsen the patient’s condition. Commonly prescribed drugs include metronidazole and ciprofloxacin that may help reduce the discharge and promote comfort. Anti-inflammatory medicines are usually recommended for people with Crohn’s diseases or diverticular disease. It helps control the existing fistula from worsening and prevents new ones from developing. Immunomodulatory drugs have shown to help close the fistula in some. Commonly prescribed drugs include azathioprine, it acts slowly therefore may take up to 3 months to show results. Pain relief medications help to reduce the pain and discomfort caused due to the fistula. Non-invasive treatment For small and relatively simple fistulas, doctors often use a minimally invasive technique to manage it. Commonly used non-invasive treatment options include: Fibrin glue is a specialized, simple and painless therapeutic for fistulas that are small and do not require an invasive treatment. It is a medicinal adhesive that activates thrombin to form a fibrin clot that forms a clot and seals the fistula tract. Collagen plugs are another method to seal the fistulas. Fistula is plugged up using collagen and is seen as a first line treatment for patients with simple fistulas. Seton technique is performed by inserting surgical thread inside the fistula tract that allows it to drain and heal completely. Follow-up treatment for fistulas Most people respond well to surgeries, however it is recommended to follow up with your doctor to avoid any complications. Book follow up appointments with your specialist or doctor in order to make sure the body is effectively responding to the medication and surgery and you are recovering well.  
Home-care For Fistula

If you have had a surgery to remove the fistula, give yourself a few days to heal. You may be advised to take some medications post surgery, so make sure you are regular with them. Most people can go back to work and their normal routine a week or two after the surgery depending on the size and severity of the fistula.

To expedite the recovery process, here is what you must take note of w.r.t your diet: Eat your normal diet, unless stated by your doctor. Include bland, low fat foods like rice, toast and yogurt in your diet. Drink plenty of fluids (unless stated by your doctor not to) Include high fiber foods, such as fruits, vegetables, beans, and whole grains in your diet. You may notice that your bowel movement is not regular right after the surgery. It is common and you need not worry. Here is what you must take note of w.r.t your activity and movement : Get enough sleep and rest when you feel tired. Do not overexert your body. Try to walk each day. Gradually, increase your mobility. Walking will boost your blood flow and help prevent constipation. Do not hesitate to take shower or bath. Pat your anal area dry with a towel when you are done. Your doctor may recommend or prescribe a barrier cream to protect ypur skin surrounding the wound/ fistula from any infection. If you notice swelling, try lying on your stomach with a pillow under your hips. When you sit on the toilet seat, support your feet with a small step stool. This helps flex your hips and places your pelvis in a squatting position. This can make bowel movements easier after surgery. Wear loose fitting clothing and cotton undergarments. Apply ice several times a day for 10 to 20 minutes at a time. Put a thin cloth between your skin and the ice. Try a sitz bath. Sit in 8 to 10 centimeters of warm water for 15 to 20 minutes. Then pat the area dry. Try it as long as you have pain in your anal area. Wear a pad over your anal area until healing is complete. Here are some of the common foods to relieve constipation at home. Read More!

Complications Of Fistula

Fistulas can be difficult to deal with as they cause a lot of discomfort and pain. If the fistula is left untreated, it can cause serious complications.

Bacterial infection or sepsis As is with any surgery, one of the common complications is infection. It can have severe consequences and affect different body parts. If you notice an abscess, there is a chance for you to develop sepsis which can be threatening. Make sure to contact your doctor immediately if you notice any pus formation or infection.

Bowel incontinence Damage to the anal sphincter muscles causes bowel incontinence. It can cause fecal leakage from the rectum.

Fistula recurrence Even after surgery, there are chances of recurrence of anal fistula. However, this recurrence primarily depends on the complexity and type of surgery performed.

Bowel obstruction Damage to the anal sphincter muscles can cause bowel blockage or obstruction. Living With Fistula

Fistula can mentally and physically challenging. Though the condition can be treated using medications and home remedies, here are some tips that could help patients with fistula in their day to day life. Regular warm baths help to relieve fistula pain and discomfort. Keep your bathtub clean to avoid any risk of infection. Use portable bidets (also called sitz baths) to keep the area clean and hygiene. Avoid the use of soap, perfumed products or salts in the water as they can cause irritation and make it worse. Instead use speciality soaps formulated for sensitive skin.  
Avoid the use of talc. It may cause irritation to the skin as well. Your doctor may recommend the use of a barrier cream that can help protect the affected area. Avoid using any other lotion or cream. If you have an anal or vaginal fistula, avoid the use of tampoons without confirming with your doctor. If you experience discharge while you are on medication, use pads and panty liners. Avoid foods that can cause constipation as it can make it worse. Stay hydrated and include fibrous foods in your diet. Here our expert explains in detail about how to manage and prevent hemorrhoids. Read To Know!

Alternative Therapies For Fistula

Medical assistance is often recommended for treating fistulas, as they can be painful and hard to deal with. However, there are some alternative therapies that can help alleviate the symptoms and fasten the process of healing.

Some easy and common home therapies that can be used for fistula include:

Enteral diets People with fistulas in the small and large intestines are often prescribed with a special diet called the enteral diet. In this type of diet, the person is recommended to consume only liquid food for a period of time. Consumption of a liquid diet will help reduce the amount of stool that passes through the intestines and rectum and also provide the body with the required nutrition therefore reducing chances of malnutrition and weakness. An enteral diet may help the fistula close on its own and has been found to heal fistulas completely.

Tea tree oil It is known for its antibacterial, antiviral, antiseptic and anti inflammatory properties and therefore makes it a good home remedy for fistula. Tea tree oil can be used as a natural ointment for killing germs and promoting growth of white blood cells.

Tea tree oil can be mixed with olive oil and dabbed on the affected area. Leave it for half an hour and wash it with cold water. Follow this regime once a day for a few days to get relief from anal fistula.

Oregano oil Oregano oil has soothing and healing properties that can help to cure fistula by consuming it. It helps to boost immunity, reduce swelling, prevent bleeding and kill bacteria around the anus. You can consume the oregano leaves oil by mixing it with lukewarm water twice a day.

Cloves (laung) A common condiment used in all Indian kitchens, cloves have antibacterial and anti-viral properties. It has been found to be beneficial in cleansing the colon and boosting the immune system. It also helps prevent the occurrence of parasite infections in the body. You can boil a few cloves or clove powder in water and consume that water. Alternatively, you can also add cloves to your green tea.

Turmeric milk (haldi doodh) Turmeric is a well known natural and powerful antibacterial and antiviral agent. It helps to boost the immune system, fight infections and expedite healing of wounds. You can boil turmeric powder with milk and consume it once a day. Frequently Asked Questions Can you live with a fistula without surgery? Can feces come out of a fistula? Is fistula a sign of cancer? How serious is fistula surgery? Does fistula heal on its own? What are the complications of obstetric fistula? How do you stop an obstetric fistula? What does a fistula smell like? References What is a Fistula? Fistula. National Association for Continence. Diverticular Disease. National Institute of Diabetes and Digestive and Kidney Diseases. Last reviewed in Aug 2021. Fistulas Disorders at a Glance. Fistulas. UCLA Health. Obstetric Fistula. Newsroom. World Health Organization (WHO). Last published in 2018. Gulati BK, Unisa S, Pandey A, et al. Correlates of occurrence of obstetric fistula among women in selected States of India: an analysis of DLHS-3 data. Facts, views & vision in ObGyn. 2011;3(2):121. Zeitz J, Fournier N, Labenz C, et al. Risk factors for the development of fistulae and stenoses in Crohn disease patients in the Swiss inflammatory bowel disease cohort. Inflammatory intestinal diseases. 2016;1(4):172-81. Topic Overview. Vaginal Fistula. University of Michigan Health. Last reviewed in July 2020. Ky AJ, Sylla P, Steinhagen R, Steinhagen E, Khaitov S, Ly EK. Collagen fistula plug for the treatment of anal fistulas. Diseases of the colon & rectum. 2008 Jun;51(6):838-43. Your Recovery. Anal Fistulotomy: What to Expect at Home. My Health. Alberta. Adapted in Nov 2021. Anal Fistula. Health Library. Winchester Hospital. Last reviewed in July 2021.

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Food allergies Also known as Food hypersensitivity and Allergic reaction to food Overview If you have a food allergy, your immune system mistakenly identifies a food protein as something harmful, and coming in contact with that protein triggers an allergic reaction. Symptoms can occur when coming in contact with just a tiny amount of food.

The most common triggers of this reaction include eggs, fish, milk, peanuts, shellfish, soy, tree nuts, and wheat. The symptoms of food allergy include difficulty breathing, chest tightness, rashes (hives), and itching all over your body.

Children between the age of 6-11 years are most commonly affected and the common risk factors include a family history of allergic reactions, asthma, and age of introduction to solid foods.

The best way to prevent any allergic reaction is to avoid the food items that are causing it. In case of accidental exposure or emergency, adrenaline can be used. Antihistamines and bronchodilators may be used to provide relief from symptoms.

Accurate diagnosis and successful management of allergies are essential to prevent any severe reactions in the future. An allergist or immunologist has specialized training and experience to diagnose the problem and develop a prevention plan. Key Facts Usually seen in Children between 6 to 11 years of age Gender affected Both men and women but more common in men Body part(s) involved Skin Respiratory system Gastrointestinal system Cardio-vascular system Central nervous system Prevalence Worldwide: 3% to 10% (2020) India: 0.14% (2020) Mimicking Conditions Factitious disorder Esophagitis and esophageal motility disorders Giardiasis Gastroesophageal reflux disease (GERD) Irritable bowel syndrome Bacterial or viral gastroenteritis Lactose intolerance Whipple disease Necessary health tests/imaging Skin prick test (puncture or scratch test) Serum-specific IgE Atopy patch tests (APT) Oral food challenge (OFC) Treatment Adrenaline (epinephrine) injection Antihistamines Bronchodilators See All Symptoms Of Food Allergies

The type and severity of symptoms change from one person to another. The symptoms include: Skin symptoms Angioedema (swelling under the skin) Urticaria (itching) Flushing Warm feeling Respiratory symptoms Chest tightness Wheezing Cough Swelling in tongue, palate, or uvular Upper airway stridor (high-pitched breathing sound) Hoarseness of voice Sneezing Gastrointestinal symptoms Vomiting Nausea Abdominal pain Diarrhea Cardiovascular symptoms Tachycardia (increased heart rate) Bradycardia (decreased heart rate) Chest pain Hypotension (decreased blood pressure) Syncope (fainting) Arrhythmias (abnormal heart rate) Heart palpitations Neurological symptoms Headache Altered mental status Seizure Dizziness General symptoms Anxiety Pallor Weakness

Did you know? Food and skin allergies are very common in children. Read about the common causes of skin allergies in kids. Tap now

Causes Of Food Allergies

Food allergies refer to an abnormal immunologic response to a food that occurs in a susceptible person. These reactions happen each time the food is ingested and they are often not dose-dependent. Based on the immunological mechanism involved, food allergies may be caused due to the following responses:

IgE-mediated: These are mediated by antibodies belonging to the Immunoglobulin E (IgE) and are the best-characterized food allergic reactions. Cell-mediated: When the cell component of the immune system is responsible for food allergy and primarily involves the gastrointestinal tract. Mixed IgE mediated-cell mediated: When both IgE and immune cells are involved in the reaction. Foods that can commonly cause allergic reactions

In young children Cow’s milk Egg Peanut Soy Tree nut Shellfish

In adults Shellfish Peanut Tree nut Fish

Do you want to know which food you are allergic to? There is a test for it that measures the levels of allergen-specific antibodies. Read now

What is Allergy - Adult Comprehensive Panel, ImmunoCAP? It comprises 30 tests that help to identify certain allergens that trigger your body. Know more about this test.

Read now

Risk Factors For Food Allergies

There is no way to accurately predict who will develop a food allergy, but there are certain factors that can act as increase the risk and they include: Risk factors during pregnancy Tobacco smoke: Exposure to smoking increases the risk of sensitization to food allergens. Unbalanced diet: Studies have shown a link between maternal diet and risk of childhood asthma and other allergic diseases.

Food habits during pregnancy are important! Read more about what foods to eat and what to avoid. Click now

Risk factors during childbirth Birth via cesarean section: Children born through cesarean section might have an increased risk of developing food allergies. Risk factors after childbirth Gut microbiota: The presence of specific bacterial strains can influence the development of food allergy Infections: Exposure to infections in early childhood might increase susceptibility to allergic disease by altering the development of the immune system. Age of the introduction of solid foods: Introduction of solids into a child’s diet from the age of 7 months or later is associated with a higher risk of food allergy or intolerance. Other risk factors Family history of allergic diseases: Having a single family member with a history of the allergic disease increases the risk of food allergy in the child. Infant eczema: Studies suggest that any break in the skin (which can happen due to eczema) increases the chances of exposure to the allergen.

Do you suffer from itchy eczema? Know about 6 home remedies to relieve the symptoms. Read This

Vitamin D deficiency: A deficiency of vitamin D is considered a possible risk factor for food allergy development. Advanced glycation end-products (AGEs): These are derived from cooked meat, oil, and cheese, and have a high concentration of sugar. AGEs initiate signals, leading to the development of food allergies.

Read more about signs and symptoms of vitamin D deficiency. Read Now

Age: Food allergies are more common in children, especially toddlers and infants. Asthma: Asthma and food allergy commonly occur together. Also, individuals with food allergies have a higher risk of developing asthma and rhinitis. Race: Racial differences have also been associated with a higher prevalence of food allergy. Sex: Males are known to be at a higher risk of food allergies than females. Diagnosis Of Food Allergies

Clinical history along with allergy and other lab tests are used in the identification of allergen triggers. These include: Patient’s history and examination The patient’s clinical history and examination are the first-line approaches in diagnosing food allergy. It includes a systematic review of the patient’s diet, the timing of the first and last occurrences of similar allergic reactions, and history that considers the symptoms of allergic reactions to food. Laboratory tests

1. Skin prick test (puncture or scratch test): This test inspects for immediate allergic reactions to different allergens at the same time. It is usually performed on the forearm in adults and on the upper back in children.
2. Serum-specific IgE: This test was known as RAST(Radioallergosorbent testing). It measures how much IgE your body makes in response to a single allergen and is preferred when the skin prick test (the favored allergy test) is not suitable or not available.
3. Atopy patch tests (APT): This test is used to assess delayed-type hypersensitivity reactions. Other tests
4. Oral food challenge (OFC): The gold standard for food allergy diagnosis. During this test, the allergist feeds the suspect food in measured doses. With each dose, the allergist will watch the individual for a period of time for any signs of a reaction.
5. Endoscopy and biopsy: These may not be very useful for the detection of food allergy, but are used to diagnose non-IgE-mediated disorders.

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Celebs affected Ekta Kapoor Ekta Kapoor, the Indian TV Czarina, got tested and found that she is allergic to cauliflower. Taking to Instagram’s story, the producer shared pictures of her hands and wrote: “Testing food allergies, if anyone else has them, is the great way to find out.” Sabrina Carpenter Sabrina Carpenter is an American singer, confirmed her apple allergy on Twitter in 2016, telling fans that a previous tweet about loving apples referred to Apple products, not the fruit. Malia Obama When President Barack Obama signed a 2013 bill to increase the availability of epinephrine in schools, he spoke about his daughter, Malia’s, peanut allergy. Obama said at the time. “Making sure that EpiPens are available in case of emergencies in schools.” Prevention Of Food Allergies

Dealing with food allergies can be daunting. As all know prevention is better than cure, strategies for the prevention of food allergy might include primary prevention, which seeks to prevent the onset of the reaction, and secondary prevention, which seeks to interrupt the development of the reaction. They include: Prevention in pregnant women Some food allergies develop in the womb itself, and unborn children may be sensitized to the foods their mothers consume.

Understand what foods to avoid during pregnancy and more diet tips. Prevention in breastfeeding mothers Read Now

It has been hypothesized that mothers may inadvertently sensitize their children to certain foods through breast milk, but there is little evidence that changing what mothers consume when breastfeeding prevents food allergies in infants.

What does every new mother need to know? Read more about 5 foods to eat while breastfeeding. Click to Know

Prevention during infancy The prevention strategies include:

Age at introduction of solid foods: Studies found reduced food allergy when solids were introduced as early as 4 months.

Supplements: Postnatal fish oil consumption is associated with decreased food sensitization and food allergies in infants and may provide an intervention strategy for allergy prevention.

Shop from our widest range of omega-3 fatty acids and fish oil supplements. Visit Now

Prevention for older children and adults The prevention strategies for children and adults include:

Avoidance of allergens: This is very important but not always easy. Some allergens are easier to avoid than others, if avoiding an allergen is difficult, try to reduce your contact with it.

Taking medicines as prescribed: They can be helpful for managing the symptoms of an allergic reaction.

Maintaining a diary: this is to track what you eat when symptoms occur and what seems to help. This may help you and your doctor find what causes or worsen your symptoms.

Eat 2 hours before exercise: Some food allergies can be triggered by exercise, so to prevent that from happening, eating 2 hours prior to exercise is a good practice. Specialist To Visit

Food allergies can lead to severe allergic reactions that become a medical emergency. Always be prepared and contact the emergency department of the nearest hospital in case of severe food allergy. Doctors that can help you with this are:

General physician Allergist Immunologist Dietician Pediatrician

An allergist is a medical practitioner specializing in the diagnosis and treatment of allergies. An immunologist is a doctor who diagnoses, treats, and works to prevent immune system disorders.

If you notice any symptoms of food allergy, seek advice from our world-class professionals. Consult Now

Treatment Of Food Allergies

There is currently no treatment for food allergy, except for avoidance of the responsible food/ foods. Once a food allergy is diagnosed, strict elimination of the offending food allergen from the diet is necessary. In the case of accidental exposure The treatment of choice during accidental exposure leading to a severe allergic reaction (anaphylaxis), adrenaline (epinephrine) injection is used. It is administered by intramuscular injection into the thigh. Medicines to manage the symptoms Several medicines are available in the market for initial immediate treatment of food allergy like:

1. Antihistamines: They can relieve gastrointestinal symptoms, hives, sneezing, and a runny nose.
2. Bronchodilators: They can relieve the symptoms of asthma, however, they are not effective in preventing an allergic reaction when taken prior to eating the food.

Know how to tackle allergies in the risk-free way. Read This

Home-care For Food Allergies

The best way to avoid unpleasant symptoms of a food allergy is by avoiding the food entirely. Though the list of remedies that can work for food allergies is short , it can be very effective. If there is a mild reaction here are some home remedies that can prove beneficial to relieve the food allergy symptoms:

Ginger (Adrak): Ginger is believed to help speed up digestion, which may benefit those with stomach discomfort and indigestion caused by trigger foods. It can also prevent gas and reduce bloating and cramping. Probiotics: Unbalanced bacteria in the gastrointestinal (GI) tract can play a role in many chronic conditions, including food allergies. Probiotics have been found to be preventive and therapeutic against food allergies. Lemon (Nimbu): Lemons are high in vitamin C, a powerful antioxidant that helps maintain a robust immune system and protects against infection and disease. Green tea: Green tea is rich in antioxidants and can help fight inflammation. There are certain studies that suggest that green tea can hinder mast cell activation and block histamines, which can be helpful for allergic reactions. Carrots (Gajar): Carrots are rich in beta-carotene, a powerful antioxidant that has been shown to increase immune cell numbers and activity.

Drinking large amounts can lead to carotenemia, which can cause your skin to turn slightly yellowish.

Read more about the benefits of carrots that are good for your health. Read More

Complications Of Food Allergies

Food allergy is an important public health problem that affects children and adults. Food allergy complications include: Anaphylaxis: It is a life-threatening condition that can lead to constriction and tightening of the airways. Respiratory distress: Exposure to food allergens can trigger respiratory symptoms like isolated asthma or rhinitis in rare cases. Heart attack: Cardiovascular symptoms can be the sole manifestation of exercise-induced food allergies. Did you know? Very rarely, a severe allergic reaction (anaphylaxis) can occur post-COVID-19 vaccination as well. Get all your queries answered on COVID-19 vaccination. Click Now Alternative Therapies For Food Allergies

Food allergies can be irritating, but the mild ones do not generally cause a lot of problems. Apart from regular medications, there are other therapies as well that have proven to be beneficial. Some of them include: Chinese herbal therapies Studies suggest that an herb-based formula (FAHF-2) used in traditional Chinese medicine may be an effective approach to food allergy treatment that is not specific to any one food allergen and can be potentially used to treat multiple food allergies Acupuncture It is the practice of inserting hair-thin needles into the body at strategic points to relieve specific symptoms. Acupuncture supports the immune system and can relieve symptoms associated with seasonal and food allergies. Homeopathy Homeopathy works by correcting the immune responses of individuals rather than suppressing or modifying the immune system. It has proven to be beneficial for individuals with allergic reactions or allergic diseases.

Read about 6 homeopathy facts that everyone should know.

Click Now

Living With Food Allergies

Food allergies are not very serious and do not affect the quality of life in most cases. All you need to do is make certain lifestyle modifications and learn to manage in case of emergency. A number of general strategies and tips may be helpful in managing food allergies. A few of them include: Always read the food labels Read every label, every time to see whether any additives contain milk protein or byproducts of wheat, or whether a food was produced in a facility that processes nuts. Manufacturers frequently change ingredients and an allergen may be part of a new formulation. Take care while cooking It’s a good idea to have two sets of cooking and eating utensils one exclusively for the allergic person and all dishes and utensils should be thoroughly washed in hot, soapy water between uses. Be extra cautious while dining out Dining out may seem fun, but if an unknown food allergen is consumed by mistake it can lead to complications. So it is wise to let the manager or chef know about the food allergy before placing the order. Wear a medical ID bracelet Make sure it lists relevant information about your food allergy and always carry your medication, ideally two doses. Know what to do during an allergic reaction If someone is suffering from a severe allergic reaction the: Call the local medical emergency number immediately. See If the person is carrying an epinephrine auto-injector Help the person inject the medication by pressing the autoinjector against the person’s thigh. Make the person lie face up and be still. Loosen their tight clothing and cover the person with a blanket. Turn the person to the side to prevent choking if there’s vomiting or bleeding from the mouth. Position the patient in the Trendelenburg position i.e lying flat on the back with legs elevated in order to allow blood flow to the heart. If there are no signs of breathing, coughing, or movement, begin CPR (start uninterrupted chest presses about 100 every minute).

Correct first aid can help save a life! Know more about step-by-step instructions for emergency management.

Read Now

Frequently Asked Questions How common are food allergies? How do food allergies affect my body? What is the difference between food allergies and food intolerances? What are the life-threatening symptoms of food allergies? When should one see their doctor for a food allergy? When should one rush to the hospital? References Waserman and Watson. Food Allergy. Allergy, Asthma & Clinical Immunology 2011, 7(Suppl 1): S7. Calvani M, Anania C, Caffarelli C, Martelli A, Miraglia Del Giudice M, Cravidi C, Duse M, Manti S, Tosca MA, Cardinale F, Chiappini E, Olivero F, Marseglia GL. Food Allergies: an updated review on pathogenesis, diagnosis, prevention, and management. Acta Biomed. 2020 Sep 15;91(11-S):e2020012. Abrol, G.S., Sharma, K.D., Singh, A.K., Pal, R. and Pandey, A.K. (2019). Food Allergy: An Important Health Hazard. Int. J. Food Ferment. Technol., 9(2): 55-65. Antonella Cianferoni and Jonathan M Spergel. Food Allergy: Review, Classification, and Diagnosis. Allergology International. 2009;58:457-466. J. L. Turnbull et al. Review article: the diagnosis and management of food allergy. and food intolerances. Aliment Pharmacol Ther 2015; 41: 3-25. Thacher JD, Gruzieva O, Pershagen G, Neuman Å, van Hage M, Wickman M, Kull I, Melén E, Bergström A. Parental smoking and development of allergic sensitization from birth to adolescence. Allergy. 2016 Feb;71(2):239-48. Du Toit et al. Prevention of food allergy. J Allergy Clin Immunol Vol 137, Number 4. Baïz et al. Maternal diet before and during pregnancy and risk of asthma and allergic rhinitis in children. Allergy Asthma Clin Immunol (2019) 15:40. Eggesbø M, Botten G, Stigum H, Nafstad P, Magnus P. Is delivery by cesarean section a risk factor for food allergy? J Allergy Clin Immunol. 2003;112(2):420-426. Koplin JJ, Allen KJ, Gurrin LC, Peters RL, Lowe AJ, Tang ML, Dharmage SC; HealthNuts Study Team. The impact of family history of allergy on risk of food allergy: a population-based study of infants. Int J Environ Res Public Health. 2013 Oct 25;10(11):5364-77. Manea I, Ailenei E, Deleanu D. Overview of food allergy diagnosis. Clujul Med. 2016;89(1):5-10. van Ree R (2021) Grand Challenges in Food Allergy. Front. Allergy 2:668479. Safety of Oral Food Challenges. Oral Food Challenge. Food Allergy Research & Education. 2022. de Silva et al. Primary prevention of food allergy in children and adults: systematic review. Allergy 69 (2014) 581–589 © 2014 John Wiley & Sons A/S. Published by John Wiley & Sons Ltd. Clausen M, Jonasson K, Keil T, Beyer K, Sigurdardottir ST. Fish oil in infancy protects against food allergy in Iceland-Results from a birth cohort study. Allergy. 2018 Jun;73(6):1305-1312. Waserman and Watson Allergy, Asthma & Clinical Immunology 2011, 7(Suppl 1):S7.http://www.aacijournal.com/content/7/S1/S7 Jin BY, Li Z, Xia YN, Li LX, Zhao ZX, Li XY, Li Y, Li B, Zhou RC, Fu SC, Li SY, Li YQ. Probiotic Interventions Alleviate Food Allergy Symptoms Correlated With Cesarean Section: A Murine Model. Front Immunol. 2021 Sep 28;12:741371. Maeda-Yamamoto M. Human clinical studies of tea polyphenols in allergy or lifestyle-related diseases. Curr Pharm Des. 2013;19(34):6148-6155. Wang J. Treatment of food anaphylaxis with traditional Chinese herbal remedies: from mouse model to human clinical trials. Curr Opin Allergy Clin Immunol. 2013 Aug;13(4):386-91. The burden of allergic diseases in the Indian subcontinent: barriers and challenges. The Lancet. Vol 8 April 2020. Messina, Mark ,et al. Nutrition Today: 1/2 2020 - Volume 55 - Issue 1.

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Food poisoning Also known as Foodborne illness and Foodborne disease Overview Food poisoning refers to the sickness experienced after eating contaminated food. The source of contamination in most cases is bacteria. However, it can also be caused by toxins or chemicals that may contaminate the food during its production, processing, harvesting, cooking, or storing.

The classical symptoms of food poisoning include diarrhea, stomach pain, nausea, vomiting, and fever. Children, elderly, pregnant women, and individuals with low immunity are at high risk of food poisoning. Most cases of food poisoning can be prevented by basic hand hygiene, sanitation of the kitchen and refrigerator, and storing the food as per the recommendations. Food poisoning can be usually treated at home by maintaining the fluid and electrolyte balance through regular intake of clean boiled water, oral rehydration solution (ORS), coconut water, clear soups and fresh fruit juices. In cases of severe dehydration, hospital admission might be required. Key Facts Usually seen in Children under 5 years of age Elderly above 65 years of age Gender affected Both men and women Body part(s) involved Stomach Small Intestine Large Intestine Nervous system Prevalence India: 13.2% (2015) Global: 7.69% (2021) Mimicking Conditions Coumaphos intoxications Inflammatory bowel disease Peptic ulcer disease Bowel obstruction Cholecystitis Irritable bowel syndrome Lactose intolerance Celiac disease Acute HIV infection Colorectal cancer Necessary health tests/imaging Blood tests Urine test Stool analysis Abdominal X-ray Abdominal ultrasound Treatment Fluid therapy: Water, Oral rehydration solution, Saline solution & Lactate Ringer’s solution. Antibiotics: Metronidazole, Ceftriaxone & Azithromycin Antiemetics: Ondansetron & Metoclopramide Anti-diarrheal medications: Diphenoxylate & Loperamide See All Symptoms Of Food poisoning

The symptoms of food poisoning range from mild to severe. The symptoms can start appearing from a few hours to several weeks later after having contaminated food. In most cases, symptoms resolve on their own or with the right home care within a few days of contracting the infection. Early signs These symptoms are the first to appear and are common to most types of food poisoning. These include: Nausea Vomiting Diarrhea Dull stomach ache, cramps, or a sharp pain Dealing with constant stomach aches? Here are some of the causes of stomach ache along with the information about when to consult a doctor. Read To Know

The other symptoms might include: Headache Dizziness Intense thirst Diarrhea which may contain blood or mucus Dehydration Decreased urination Cold and clammy skin Slow pulse Fever Chills Muscle ache Lack of energy Loss of appetite

Individuals can also experience several long-term severe symptoms in some cases which include: Reactive arthritis (sometimes known as Reiter’s Syndrome) Severe vomiting Profuse watery diarrhea Severe dehydration Confusion Seizures Muscle weakness Double vision Slurred speech

Did you know? Stomach flu/viral gastroenteritis and food poisoning often share similar symptoms. The difference lies in the transmission. Stomach flu is mostly caused by viruses and is transmitted from person to person while food poisoning is caused by the ingestion of contaminated food and water. Causes Of Food poisoning Food poisoning is caused by the contamination of food by either microbes or any other toxins. A. Microbial contamination 1. Bacteria: It is the most common cause of food poisoning. The symptoms and severity of the infection depend upon the type of bacteria that has contaminated the food. Some of the bacteria that cause food poisoning are: Campylobacter: These bacteria usually contaminate raw/undercooked meat, raw milk, and contaminated water. The incubation period (time between exposure of bacteria to the onset of symptoms) is 2-5 days. The symptoms of this infection generally last for a week. Salmonella: The contaminated raw/undercooked meat, raw eggs, milk, and other dairy products are the main sources of these bacteria. The symptoms start appearing between 12 to 72 hours. Listeria: These bacteria are found in “ready-to-eat” foods such as pre-packed sandwiches, hot dogs, cooked sliced meats, and soft cheeses. The symptoms can appear from a few days to several days. The food poisoning usually resolves within 3 days. Note of caution: Pregnant women are 10 times more likely than other people to get Listeria infection. It can cause complications such as miscarriage, stillbirth, or premature birth. Escherichia coli (E. coli): These bacteria normally inhabit the intestines of several animals and humans. Most of their types are harmless but some of them can cause food poisoning. The bacteria contaminate food such as undercooked beef and unpasteurized milk. Symptoms usually start appearing within 1 to 8 days of contracting the bacteria and last for a few days. Shigella: Any food such as fruits and vegetables washed in contaminated water can be exposed to shigella. Symptoms typically develop within seven days of eating contaminated food and last for up to a week. Bacillus cereus: This microorganism mainly develops in improperly stored food. The infection with Bacillus is characterized by diarrhea and vomiting. Staphylococcus: It is most commonly found in undercooked meats, eggs, and dairy products. Vibrio: This type of bacteria are commonly found in coastal water and can contaminate oysters, fish, and shellfish. Symptoms can start appearing 1 day after infection and usually resolves in 3 days. Clostridium: This bacteria contaminates food that is cooked in large batches. The common food items that may contain this bacteria include poultry and meat.

Other less common microbes

1. Parasites: Parasites are the organisms that drive their nutritional requirements from other living organisms. The symptoms of food poisoning caused by parasites develop within 10 days of exposure to the parasite. The common examples of parasites that cause food poisoning are: Giardia intestinalis Cryptosporidium Entamoeba histolytica
2. Viruses: The viruses that can cause food poisoning spread through contaminated water. It can also spread via a person infected with the virus while preparing or handling food. The common viruses that cause food poisoning include: Rotavirus Adenovirus Parvovirus
3. Fungi: There are several fungi that may cause food poisoning. Some fungi produce harmful chemicals that contaminate foods. The common examples of fungi that can cause food poisoning are: Alternaria Aspergillus Candida Fusarium B. Non-microbial In some cases, harmful chemicals are already present in the food which can cause food poisoning. Fish and shellfish may contain toxins produced by algae or bacteria present in water. Unwashed produce may also cause food poisoning due to the presence of pesticides used during crop production. The contaminants can be of: Vegetable origin (Mushrooms) Animal origin (Shellfish) Chemicals (Flavouring agent, coloring agent, and preservatives) How does the food get contaminated? Food is not only contaminated in the kitchen. It can be exposed to contamination during its production, harvesting, processing, storing, shipping and preparation. Microbes can cause food poisoning if they are not washed off or killed before consuming. The following things can keep the microbes alive to cause food poisoning: Consuming partially cooked food Keeping cooked food unrefrigerated for a long period Storing packaged food at the wrong temperature Promptly refrigerating hot food Keeping raw foods such as beef, poultry, and eggs together with ready-to-eat foods

The microbes of food poisoning can also spread through an infected person via: Eating food that is touched by the infected person Cross-contamination (where harmful bacteria are spread between food, surfaces and equipment) Sometimes, food poisoning can also occur through having ready-made contaminated food Touching contaminated surfaces and objects such as handrails, elevator buttons, utensils, and doors while eating or handling food Sharing food and beverages with the infected person Did you know? Salt and sugar can contain chalk powder as an adulterant. It can be identified by dissolving a teaspoon of salt / Sugar in a glass of water. If it is pure, it will dissolve. If chalk is present, it will sink to the bottom. Find out more tips to expose the hidden poison in commonly used food items that can lead to food poisoning and other health hazards. Read To Know! Risk Factors For Food poisoning

Any individual can suffer from food poisoning but there are some groups of people that are more prone to it. These people include: 1. Children younger than 5 years of age Children have an underdeveloped immune system so the chances of getting any infection is higher in them. Food poisoning can cause severe diarrhea and dehydration in children. It is also seen that children are 3 times more prone to be hospitalized if they get Salmonella infection. Looking for some multivitamins and minerals that boost immunity for your kids?? They are just a click away from you. Order Now 2. Pregnant women Pregnant women are more prone to food poisoning. Studies suggest that pregnant women are 10 times more likely to get a Listeria infection. 3. Older people above 65 years of age The immune system of older people is compromised due to which the chances of infections in these groups of people are high. 4. People with weakened immune system Some individuals have a weakened immune system which can be a cause of recurrent food poisoning. The disorders that can contribute to the weakened immune system include: Diabetes Liver disease Kidney disease Cancer HIV infection 5. Consuming certain food There are some food items that are more prone to microbial contamination and thus food poisoning. Such items include raw meat, unpasteurized milk, fish, shellfish, eggs, poultry, cheese, raw fruits, vegetables, nuts, spices, beef, salad, seafood, sprouts, and raw flour. The frequent consumption of such foods increases the risk of food poisoning. 6. Other factors Purchasing food from unauthorized sources Cooking the food at the wrong temperature Storing the food without refrigeration Practicing poor personal hygiene such as not washing hands before eating or serving food Using contaminated food and utensils. Up your stomach care game by a notch with our widest range of products to look after your stomach and help you get better faster if you are suffering from food poisoning. Shop Them Here

Diagnosis Of Food poisoning

There are no specific tests to diagnose food poisoning. In most of the cases, symptoms are mild and last for a few hours. In case of severe poisoning, the following steps can help your doctor determine cause of your food poisoning: 1. History taking It is the first step to establishing food poisoning. Your doctors will ask for a set of questionnaires to identify the agent of food poisoning. The questions can be asked regarding: Recent meal that you have taken Recent place of travel, if any Other people you know having similar symptoms Medicines you are taking

Your doctor also asks about the symptoms you are experiencing. This information helps in establishing the cause and type of food poisoning. 2. Physical examination It is done to see the changes in the body as per the symptoms experienced. During a physical exam, your doctor may: Examine the blood pressure to check the signs of dehydration Check the temperature to confirm fever Assess the abdomen using a stethoscope Inspect any tenderness or pain in the abdomen through tapping. 3. Laboratory tests The type of contaminant is diagnosed through several tests. The microbial contaminant is assessed using samples of blood, urine, vomit or stool. It also reveals the severity of poisoning. It usually include following tests: Stool tests: The stool is examined for the presence of bacteria, parasites or blood. Blood test: Blood tests are performed to look for any sign of complications such as dehydration and kidney abnormalities. It includes assessing the level of electrolytes and other markers of kidney function. Urine test: It is also done to look for bacterial infection. 4. Imaging tests Abdominal ultrasound: This imaging test look at organs in the abdomen, including the intestine, liver, gallbladder, spleen, pancreas, and kidneys. It is an extremely useful imaging modality for evaluating the patient with acute abdominal symptoms. Abdominal X-ray: In some cases of poisoning, an abdominal x-ray may check the presence and location of the ingested substances. Toxins that may be visible on x-rays include iron, lead, arsenic, and other metals. Get your lab tests done in the comfort and safety of your home. Book with Tata 1mg Celebs affected Manisha Koirala She is an Indian actress who revealed her story of food poisoning through her blogs. She managed her condition through homemade soups and green tea. Miranda Lambert She is an American actress. She reportedly developed a severe case of food poisoning after eating shrimp. Specialist To Visit

Food poisoning often resolves on its own without seeking medical advice. The specialty of doctor that may help in diagnosing and treating food poisoning include: General physician Gastroenterologist Pediatrician (for kids)

A gastroenterologist is a specialist in the disorders and diseases that affect the digestive system. A pediatrician is a doctor who deals with the diseases of children. When to see a doctor? Some symptoms of food poisoning should not be ignored. Consult your doctor immediately if you have any of the following symptoms: Persistent vomiting or diarrhea for more than three days Inability to keep fluids down for a day or longer Watery or bloody diarrhea Fever higher than 102 degrees Signs of dehydration Any sign of dehydration should not be ignored. The sign of dehydration include: Extreme thirst Dry mouth Dark urine Infrequent urination Dizziness Tiredness

To get the right diagnosis, it is important to consult the right doctor. Get advice from India’s best doctors online. Talk Now

Prevention of Food poisoning

Food poisoning can be prevented by practicing hygiene while storing, handling or preparing food. The following measures can reduce the chances of food poisoning: A. Follow safe practices 1. While buying food items Buy foods such as meat and seafood from hygienic outlets Do not buy food items whose expiry has elapsed Do not purchase undercooked or raw meats Buy only pasteurized (heat treated to kill the disease-causing microbes) milk and cheese Do not buy cracked or leaked eggs Choose fresh fruits and vegetables Check for any damage, rusk or dent on cans while buying beverages Take frozen and refrigerated items from an authentic grocery store 2. While storing food Keep raw meat, poultry and seafood in separate bags during refrigeration to avoid cross-contamination Keep the temperature of the main section below 4oC Store the food as per the instructions on the label Keep cooked leftovers quickly in the refrigerator Keep raw cereals and dough away from the reach of children 3. While cooking and handling food Do not leave cut vegetables and fruits uncovered Cook the food thoroughly Cook the eggs until both the yolk and white are firm Discard the food in case of a suspicious look and smell Make sure that the food is steaming all the way through while reheating Avoid reheating food more than once 4. While traveling Drink only boiled or bottled water Avoid eating raw vegetables and salads Avoid buying food from unhygienic vendors 5. While dining out Avoid taking dishes that contain undercooked eggs, sprouts, meat, poultry, or seafood B. Maintain proper hygiene Wash your hands, counters, and cutting surfaces between preparation of different foods Use glass or plastic cutting boards for chopping vegetables or meat instead of wooden boards for ease of cleaning Wash fresh fruits and vegetables under running water Avoid contact with sick persons while handling or preparing food Ensure sanitation of the painting floors, utensils, and other articles in the kitchen

The first step in maintaining hygiene is having clean hands. Hand Washing can prevent about 30% of diarrhea-related illnesses. Learn the right way of washing your hands! Read To Know C. Clean the refrigerator frequently The refrigerator should be cleaned thoroughly along with removable parts. The following measures should be taken while cleaning refrigerator: Dispose off the contaminated food in a garbage bag Wash the container in which contaminated food was stored with soap and water Avoid leaving food out of the refrigerator for more than 2 hours Treatment of Food poisoning

The treatment of food poisoning is based upon the cause and symptoms. The most important goal of the therapy is to maintain hydration and electrolyte balance. Fluid therapy Most cases of mild dehydration can easily be managed at home through fluid therapy. It is advised to drink plenty of fluids like water, coconut water to compensate for water loss and prevent dehydration. Oral rehydration solutions(ORS) are preferred over other clear fluids for managing diarrhea. Patients having severe dehydration and persistent vomiting may require hospital admission for continuous monitoring of electrolyte levels. Enteral (oral or nasogastric) and intravenous fluids (saline solution and lactate Ringer’s solutions) are given to patients facing difficulty in taking fluids due to nausea, vomiting, and to correct electrolyte levels.

Medications Antibiotics: They are mostly used to treat food poisoning caused by bacteria. Some of the commonly used antibiotics are: Metronidazole Ceftriaxone Azithromycin

Antiemetics: Antiemetic medications are the drugs that are used to control nausea and vomiting. The commonly used antiemetic medications are: Ondansetron Metoclopramide

Antidiarrheal medications: These are drugs that relieve symptoms of diarrhea. These are used only in those patients who are not able to maintain a well-hydrated status. Medications include: Diphenoxylate Loperamide

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1. Keep a watch on fluid intake It is advised to have plenty of fluids like fresh fruit juices, coconut water, clear soups etc. In case of severe vomiting, take small sips of fluids at regular intervals. The mothers of the infected infants should make sure that their babies are getting enough breast milk.
2. Have ice chips If you are facing difficulty in digesting fluids, try to suck ice chips. This also helps in rehydration. The ice chips should not be given to small children.
3. Consume BRAT diet B.R.A.T stands for bananas, rice, applesauce, and toast. These food items should be included in the diet as it helps in making the stool smooth and helps in compensating the nutrient loss from vomiting and diarrhea. It is also advised to consume smaller easy to digest meals at regular intervals.
4. Try herbal remedies In most of the cases, food poisoning can be managed by simple home remedies like: Ginger (Adrak): It possesses anti-inflammatory, anti-viral, and anti-bacterial properties. It also eases nausea. It can be taken in raw form or can be boiled in water or tea. Apple cider vinegar (ACV): It can soothe an irritated stomach and thereby reduce nausea, vomiting, and abdominal cramps. Add 1 teaspoon of apple cider vinegar to a glass of warm water and drink 30 minutes before eating a meal. Order ACV from the comfort of your home. Tap here!

Yogurt (Dahi): It contains a lot of good bacteria that help in maintaining the overall good health of the gut. It also helps in reducing watery diarrhea. It should be added to every meal of the patient suffering from food poisoning. Cinnamon (Dalchini): It has antibacterial and antiviral properties which can be used for combating food poisoning. It also helps in reducing stomach pain and bloating. Turmeric (Haldi): Curcumin, present in turmeric, possesses anti-inflammatory properties. It can be consumed by adding a glass of warm water or milk.

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Basil (Tulsi): It possesses antispasmodic properties and helps in reducing spasms in food poisoning. It also has gastroprotective properties which aid in relieving symptoms of food poisoning. Peppermint (Pudina): It soothes the stomach and helps in treating bloating and gas. The most effective way to use it is to consume it in the form of tea. Triphala: It is known to improve digestive health and also helps in the absorption of nutrients. Coriander (Dhania): It possesses healing properties and it is known to alleviate the symptoms of upset stomach and diarrhea. Asafoetida (Hing): It is known for years to strengthen the digestive system. It possesses antiviral and antibacterial properties. It can be added in meals or can be consumed with lukewarm water. Licorice (Mulethi): It also promotes the healing of an inflamed stomach and treats indigestion. Rice water: It is used especially in infants to reduce diarrhea. Chamomile tea: It is used as a digestive relaxant and can help in the treatment of many gastrointestinal disturbances, like diarrhea and vomiting, which is most commonly observed in food poisoning.

Did you know? Probiotics are not just good for your gut, they boost immunity as well. The good bacteria present in probiotics check the growth of harmful microorganisms and prevent illness. Explore probiotics here 5. Avoid certain foods Certain food items should be avoided as they can make the stomach upset and can cause indigestion. The impaired digestion can aggravate diarrhea and vomiting. These include: Milk Greasy and spicy food containing chilly, black pepper, and garlic Drinks with caffeine, such as coffee and tea, and soft drinks. Fatty junk foods such as fried foods, pizza, and fast foods. Foods and drinks containing large amounts of simple sugars, such as sweetened beverages and packaged fruit juices. 6. Take proper rest People should take proper rest even after the completion of therapy. This will lead to complete recovery and healing of the digestive system. 7. Try heating pad Some patients suffer from severe abdominal pain. Such patients can use a heating pad to relieve cramps. 8. Say no to alcohol Alcohol can cause inflammation in the stomach. This can increase the secretion of gastric acid. So, alcohol should be avoided as it can increase the feeling of vomiting (nausea). Complications of Food poisoning

Untreated food poisoning can lead to the following complications : Chronic diarrhea Inflammatory bowel disease (condition in which there is an inflammation of small intestine and large intestine) Irritable bowel syndrome (condition characterized by abdominal pain) Arthritis Hemolytic uremic syndrome (a kidney condition that happens when red blood cells are destroyed and block the function of the kidney) Guillain-Barre syndrome (neurological disorder in which immune system attack the nervous system) Nervous system infections such as meningitis. Frequently Asked Questions What can be eaten during food poisoning? What foods to avoid during food poisoning? Can food poisoning be serious? Do symptoms of food poisoning can be mistaken for any other illness? Why is Listeria dangerous for pregnant women? References A Review Article On Food Poisoning, Dr. Jagdish Kumar Anant, Dr. S.R. Inchulkar, Dr. Sangeeta Bhagat, World Journal Of Pharmaceutical and Life Sciences, Last Updated On: 28th August 2018. Food Safety, Center For Disease Control And Prevention, Last Updated On: 27th February, 2022. Food Poisoning, NHS Inform, Last Updated On: 22 February 2023. Aljamali NM. Review on food poisoning (types, causes, symptoms, diagnosis, treatment). Global Academic Journal of Pharmacy and Drug Research. 2021;3(4):54-61. Food Poisoning, National Institute of Diabetes and Digestive and Kidney Health. Show Me the Science – Why Wash Your Hands? Handwashing in Communities: Clean Hands Save Lives. Centre for Disease Control and Prevention. Sultana R et al. A Review Article on Food Poisoning. International Journal of Science and Research (IJSR).ISSN: 2319-7064. SJIF (2022): 7.942. Volume 11 Issue 6, June 2022. Benedict K, Chiller TM, Mody RK. Invasive Fungal Infections Acquired from Contaminated Food or Nutritional Supplements: A Review of the Literature. Foodborne Pathog Dis. 2016 Jul;13(7):343-9. doi: 10.1089/fpd.2015.2108. Epub 2016 Apr 13. PMID: 27074753; PMCID: PMC5669373. Lubis NDA, Amelia S, Arrasyid NK, Rozi MF. Modeling of Risk Factors Associated with Foodborne Disease among School-Aged Children in Medan, Indonesia. Open Access Maced J Med Sci. 2019 Oct 12;7(19):3302-3306. doi: 10.3889/oamjms.2019.721. PMID: 31949535; PMCID: PMC6953940. Sockett PN, Rodgers FG. Enteric and foodborne disease in children: A review of the influence of food- and environment-related risk factors. Paediatr Child Health. 2001 Apr;6(4):203-9. doi: 10.1093/pch/6.4.203. PMID: 20084237; PMCID: PMC2804543. Kohli C, Garg S. Food safety in India: an unfinished agenda. MAMC Journal of Medical Sciences. 2015 Sep 1;1(3):131. Lee H, Yoon Y. Etiological Agents Implicated in Foodborne Illness World Wide. Food Sci Anim Resour. 2021 Jan;41(1):1-7. doi: 10.5851/kosfa.2020.e75. Epub 2021 Jan 1. PMID: 33506212; PMCID: PMC7810395. People with a high risk of food poisoning, Center For Disease Control And Prevention, Last Updated On: 10th August, 2022. Bacillus cereus, BC Center for Disease Control. http://www.bccdc.ca/health-info/diseases-conditions/bacillus-cereus#:~:text=Definition,ingestion%20of%20the%20contaminated%20food. Vibrio and Food, Center For Disease Control And Prevention, Last Updated On: 23 December, 2019. Prevent Illness From C. perfringens, Center For Disease Control And Prevention, Last Updated On: 24 March , 2023. Kohli C, Garg S. Food safety in India: an unfinished agenda. MAMC Journal of Medical Sciences. 2015 Sep 1;1(3):131.

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Fungal skin infections Also known as Dermatophytosis, Fungal infection Overview Did you know dandruff, diaper rash, and athlete’s foot are types of fungal infections? According to numerous studies published in the Journal “The Lancet”, fungal skin infections affect more than a billion people worldwide. In some cases they can result in life-threatening infections, however, they often remain the most neglected infection in the general population.

Fungal skin infections as the name suggests are caused by fungus. These mostly affect the damp areas of the body and skin folds such as between the toes, in the genital area, in the armpits, under the breasts, and in the groin area. These infections are mostly caused by yeast and dermatophytes (a type of fungi that causes superficial infections of the skin, hair, and nails). Poor personal hygiene and living in a hot, humid and crowded environment increases your risk of contracting the infection.

Most of these infections aren’t life-threatening but they can be contagious depending on the type of fungal infection. However, if left ignored, in certain cases they can lead to severe complications. Treatment typically consists of topical therapy like use of antifungal gels, ointments, and sprays or oral medication. Apart from medications, maintaining personal hygiene like keeping your skin/feet dry, wearing well-fitting shoes, etc can help to avoid fungal infections. Key Facts Usually seen in All age groups Gender affected Both men & women Body part(s) involved Skin Scalp Oral cavity Nails Prevalence Worldwide: 36.6-78.4% (2018) Mimicking Conditions Annular lesions Nummular eczema Erythema annulare centrifugum Tinea versicolor Cutaneous candidiasis Subacute cutaneous lupus erythematosus Pityriasis rosea Contact dermatitis Atopic dermatitis Seborrheic dermatitis Psoriasis Necessary health tests/imaging Physical examination Treatment Topical antifungals: Clotrimazole, Ketoconazole & Miconazole Oral antifungals: Terbinafine, Fluconazole & Itraconazole See All Causes Of Fungal Skin Infections

Fungal skin infections are caused by a variety of fungi and yeasts. Some of the common fungal skin infection-causing microbes are Candida or Malassezia furfur and dermatophytes such as Microsporum, Epidermophyton, and Trichophyton. These fungi tend to live only in the topmost layer of the epidermis (stratum corneum) and do not enter the deeper tissues or bloodstream.

Only some fungi cause infections by attacking a healthy host. Most of these disease-causing fungi are harmless unless they encounter an immunocompromised person. In such a case, these otherwise harmless fungi can invade the defense system of the patient increasing the chance of infection. Common fungal skin infections include:

1. Athlete’s foot Known as tinea pedis, it is a common fungal infection caused by fungi that live on dead tissue of toe nails, space between toes, sole of the feet. The fungus grows preferably in warm and moist environments. Hence, it mostly occurs in people who wear tight shoes, stay in sweaty socks, sports equipment, or by walking barefoot on damp, contaminated floors of common bathing, locker rooms or swimming areas.

The symptoms of an athlete’s foot may vary from patient to patient. Common symptoms include: Redness, itching, stinging, or burning sensations in the infected area especially between the toes or on the soles of the feet Cracked or blistered skin Skin may become dry, flaky and scale or peel away Infected skin may become soft and start to break down 2. Yeast infection They are commonly caused by yeast-like fungi Candida. It usually lives inside the digestive system or genitals without causing any harm. But in warm, moist, creased areas of the body such as the groin and armpits, or people suffering from diabetes, obesity or taking some antibiotics, candida can multiply and start to cause symptoms. However, these infections are not contagious. It can present as skin rash like diaper rash (in kids), oral thrush or candidiasis (infection of the mouth), nail fungus, and vaginal yeast infections. The signs and symptoms of various yeast infections are as follows:

1. Cutaneous or skin yeast infection Burning and itching in infected area Rashes Bumps or patches that contain clear fluid
2. Nail yeast infection Toenail fungal infection is very common although fingernails can also get affected. Thick, yellowish or brittle nail that separates from the nail bed Pain and swelling accompanied by pus discharge
3. Oral thrush White or yellow patches involving the tongue, inside your cheeks, tonsils, gums or lips Pain, soreness and burning sensation in the mouth
4. Vaginal yeast infection Redness and soreness on and surrounding the vagina Itching and swelling around the vagina Unusual discharge resembling cottage cheese or a very watery discharge from vagina Burning sensation during urination or coitus

How is vaginal yeast infection caused? Normally, overgrowth of yeast in the vagina is kept in check by a bacterium called lactobacillus, which maintains an acidic environment in the vagina. Conditions that upset this balance such as prolonged antibiotic therapy, pregnancy, diabetes or HIV infection can lead to vaginal candidiasis. Consult a doctor to get treated.

Consult Now!

1. Ringworm infection Ringworm infection is not caused by a worm (as most commonly misunderstood). Instead, it is caused by a fungus. Known as tinea corporis, it is usually not a serious condition but can be highly contagious. It can spread by coming in direct contact with an infected person, pet, sharing clothes or contaminated items that carry the organism. Heat and humidity also aid in spreading the infection. Ringworm infection can present like:

Ringworm on body: Ringworm is usually very easy to recognise because of its shape. It presents as a ring-shaped rash where the border of the ring is red and slightly raised, while the inside of the ring looks clear or scaly. It may even spread out into several rings. The rash is often bothersome and itchy. It is commonly seen on parts of your body that are exposed, such as your arms, legs or trunk.

Ringworm on scalp: This fungal infection affects the scalp and the hair shafts. One can get this at any age, but it is mostly seen in children. It is usually transmitted by sharing a hairbrush or clothing contaminated with the fungus. It presents as localized bald, scaly and itchy patches on the scalp. Sometimes, the patches become inflamed and have pus-filled spots. One may also develop a pus-filled area known as a kerion.

Did you know? Ringworm can also affect your pet and you can get infected by handling your pet animal.

Jock itch: Also known as tinea cruris, jock itch is a fungal infection that presents as an red, itchy and raised rash on the genitals, groin, inner thighs and buttocks. It is more common in men and teenage boys. The fungus favours warm and humid conditions and usually exercising in workout clothes makes it flourish. It is mildly contagious and can spread through close contact with the infected person. How is vaginal yeast infection caused? Normally, overgrowth of yeast in the vagina is kept in check by a bacterium called lactobacillus, which maintains an acidic environment in the vagina. Conditions that upset this balance such as prolonged antibiotic therapy, pregnancy, diabetes or HIV infection can lead to vaginal candidiasis. Consult a doctor to get treated. Consult Now! Risk Factors For Fungal Skin Infections

Some of the common factors that increase your risk of contracting fungal skin infections: Living in warm or wet areas Profuse sweating Sharing personal items like clothing, towels, shoes or combs Poor personal hygiene like not keeping body clean and dry Wearing tight clothes or footwear Frequent human contact Contact with animals that may be infected Visiting overcrowded places with poor ventilation Diabetes Obesity/ overweight Immunocompromised individuals suffering from HIV, cancer or undergoing chemotherapy or immunotherapy Do you know? Fungal infections are opportunistic, meaning they infect people whose immune system is severely compromised. Such infections can cause symptoms such as fever, cough, and shortness of breath. Fungal infections due to COVID-19 infection are more common in people with severe COVID-19 or those admitted to ICU. The most common fungal infections in patients with COVID-19 include aspergillosis or invasive candidiasis. Click To Read! Diagnosis Of Fungal Skin Infections

To diagnose a fungal skin infection, your doctor will physically examine the area and look out for rashes, red, flaky and inflamed skin. To find out the specific fungi causing your skin condition, the doctor will scrape off a little amount of skin. This skin is then examined under a microscope or placed in a culture medium where the specific fungus is grown and identified. Prevention Of Fungal Skin Infections

Though fungal skin infections are very common and may even occur in healthy individuals, there are certain preventive measures that can help in avoiding the risk of contraction: It is advised to keep your feet and skin dry if you are prone to fungal infections. You must shampoo regularly and keep your scalp clean. It is best to avoid sharing personal belongings such as towels, clothes, combs, or other personal care items. If you still use shared items, it is advised to clean and dry them thoroughly before use. Keep your feet covered and wear closed shoes at public places like gyms, public pools and locker rooms. Do not wear tight footwear. Go easy on your feet and wear breathable shoes or open-toed shoes. Use an antifungal powder in your shoes if you tend to sweat a lot. Don’t wear synthetic socks and change your socks often. Keep your toenails short and clean. Pay extra attention to the skin around your genital region, and keep it dry. Prefer wearing loose-fitting, cotton underwear. Specialist To Visit

Consult a doctor and avoid relying on over-the-counter medication if your infection does not improve. It is also important to seek medical help if you are an immunocompromised individual as in those cases a simple skin infection can enter deeper tissues and bloodstream and lead to complications.

Doctors who can help in the diagnosis and treatment of fungal skin infections are: General physician Dermatologist Treatment Of Fungal Skin Infections

The treatment of fungal infections usually comprises topical or oral preparations. Localized fungal infections are usually treated with topical treatment that needs to be typically applied once or twice a day for usually for two to three weeks. Symptom resolution is the end goal of antifungal therapy. Following are the topical treatments for fungal skin infections: Clotrimazole Ketoconazole Miconazole Terbinafine Oxiconazole Econazole

Treatment with oral therapy is important for more widespread infections or cases that show no improvement with topical treatment. Oral antifungals are expected to clear the condition in about 2 to 3 weeks.

Following are the suggested oral medications (one or more) to be used in the treatment of fungal skin infections: Terbinafine Fluconazole Itraconazole Griseofulvin Home Care For Fungal Skin Infections

You can follow some of these simple tips at home to get faster results and relief from fungal skin infections: If you are on an anti-fungal treatment, do not stop the treatment in between. Treat the affected area for as long as it is recommended by your dermatologist. With proper care and treatment, you will start noticing the results within a few days. This will help in ensuring that the ringworm does not reappear after you have stopped continuing the treatment If you happen to touch the infected area, wash your hands before touching another area of your body. Touching or scratching the infected area and then touching another area can spread the infection. Washing your hands is the best way to prevent this. Keep the infected area clean and dry at all times. The fungus thrives to grow in a warm, and moist environment, so it is advised to keep the area clean and dry. Avoid wearing clothes, socks, and shoes that make you sweat a lot. It is advised to use a different towel to dry off uninfected areas. Treat all fungal infections at the same time. If you treat only one area at a time, you can still have an infection, which can quickly spread to other areas. It is advised to change your clothes, underwear, gym wear and socks, every day. Wash the clothes before using them again. It is advised to shower after working out. Avoid sharing towels and other items of personal use. Fungal infections can easily spread to others by sharing towels, combs, and other personal items. Infected items should be either disinfected or thrown. This includes your clothes, shoes, and other personal items. If your treatment isn’t working, it is best to tell your dermatologist and keep regular follow-up.

The chances of fungal infections increase during the summer season, owing to hot and humid weather conditions and excessive sweating. Here are a few ways to help you deal with fungal infections during the summer season. Click Here!

Complications Of Fungal Skin Infections

It is rare to see complications in fungal skin infections. One such complication includes Majocchi granuloma. It is a rare skin condition in which the fungi invade your skin via a follicle and go deeper into the dermis or subcutaneous tissues of the skin. Shaving or minor cuts on your skin can predispose patients to Majocchi granuloma. Lesions arising due to Majocchi granuloma involve the hair follicles and the lesions appear as erythematous nodules or papules. These skin lesions can even turn to abscesses in severe cases. Alternative Therapies Of Fungal Skin Infections

Home remedies for fungal skin infections

1. Plumbago zeylanica (doctor bush) The whole plant is crushed with an added pinch of salt and the paste is applied externally in case of ringworm infection.
2. Cannabis sativus (ganja) Ganja or cannabis sativa is externally applied to give relief from itchy skin conditions. Hemp seed oil strengthens your skin and can resist fungal infections.
3. Aloe vera Aloe vera is known to be beneficial in various skin diseases. It is often consumed as a health drink. Aloe vera gel is effective in healing wounds and improving blood circulation in the area. Aloe vera gel also has certain properties that are harmful for certain types of fungi. It is thus effective against fungal skin infections.
4. Tea tree oil Tea tree oil can be applied topically twice a day for the treatment of bacterial and fungal infections.
5. Thyme oil Thyme oil is extracted from the herb thyme. It can be used topically as an antibacterial and antifungal agent. You can apply it over the affected area for faster relief. Living With Fungal Skin Infections

Some of the common tips and tricks for people living with fungal skin infections (especially those at high risks like diabetics and obese people) are:

1. Steer clear of high-risk activities Fungi are widespread but are more prevalent in damp places such as soil and near water bodies. If you are prone to fungal infections, it is advised to either avoid activities like gardening and swimming. Or, pay close attention to hygiene after finishing these activities.
2. Do not self medicate It has been reported that people who take antibiotics can develop fungal infections such as vaginal candidiasis. Therefore, it is important to tell your doctor if you are prone to fungal infections and avoid taking antibiotics on your own.
3. Pay attention to personal hygiene Hygiene plays an important role in preventing fungal skin infections. It is advised to avoid sharing personal items. Keep your feet clean and dry. Consult your dermatologist if you see a new rash.
4. Avoid getting fungal infections from pets Some people may get fungal infections from their pets. If you notice any new circular or irregular patches on your pet, it is best to take them to a veterinarian. This will reduce your chances of contracting the infection.
5. Take care of your overall health If you are immunocompromised or have conditions that lower your immunity, then you are at higher risk of fungal infections. Your doctor will prescribe you certain antifungal ointments and powders that will reduce your chances of getting a fungal infection. Frequently Asked Questions How will I know if it is a fungal infection? What are the causes of fungal skin infections? How long does it take for a fungal skin infection to clear up? What foods are bad for fungal infections? Why do I keep getting fungal infections on my face? Can oral antifungal drugs be taken during pregnancy? References Ringworm (Tinea). Harvard health publishing.2019 Candidiasis what is it?Harvard health publishing.Jan 2019 Jock’s itch (Tinea cruris, What is it. Harvard health publishing. Dec 2018 Urban Katelyn, Chu Sherman,Scheufele Christian ,Gregory Giesey, R.Delost. The global, regional, and national burden of fungal skin diseases in 195 countries and territories: A cross-sectional analysis from the Global Burden of Disease Study 2017.JAAD International March 2021(2); 22-27. Denise M. Aaron.Overview of Fungal Skin Infections. Merck manual consumer version.Feb 2021 Tips to Avoid Fungal Infections. Ciplamed.17 Oct 2016 Athlete’s foot: Overview.InformedHealth.org [Internet].Institute for Quality and Efficiency in Health Care (IQWiG); January 14, 2015 Jain Akansha, Jain Shubham, Rawat Swati. Emerging fungal infections among children: A review on its clinical manifestations, diagnosis, and prevention.J Pharm Bioallied Sci. 2010 Oct-Dec; 2(4): 314–320. Garrett Yee; Ahmad M. Al Aboud. Tinea Corporis.Treasure Island (FL): StatPearls Publishing; 2021 Jan Ringworm: 12 tips for getting the best result from the treatment. American academy of Dermatology Nahida Tabassum and Mariya Hamdani. Plants used to treat skin diseases.Pharmacogn Rev. 2014 Jan-Jun; 8(15): 52–60 Fungal Infections - Protect Your Health. Centers for disease control & prevention. Murlidhar Rajagopalan, Inamadar Arun, Mittal Asit, Miskeen Autar K, Srinivas C. R, Sardana Kabir et al. Expert Consensus on The Management of Dermatophytosis in India (ECTODERM India). BMC Dermatology:18(6);(2018)

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Gallbladder stones Also known as Gall stones, Gallstone disease, Cholelithiasis and Cholecystolithiasis Overview A gallbladder stone or cholelithiasis is a health condition in which pieces of solid stone-like objects develop in the gallbladder or bile duct. These gallstones are usually made up of cholesterol or bilirubin, and may trigger a sudden, intense pain in the abdomen. For some individuals, it may either develop as a single large gallstone, while for others, it may develop several small gallstones.

The primary cause of gallbladder stones is not clearly understood. However, numerous factors increase the risk of developing gallstones; which includes chemical imbalance of bile in the gallbladder, excessive secretion of cholesterol in the liver, post organ transplant adverse effects, and/or certain medications.

People who do not show any symptoms, usually don’t need any treatment. The treatment for gallbladder stones largely depends on the size and location of the gallstones. The common treatment involves dietary modification, medications, non-invasive ultrasound therapy (lithotripsy), and surgery. Key Facts Usually seen in Adults above 30 years of age Gender affected Both men and women but more common in women Body part(s) involved Gallbladder Prevalence Worldwide: 10-20% (2019) India: 6.12% (2013) Mimicking Conditions Stomach flu Gastroenteritis Mirizzi syndrome Appendicitis Ulcers Pancreatitis Gastroesophageal reflux disease Bile duct strictures Bile duct tumors Cholangiocarcinoma Gall bladder cancer Peptic ulcer disease Pancreatic cancer Necessary health tests/imaging Abdominal ultrasound Endoscopic ultrasound Complete blood count (CBC) Magnetic resonance imaging (MRI) Cholangiogram Computed tomography (CT) abdomen scan Endoscopic retrograde cholangiopancreatography (ERCP) Treatment Medications: Ursodeoxycholic acid & Chenodiol Surgical treatments: Open cholecystectomy, Laparoscopic surgery, & Endoscopic gallbladder stenting See All Symptoms Of Gallbladder Stones

Gallbladder stones symptoms differ from person to person, depending on the size and location of gallstones. The most prominent and visible gallbladder stones symptoms are sudden intensifying abdominal pain and other related digestive problems. For most people, the gall stones may remain silent and do not show any signs and symptoms. These types of silent gallstones usually do not pose any major risks of health concerns. However, if the gallstones block or get into the bile duct, they may cause other health complications. So it is always advised to consult a physician immediately for an early diagnosis and treatment.

Some of the common signs and symptoms of gallbladder stones include:

1. Sudden intensifying pain in the stomach Sudden pain in the stomach is the most common symptom of gallbladder stone. The pain usually occurs at the upper right portion of the abdomen and may radiate to other regions. Increased pressure within the gallbladder or a block in the bile duct due to gallstones may cause pain in the abdomen. This pain can last for around 20 minutes to several hours.
2. Flatulence Some people with gallstones may develop flatulence. An increased amount of gas secretion or gas buildup in the digestive system due to underlying health conditions such as gallbladder stones can also trigger flatulence.
3. Nausea and vomiting Another common symptom of gallbladder stones is nausea and vomiting. Increased pressure in the gallbladder caused by gallstones may increase the fluid imbalance in the stomach, which in turn may cause nausea and vomiting. Other gallbladder symptoms include: Pale or yellowish skin Loss of appetite Abdominal bloating Chest pain Radiating pain in the right shoulder Fever Clay-colour stools The warning symptoms that require urgent medical care include: Severe or radiating abdominal pain Yellowing of skin or whites of the eye Stomach bloating Most of the above-mentioned symptoms of gallbladder stones may resemble other gastrointestinal problems, such as ulcer, appendicitis, or pancreatitis. So early recognition and treatment of gall bladder stones are crucial to reducing the risks associated with it.

Kidney stones are not the same as gallstones. Here’s everything you need to know about kidney stones. Click To Know!

Causes Of Gallbladder Stones

The exact causes of gallbladder stones are not clearly understood. However, several factors are believed to contribute to the development of gallstones. Some possible causes of gallbladder stones include,

1. Imbalance of bilirubin in the bile Elevated levels of bilirubin, a pigment secreted by the liver, may cause the accumulation of excess bilirubin in the body tissue. This, in turn, may contribute to the formation of gallstones.
2. Excessive secretion of cholesterol Gallbladder stones develop when the liver secretes excessive cholesterol and results in the formation of cholesterol crystals, which develop into gallstones.
3. Improper emptying of the gallbladder Improper emptying of the gallbladder, overtime may lead to the formation of mucus-like gallbladder sludge. This, in turn, may eventually develop into gallstones.
4. Insufficient bile salt concentration Insufficient or imbalance in bile salt concentration correlates with an increased risk of developing gallbladder stones.
5. Diet and lifestyle Certain lifestyle factors and improper dietary practices may also lead to the formation of stones in the gallbladder. These include: Regular eating of highly processed and fried food items Alcohol consumption Stress Obesity Inactive or sedentary lifestyle Did you know? Lifestyle factors such as drinking too much of carbonated beverages, not drinking enough water and smoking can have a significant impact on your kidneys. Here’s more about the everyday habits that can harm the kidneys. Read To Know! Risk Factors For Gallbladder Stones

Gallstones develop because of the imbalance in the chemical composition of the bile inside the gallbladder. The accumulation of high levels of cholesterol in the bile over time may form small crystals (gallstones), causing pain in the abdomen.

Some of the most common risk factors associated with gall bladder stones are listed below: Smoking Men older than the age of 60 Sedentary lifestyle Pregnancy Oral contraceptives Rapid weight loss Liver disease Diabetes Obesity Metabolic disorders such as hyperparathyroidism (excessive secretion of thyroid hormone),. Individuals with a family or medical history of gallstones Eating low-fiber diet Taking certain medications that have anticholinergic effects Crohn disease, ileal resection, or other diseases of the ileum decrease bile salt reabsorption and increase the risk of gallstone formation. Other illnesses or states that predispose to gallstone formation include burns, use of total parenteral nutrition, paralysis, ICU care, and major trauma. Types Of Gallstones

The composition of gallstones is affected by age, diet and ethnicity. On the basis of their composition, gallstones can be divided into the following types: cholesterol stones, pigment stones, and mixed stones. An ideal classification system is yet to be defined.

Cholesterol stones Cholesterol stones vary from light yellow to dark green or brown or chalk white and are oval, usually solitary, between 2 and 3 cm long, each often having a tiny, dark, central spot. To be classified as such, they must be at least 80% cholesterol by weight (or 70%, according to the Japanese–classification system). Between 35% and 90% of stones are cholesterol stones.

Pigment stones Bilirubin (“pigment”, “black pigment”) stones are small, dark (often appearing black), and usually numerous. They are composed primarily of bilirubin (insoluble bilirubin pigment polymer) and calcium (calcium phosphate) salts that are found in bile. They contain less than 20% of cholesterol (or 30%, according to the Japanese-classification system). Between 2% and 30% of stones are bilirubin stones.

Mixed stones Mixed (brown pigment stones) typically contain 20–80% cholesterol (or 30–70%, according to the Japanese- classification system). Other common constituents are calcium carbonate, palmitate phosphate, bilirubin and other bile pigments (calcium bilirubinate, calcium palmitate and calcium stearate). Because of their calcium content, they are often radiographically visible. They typically arise secondary to infection of the biliary tract which results in the release of β-glucuronidase (by injured hepatocytes and bacteria) which hydrolyzes bilirubin glucuronides and increases the amount of unconjugated bilirubin in bile. Between 4% and 20% of stones are mixed.

Gallstones can vary in size and shape from as small as a grain of sand to as large as a golf ball. The gallbladder may contain a single large stone or many smaller ones. Pseudoliths, sometimes referred to as sludge, are thick secretions that may be present within the gallbladder, either alone or in conjunction with fully formed gallstones.

Practicing Dhanurasana Yoga Asana may help manage gallbladder stones better.

Have you ever thought that practicing a specific type of yoga may help you manage gallstones? According to a study, ayurvedic integrated yoga may help improve gastrointestinal mobility, reduce pain, abdomen bloating and provide relief from the signs and symptoms of gallbladder stones. Regular practicing of dhanurasana yoga or bow pose may also improve the normal functioning of the digestive system as it involves stretching of the spine. However, this pose is not usually recommended for severe gall bladder stone cases.  
Diagnosis Of Gallbladder Stones

If you are experiencing any symptoms of gallbladder stones, such as intense abdominal pain, extreme fatigue, flatulence, or stomach bloating, it is wise to consult a gastroenterologist or primary care physician. Early diagnosis and prompt treatment for gallstones reduce the risks associated with their own.

If your symptoms are mild, your physician might not recommend any tests. However, if your symptoms fail to show any improvement post-treatment or if you experience symptoms such as nausea or bloody stools, then your physician might recommend further investigation. The tests include:

Physical examination of the abdomen If you experience any symptoms, your physician might perform a physical examination of your abdomen. Assessment of your abdomen may provide critical information about the internal organs. Some of the common physical examination for gallstones involves, Evaluation of your physical appearances, such as yellow discolouration of skin and sclera (white layer of the eye). Checking your vital signs such as blood pressure, body temperature, heart rhythm, and other signs of gallstones in your body Examination of your abdomen for tenderness and distensions. Abdominal ultrasound Ultrasound, a non-invasive imaging procedure, is commonly used to diagnose the signs of gallstones. This test involves the use of high-frequency ultrasounds to visualize the organs and structures within the abdomen.

Endoscopic ultrasound Endoscopic ultrasound (EUS) is also an accurate and relatively noninvasive technique to identify stones in the distal common bile duct. Sensitivity and specificity of CBD stone detection are reported in range of 85%-100%.

Complete blood count (CBC) The blood test may help reveal the cause of gastrointestinal obstruction. The elevated levels of bilirubin and cholesterol in the blood test may also help detect infection, pancreatitis, and other related abnormalities in the gallbladder.

Magnetic resonance imaging (MRI) An MRI scan of the abdomen can help detect the stones in the gallbladder. This test involves the use of strong magnetic fields and radio waves to create images of the internal organs. It is usually an outpatient procedure. So, you can go home the same day as the test.

Cholangiogram Cholangiogram, also known as DISIDA (diisopropyl iminodiacetic acid) scan or gallbladder radionuclide scan, uses radioactive dye and a special scanning probe to detect small stones that may be missed on other imaging techniques. This scanning method is commonly used to detect and locate blocks in the bile.

Computed tomography (CT) abdomen scan During this procedure, your doctor uses a special x-ray probe and a computer to create a cross-sectional image of the gallbladder. These images may help physicians spot ruptures (tears in the gallbladder wall) and infections in the gallbladder.

Other imaging tests include: Abdominal X-ray Oral cholecystography Hepatobiliary iminodiacetic acid (HIDA) scan Endoscopic retrograde cholangiopancreatography (ERCP) To get the right diagnosis, it is important to consult the right doctor. Consult India’s best doctors online. Consult Now!

Celebs affected Manoj Kumar Veteran Bollywood actor Manoj Kumar underwent gall bladder surgery in the year 2013. Bharti Singh Bharti Singh, an Indian comedian and television personality, was admitted to the hospital after complaining of stomach ache. She was diagnosed with gallstones. Jack Black The famous American actor, comedian, musician, and songwriter was also diagnosed with gallbladder stones. He underwent gallbladder removal surgery very early in his career. Dalai Lama The highest spiritual leader of Tibet, Dalai Lama, underwent surgery for the removal of gallbladder stones in the year 2008. Prevention Of Gallbladder Stones

Although there are no definite steps to prevent gallbladder stones completely, some of the following preventive measures may help you manage the condition and reduce its implications.

1. Consume balanced diet The food we eat has a huge impact on the health of the gallbladder. A 2020 study on the association of diet with symptomatic gallstones has reported that high consumption of high saturated fats increases the risk of gallstones. Hence, eating a healthy diet packed with all vital nutrients is crucial for preventing gallstone formation.
2. Maintain healthy body weight Being obese or overweight puts you at a higher risk of developing a gallbladder stone. Consult a nutritionist or a doctor who may help you chart out a proper diet plan to decrease the frequency of disease.
3. Don’t skip your meal Skipping your meal on a regular basis can cause adverse effects on health. Especially for people with gallbladder diseases, skipping meals may cause stress buildup in the bladder, which may lead to serious health complications. In general, it is advised to stick to mealtimes every day.
4. Be active A sedentary lifestyle or being physically inactive can lead to the development of gallstones and many other health complications. Therefore, you should incorporate moderate exercises like jogging, stretching, and yoga to reduce your risk of gallstone.
5. Try to lose weight gradually Rapid weight loss may trigger cholesterol secretion in the body. Especially for an obese patient who has undergone bariatric surgery (gastric bypass to lose weight), the sudden weight loss may increase the risk of developing gallstones. Thus, it’s important to lose weight in a healthy, safe and gradual manner.

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1. Take preventive medication if necessary Gallbladder stones have a multifactorial etiology, and it shares similar symptoms with other related gastrointestinal disorders. However, if the symptoms are recognized as soon as possible, early interventions can reduce the risk of complications. Specialist To Visit

The signs of gallbladder stones often resemble those caused by other gastrointestinal conditions. In addition to that, some gallstones do not show any signs and remain silent. In such cases, the symptoms of gallbladder stones can rapidly get worse or lead to serious health complications.

Early diagnosis of gallbladder stones helps prevent complications and increases the outcomes of surgery. So if you are bothered about symptoms or experiencing any warning signs of gallbladder stones, it is always better to seek immediate professional help to eliminate the progression of the gallstones.

Specialists that can help manage gallbladder stones include: Gastroenterologist General physician General surgeon Gastrointestinal surgeon If you or anyone in your family are experoeicng any symptoms of gall bladder stones, seek medical help immediately. Consult Now!

Treatment Of Gallbladder Stones

People who have silent gall bladder stones (asymptomatic gallstones) show mild symptoms and may not require any treatment. However, for people with gallstone complications and having intense pain in the abdomen, the following treatments may be required:

Nonsurgical treatments Medications The medications used to treat the gallbladder either work by breaking the cholesterol accumulation in the stomach acids or decreasing the cholesterol secretion in the bile. The most commonly used medicines for gallbladder stones include:

Ursodeoxycholic acid: Ursodeoxycholic acid or ursodiol is a naturally-occurring bile acid effective in the prevention of gallstones. It works by dissolving the excess cholesterol or gall stone crystals in the gut.

This class of medications is approved by the FDA for the treatment of gallstones. However, it may require a longer time to work. So the use of these medications is only considered for mild and less serious cases.

Chenodiol: Chenodiol or Chenodeoxycholic acid is also a naturally occurring bile acid used to treat gallstones. It works by preventing the secretion of excess cholesterol in the liver that develops into gallstones.

However, the use of this medication does not guarantee immediate recovery or results. It is commonly used by people who cannot undergo gallbladder surgery.

Other non-FDA approved medications to treat small gallbladder stones include:: Actigall Reltone Extracorporeal shock wave lithotripsy Extracorporeal Shock Wave Lithotripsy is a non-invasive procedure that uses pressured waves to break gallstones externally. However, this technique involves the use of high-tech equipment and is rarely used along with other treatment methods.

Surgical treatments Open cholecystectomy: One of the effective methods to cure gallstones is surgery. Surgical treatment usually involves removal of the gallbladder to avoid recurrence of gallstones.

However, like other surgery, gallbladder surgery also comes with its own risk of complications.The most common complication is an internal bleeding injury to the bile ducts, infection. For which you may need one or more additional operations to repair the bile ducts.

Laparoscopic surgery (cholecystectomy): Laparoscopic surgery, often known as keyhole surgery, is a highly effective technique widely used to treat gallbladder stones. It involves the use of a special probe to access the internal organs.

The main advantage of laparoscopic surgery over traditional open surgery is that it requires minimal opening and a small incision to perform surgery. This, in turn, eliminates the major risks of open surgery such as infection, internal bleeding, or delayed recovery.

Endoscopic gallbladder stenting: Endoscopic gallbladder stenting is effective for elderly patients with gallbladder diseases who are poor surgical candidates. This procedure uses stents (metal or plastic tube inserts) to keep the bile duct narrowed by gallstones open.

Gallbladder stenting may also help resolve the symptoms caused by gallstones. Did you know? Breaking a large meal into small meals has numerous health benefits ranging from stabilizing blood sugar levels to boosting the overall body’s metabolism. According to the article published in the Nutrition Journal, the frequency and timing of the diet play an important part in gallstone formation. Following healthy eating habits, fasting, regular meal frequency, and timing may help prevent the occurrence of gallbladder stones. Home-care For Gallbladder Stones

Diet plays a crucial role in the management and treatment of gallbladder stones. Here are some dos and don’ts you need to follow to help your body manage gallstones symptoms:

Dos Consume food rich in fiber, such as vegetables and fruits. Don’t miss out on micronutrients, consume a well-rounded diet such as legumes and whole grains. Keep your blood pressure under control. Make sure to break your large meal into small meals—for example, instead of eating one large meal, break it into 3 small meals. Practice low intense stretch exercises to help proper digestion. Make sure to chew your food slowly and properly. Stay hydrated, drink lots of water. Herbs such as Saindhava lavanam and peppermint may help you manage the signs of gallstones. Don’ts Eat too many fried, spicy, or ready-made packed food items like pasta, noodles, polished rice, and sugar. Drink aerated cool drinks such as soda and ice beverages, excessively Smoke or consume alcohol Perform high intense physical activities like weight lifting, sprinting, or boxing Eat high fat or calcium-rich food Self-medicate Complications Of Gallbladder Stones

Usually, asymptomatic gallstones do not cause any complications. However, if the symptoms are left untreated, it can lead to severe complications. According to the Nigerian Journal of Surgery, the medical complications associated with gallbladder stones are as follows: Inflammation of the gallbladder can lead to a more serious medical condition called cholecystitis Blockage of bile duct resulting in bile infection or jaundice Gallbladder cancer Blockage in the pancreatic duct leading to pancreatitis, a serious medical condition where the pancreas get inflamed due to the presence of blockage Small bowel obstruction or gallstone ileus, a rare but serious complication where the intestine losses its ability to contraction Mirizzi’s syndrome, a condition where the bile stone becomes impacted with the neck of the gallbladder Internal bleeding or gastrointestinal distress Alternative Therapies For Gallbladder Stones

Home remedies for Gallstones Here are a few quick home remedies to control and get relief from gallstones. 1. Turmeric (haldi) Turmeric has potent anti-inflammatory properties. The active compound of turmeric curcumin is scientifically proven to have health benefits.

Tip: Take warm water or milk infused with 3 g of turmeric after meals. This drink can help with gut inflammation and gallstone problems

1. Aloe vera Aloe vera leaves are enriched with antioxidants and vitamins. Tip: Extract the gel from aloe vera leaves. Boil a cup of leaf extract in water. Add salt to taste. Drink this concoction two times a day. This drink can help fight acid reflux, gas trouble, and other symptoms of gallstones.
2. Gokshura Gokshura is loaded with a variety of Saponins that slow down the progression of the galls stones.

Tip: Taking Gokshura with Ashwagandha and Shilajit as Gokshura suranum or simply as a powdered form can help detoxify the gallbladder.

1. Black pepper (kali mirch) Black pepper neutralizes the excess acid and helps regulate the bile secretion in the liver. It also contains numerous medicinal compounds such as piperine which improves the proper functioning of the gallbladder.

Tip: Drink a glass of black pepper with warm water every day after meals if you are prone to frequent stomach distress.

1. Onion seeds (kalonji) Kalonji contains antioxidant thymoquinone, which aids in reducing abdomen pain, infection, and gallstones.

Tip: Add a teaspoon of Kalonji oil to around 2-3 glasses of water and boil. Strain it and drink this water at regular intervals post meals/breakfast for quick pain relief. 6. Cucumber beet juice People with gallstones may have increased bile or cholesterol secretion and suffer from indigestion problems. Cucumber beet juice serves as an excellent source of remedy for this.

Tip: Mix equal volume of cucumber, beetroot, carrot. Dilute it by adding glasses of water. Drink this water at regular intervals post meals/breakfast to replenish your body. 7. Dandelion tea Dandelion tea has antibacterial and antimicrobial properties that help fight gastric infection. It also has numerous positive benefits on your digestive system.

Tip: Add 10g of dry Dandelion leaves to around 2-3 glasses of water and boil. Strain it and drink. This boiled water can also be taken as a natural substitute for coffee. 8. Pear Pear is loaded with antioxidants and antimicrobial properties that help fight the symptoms of gallbladder stones.

Tip: Make fresh pear juice. Strain it and drink. Drinking pear juice at regular intervals (weekly once) may reduce the formation of bile stones and cholesterol deposits.

Yoga for gallbladder stones Some common yoga poses for peptic ulcers include the following: Bhujangasana (Cobra Pose) Dhanurasana (Bow Pose) Paschimottanasana (Seated forward bend) Sarvangasana (Shoulderstand) Shalabhasana (Locust Pose) Did you know? Drinking lemon juice regularly keeps you hydrated throughout the day. In addition to that, lemon juice has numerous health benefits, such as preventing gallstone formation and aiding in digestion and regulation of cholesterol secretion in the liver. According to an article published in the Scientific report Journal, lemon juice is loaded with nutrients, including vitamin C, B-complex vitamins, calcium, iron, magnesium, potassium, fiber, and has anti-aging properties. Living With Gallbladder Stones

If you have been diagnosed with gallbladder stones, your physician will provide the right treatment plan. However, making significant diet and lifestyle changes along with medication are also crucial. With adequate treatment and care, gallstones heal over time. However, you need to follow a high fiber and low salt diet to reduce the chances of relapse.

In addition, here are a few tips that can help you manage and prevent gallbladder stones. Stop smoking Moderate alcohol consumption Maintain healthy BMI (Body Mass Index) limit Stay hydrated Avoid eating unhealthy fats Don’t skip meals Take all the medications as recommended by your doctor. Seek professional help if need Participate in support groups Frequently Asked Questions Is gall bladder stones a serious medical condition? How many types of gallstones are there? What is the role of the gallbladder? Can people with gallstones exercise? Who is more likely to get gallbladder stones? Is turmeric beneficial in the case of gallstones? Can gallbladder stones be treated without operation? How long does gallbladder surgery take? What are the side effects of gallbladder surgery? References Everhart JE, Ruhl CE. Burden of digestive diseases in the United States. Part III: liver, biliary tract, and pancreas. Gastroenterology 2009; 136: 1134-1144. Everhart JE, Khare M, Hill M, Maurer KR. Prevalence and ethnic differences in gallbladder disease in the United States. Gastroenterology 1999; 117: 632-639. Angelico F, Del-Ben M, Barbato A et al. Ten-year incidence and natural history of gallstone disease in a rural population of women in central Italy. GREPCO. Ital J Gastroenterol 1997; 29: 249-254. Acalovschi M, Dumitrascu D, Clauser I, Ban A. Comparative prevalence of gallstone disease at 100-year interval in a large Romanian town. Dig Dis Sci 1987; 32: 354-357. Aerts R, Penninckx F. The burden of GD in Europe. Aliment Pharmacol Ther 2003; 18/suppl.3: 49-53. Stinton LM, Shaffer EA. Epidemiology of gallbladder disease: cholelithiasis and cancer. Gut and Liver 2012; 6: 172-187. Tazuma S. Epidemiology, pathogenesis, and classification of biliary stones (common bile duct and intrahepatic). Best Pract Res Clin Gastroenterol 2006; 20:1075-1083. Diehl AK, Rosenthal M, Hazuda H et al. Socioeconomic status and the prevalence of clinical gallbladder disease. J Chron Dis 1985; 38:1019-1026. Freeman J, Boomer L, Fursevich D, Felix A. Ethnicity and insurance status affect health disparities in gallstone patients. J Surg Res 2012; 175: 1-5. Russo MW, Wei JT, Thiny MT et al. Digestive and liver diseases statistics, 2004. Gastroenterology 2004; 126: 1448-1453. National Institutes of Health Consensus Development Conference Statement on gallstones and laparoscopic cholecystectomy. Am J Surg 1993; 165: 390-398. Lammert F, Neubrand MW, Bittner R et al. S3-guidelines for diagnosis and treatment of gallstones. German Society for Digestive and Metabolic Diseases and German Society for Surgery of the Alimentary Tract. Z Gastroenterol 2007; 45: 971-1001. Nakeeb A, Comuzzle AG, Martin L et al. Gallstones: genetics versus environment. Ann Surg 2002; 235: 842-849. Katsika D, Grjibovski A, Einarsson C et al. Genetic and environmental influences on symptomatic GD: a Swedish study of 43,141 twin pairs. Hepatology 2005; 42:1138-1143. Buch S, Schafmayer C, Volzke H, et al. A genome-wide association scan identifies the hepatic cholesterol transporter ABCG8 as a susceptibility factor for human gallstone disease. Nat Genet 2007; 39,:995-999. Grünhage F, Acalovschi M, Tirziu S et al. Increased gallstone risk in humans conferred by a common variant of hepatic ATP-binding cassette transporter for cholesterol. Hepatology 2007; 46: 793-801. Finucane MM, Stevens GA, Cowan MJ, et al. National, regional, and global trends in body-mass index since 1980: systematic analysis of health examination surveys and epidemiological studies with 960 countryyears and 9·1 million participants. Lancet 2011; 377(9765): 557-67. Centers for Disease Control and Prevention (CDC). Vital signs: state-specific obesity prevalence among adults - the United States, 2009. MMWR Morb Mortal Wkly Rep 2010; 59: 951-955. Danaei G, Finucane MM, Lu Y, et al. National, regional, and global trends in fasting plasma glucose and diabetes prevalence since 1980: systematic analysis of health examination surveys and epidemiological studies with 370 country-years and 2.7 million participants. Lancet 2011; 378(9785):31-40. Wild S, Roglic G, Green A et al. Global prevalence of diabetes. Estimates for the year 2000 and projections for 2030. Diabetes Care 2004; 27: 1047-1053.

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Gastritis Overview Gastritis is a digestive disorder that involves inflammation, irritation and erosion in the stomach lining. It can occur suddenly (acute) or gradually (chronic).

Symptoms of gastritis include abdominal pain, nausea, vomiting, bloating, loss of appetite, and a feeling of fullness. In some cases, gastritis can lead to bleeding, resulting in blood in vomit or dark stools.

The most common causes of gastritis include H.Pylori bacterial infection and long-term use of Nonteroidal anti-inflammatory drugs (NSAIDs) like aspirin, ibuprofen.

Individuals experiencing persistent or severe symptoms should seek medical attention for proper evaluation and personalized guidance. Healthcare professionals can provide tailored treatment plans based on specific needs and medical and personal history.

The treatment goal of gastritis is to address the underlying cause and reduce the amount of acid in the stomach to relieve symptoms, allowing the stomach lining to heal. Lifestyle changes such as avoiding triggers, adopting a healthy diet, and managing stress can aid in management and promote healing. Key Facts Usually seen in Individuals between 45 - 64 years of age Gender affected Both men and women but more common in women Body part(s) involved Stomach Mimicking Conditions Peptic ulcer disease Gastric cancer Cholecystitis Zollinger-Ellison syndrome Dyspepsia Gallstone disease Pancreatitis Gastric involvement with inflammatory bowel disease, particularly Crohn disease Menetrier disease Lymphoma Celiac disease Multiple endocrine neoplasias Necessary health tests/imaging Esophageal pH test Lab tests: Blood tests, stool test Imaging tests- Upper endoscopy Biopsy Barium swallow test Treatment Antibiotic medications: clarithromycin, amoxicillin, metronidazole Proton pump inhibitor (PPI): Esomeprazole, lansoprazole, omeprazole, pantoprazole, rabeprazole H2 blockers: Cimetidine, ranitidine, nizatidine, famotidine Antacids: Aluminium hydroxide , magnesium hydroxide, calcium carbonate, sodium bicarbonate Specialists to consult General physician Internal Medicine specialist Gastroenterologist Symptoms Of Gastritis Gastritis refers to the inflammation of the lining of the stomach. This inflammation can disrupt the normal production of stomach acid and digestive enzymes, which are important for the breakdown and digestion of food. As a result, individuals with gastritis may experience the following symptoms:

Piercing, gripping pain in the stomach Feeling of fullness Burning feeling in the stomach between meals or at night Burning feeling in the chest due to acid reflux Belching or burping Lack of appetite Stomach bloating Hiccups Nausea and vomiting Diarrhea

Symptoms of severe gastritis may include: Blood in vomit Black, tarry stools Chest pain Shortness of breath Weakness High fever Inability to take any foods or liquids by the mouth. Did you know there is a potential link between covid 19 and digestive conditions? The SARS-CoV-2 virus, which causes COVID-19, can affect various parts of the digestive system. Individuals with pre-existing gastritis or other digestive conditions may be at a higher risk of experiencing adverse outcomes if they contract COVID-19. Learn more about COVID-19 Types of Gastritis There are broadly two types of gastritis, acute and chronic.

1. Acute gastritis It is characterized by a sudden inflammation of the stomach lining, commonly caused by irritants or infections. It leads to symptoms like nausea, vomiting, bloating, gas, weight loss, and loss of appetite. Simple treatments and removal of the underlying cause usually result in a quick resolution of symptoms.
2. Chronic gastritis It refers to persistent, low-grade inflammation and damage to the stomach lining, often associated with H. pylori infection. People with chronic gastritis often have no symptoms or only mild symptoms. Symptoms might include tiredness and anemia.

Note: Gastritis refers to inflammation of the stomach lining, while antral gastritis specifically involves inflammation of the antrum, which is the lower part of the stomach near the entrance to the small intestine.

Did you know that gastritis can be common during pregnancy? Gastritis can develop during pregnancy due to hormonal and physical changes. The pressure exerted on the stomach by the growing uterus also exacerbates gastritis symptoms. Explore our exquisite collection of pregnancy care essentials and embrace the beautiful journey of pregnancy. Buy Now Causes Of Gastritis

A. Major Causes and Risk factors Infectious agents especially Helicobacter pylori, and NSAIDs are responsible for the majority of people with gastritis:

1. H.Pylori-associated gastritis H.pylori gastritis is one of the most common causes of gastritis. It occurs due to the presence of Helicobacter pylori (H. pylori) bacteria in the stomach that infect the stomach lining and cause inflammation. It is often contracted through contaminated food or water.
2. Nonsteroidal anti-inflammatory drugs (NSAIDs) Frequent or long-term use of NSAIDs such as aspirin, ibuprofen, or naproxen can irritate the stomach lining, causing erosive gastritis. These medications can disrupt the protective mechanisms of the stomach, leading to inflammation.

Prolonged use of painkillers can affect the regulation of prostaglandin hormones. Prostaglandins help regulate stomach mucus and substances that neutralize the gastric acid. Without enough prostaglandin, the stomach wall loses protection from acid.

Note: Combined use of painkillers with steroids can worsen the damaging effects on the gastric lining.

B. Other Causes and Risk factors The following factors can also contribute to the development of gastritis. Chronic gastritis is a condition that may develop due to repeated or persistent exposure to many of these factors.

Virus: Viruses such as enterovirus, epstein-Barr virus, can cause viral gastritis.

Parasitic infections: Parasites such as cryptosporidium are also known to cause gastritis.

Fungal infections: Fungal infections such as candidiasis can also cause gastritis. Fungal infections typically occur in individuals with weakened immune systems.

Alcohol: Heavy or prolonged alcohol consumption can irritate and damage the stomach lining, making individuals more susceptible to alcohol gastritis.

Smoking: Smoking has been identified as a risk factor for gastritis. It can weaken the protective lining of the stomach and impair the healing process, increasing the risk of inflammation.

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Stress: While stress itself may not directly cause gastritis, it can worsen symptoms and increase the risk of developing the condition. Chronic stress may influence the production of stomach acid and disrupt the normal functioning of the digestive system.

Autoimmune disorders: In some cases, the immune system may mistakenly attack the cells of the stomach lining, leading to autoimmune gastritis. This type of gastritis is less common but can be chronic and severe.

Systemic conditions: Certain systemic diseases can also contribute to the development of gastritis. Some of them are discussed below: Crohn’s disease (a type of inflammatory bowel disease) Vasculitis (inflammation of blood vessels) Sarcoidosis (growth of inflammatory cells) Ischemia (reduced blood flow)

Bile reflux: When bile from the small intestine flows back into the stomach, it can irritate and inflame the stomach lining, causing gastritis.

Radiation Therapy: Exposure to high doses of radiation, such as during radiation therapy for cancer treatment, can cause gastritis. The radiation damages the cells of the stomach lining, leading to inflammation and discomfort.

Obesity: While obesity itself is not considered a direct risk factor for gastritis, it can still play an indirect role in its development. Obesity-related factors such as acid reflux, increased stomach pressure, and unhealthy dietary choices have the potential to irritate the stomach lining and exacerbate symptoms of gastritis.

Do you know the difference between gastritis and gastroenteritis? Gastritis is inflammation of the stomach which is mostly but not always caused by an infection. Whereas, gastroenteritis is inflammation of the stomach and intestines, which is principally caused by an infection. Read more about gastroenteritis. Diagnosis Of Gastritis Your doctor will take a thorough medical history, including any medications you are taking and your family history. This will be followed by a physical examination.

To diagnose gastritis, doctors typically use a combination of the following tests:

1. Esophageal pH test This test helps measure stomach acid by checking how much stomach acid enters through the food pipe and how long it stays in the stomach.
2. Lab tests CBC - This test checks for high levels of white blood cells indicative of inflammation or infection. The test also looks for anemia, or a low red blood cell count, an indicator of blood loss, which can be linked to gastritis.

Stool test- It checks for H. Pylori or other infections. It is also useful in ruling out other infections that cause chronic diarrhea.

H. Pylori Breath test- In this test, you are given a special solution to swallow. If the H. pylori bacteria are present in the gut, gas by-products are released and detected in your breath.

Helicobacter Pylori Antibodies Panel (IgA, IgG & IgM) test - This test is used to detect the presence of IgA, IgG and IgM antibodies against H. pylori infection.

1. Imaging tests Upper Endoscopy- During this procedure, a small flexible tube (known as an endoscope) is inserted down the throat to examine the lining of the esophagus, stomach, and small intestine.

Barium swallow test (esophagram): In this procedure, you need to drink a liquid barium mixture. An X-ray of the chest and upper abdomen is then done to help identify any physical excessive alcohol consumption or any other abnormalities in the stomach or esophagus.

1. Biopsy: A small piece of tissue is removed from the inside of the stomach for further testing and analysis. Celebs affected Deepika Samson Hindi Tv Soap actor, Deepika Samson once shared her experience of back pain which was an the outcome of severe gastritis. Lady Gaga Lady Gaga, a renowned singer and actress, revealed in 2013 that she had to cancel several tour dates due to a severe case of gastritis. Her condition improved with the help of relaxation techniques. Prevention Of Gastritis

While it is not possible to completely eliminate the risk of gastritis, there are measures you can take to reduce it. Here are some tips that may help prevent gastritis:

1. Make dietary changes A clean, well-balanced wholesome diet is the cornerstone of overall health and immunity and can help evade gastritis. At the same time, it is important to identify and avoid any specific foods or beverages that seem to worsen your symptoms.

Consume Fiber-rich foods Flavonoid and antioxidant-rich fruits, vegetables, and beverages Foods high in B vitamins, calcium, and protein like almonds, whole grains, leafy greens, and lean meats. Healthier cooking oils like olive oil, ghee 6 to 8 glasses of filtered water daily

Avoid or limit Refined foods such as white breads, pastas, sugar etc. Excessive intake of oily and spicy foods. Refined white sugar and sugar-containing items like cakes, muffins, cookies etc. Stomach irritants like coffee, alcohol, and carbonated drinks. Overeating to prevent excessive acid production and strain on digestion.

1. Avoid excessive use of NSAIDs Excessive and prolonged use of NSAIDs, commonly used for pain relief, are a main culprit when it comes to gastritis. It is crucial to adhere to healthcare professional’s instructions when using NSAIDs, avoid long-term usage without medical supervision, and consider alternative pain management methods whenever available.
2. Reduce the risk of H. pylori infection from contaminated food and water Practice good hand hygiene, wash hands before handling food, after using the bathroom, and after contact with potentially contaminated surfaces. Cook meat thoroughly, avoid cross-contamination, and promptly refrigerate perishable foods. Drink safe, clean water and avoid consuming raw or undercooked foods.
3. Quit smoking Smoking weakens the stomach lining and impairs healing. Seek supportive measures like counselling, nicotine replacement therapy, and behavioral therapies for quitting.

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1. Limit or abstain from alcohol Excessive intake of alcohol can cause irritation and inflammation of the stomach lining. It is important to avoid engaging in binge drinking. Consumption of alcohol should always be practiced in moderation. Men should limit their alcohol intake to a maximum of two drinks per day, while women and the elderly should not exceed one drink per day. However, it is advisable to consider complete abstinence from alcohol, particularly if one has liver disease.
2. Manage stress effectively Long term stress can worsen gastritis symptoms and delay healing. Techniques like deep breathing exercises, meditation, yoga, and mindfulness-based stress reduction can help manage stress levels and promote relaxation. Engaging in activities that bring joy and practicing good self-care habits can also be beneficial.

Try some relaxation techniques to manage stress and stress-induced gastritis. Read Here Do you know eating smaller meals can help manage gastritis? Yes, consuming smaller, more frequent meals throughout the day can be helpful in managing gastritis. It’s recommended to eat every two to four hours, avoiding skipping breakfast, and finishing the last meal at least three hours before bedtime. Develop healthy eating habits, and feel the difference! Watch This Video Doctor To Visit

You must consult a doctor if you experience the following symptoms especially more than twice a week or on a regular basis : Worsening or right lower belly pain Sudden chest pain spreading to the back, neck, shoulder, or arm Frequent vomiting Blood in stool or vomit Weakness, or dizziness Unexplained weight loss Feverish, or worsening of symptoms or new symptoms.

Specialists that can help manage gastritis include: General physician Internal medicine specialist Gastroenterologist

A general physician may evaluate your symptoms initially, and may refer you to an internal medicine specialist or a gastroenterologist for specialized care.

An internal medicine specialist and a gastroenterologist can help in diagnosing and treating conditions like gastritis, providing expert care for the gastrointestinal tract and associated organs.

Consult India’s best doctors online. Click here to book an appointment. Consult Now Treatment Of Gastritis The treatment of gastritis depends on the underlying cause and severity of the condition. The treatment starts with identifying the possible causes of acute gastritis, such as long-term use of NSAIDs, excessive alcohol consumption, or H. pylori infection. The following medications and supplements are usually prescribed for the management of gastritis:

A. Medications 1. Antibiotics: If an infection causes gastritis, such as H. pylori, the following antibiotics may be prescribed to eliminate the bacteria Clarithromycin Amoxicillin Metronidazole

1. Proton pump inhibitor (PPI): Proton pump inhibitors (PPIs) aid in relieving the symptoms of gastritis by decreasing gastric acid production. Examples include: Esomeprazole Lansoprazole Omeprazole Pantoprazole Rabeprazole

Note: Doctors commonly use “triple therapy” to treat H. pylori-related gastritis and ulcers. This therapy includes a combination of a proton pump inhibitor and two antibiotics. In most cases, triple therapy will successfully eliminate the infection. If additional treatment is required, doctors usually recommend quad therapy. This involves one PPI and three different antibiotics.

1. Antacids: Antacids neutralize the acid already in your stomach. It may relieve heartburn or indigestion but will not treat an ulcer. A few antacids include: Aluminum hydroxide Magnesium hydroxide Calcium carbonate Sodium bicarbonate
2. Histamine-2 (H2) blockers: H2 blockers reduce acid production. These are usually more effective than antacids in relieving symptoms, and many people find them far more convenient. H2 blockers include: Cimetidine Ranitidine Nizatidine Famotidine

Note: Doctors may also prescribe sucralfate, which helps to coat the stomach lining and treat stomach ulcers.

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B. Nutrition and Dietary Supplements Nutrition and diet go hand in hand with the medical management of gastritis. The following supplements may also be prescribed with digestive health:

1. Probiotics: High-quality probiotic supplements and foods like yogurt or kefir contain beneficial bacteria that can help restore the natural balance of gut flora. They may help reduce inflammation and promote a healthy stomach lining.

Check out our prebiotics and probiotics supplement range. Explore Here

1. Omega-3 fatty acids: Omega-3 fatty acids have anti-inflammatory properties and can help reduce inflammation in the stomach. They are commonly found in fatty fish like salmon, mackerel, and sardines. You may also consider taking a fish oil or algae-based omega-3 supplement.

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1. Vitamin C: Vitamin C is an antioxidant that can help protect the stomach lining from oxidative damage. It also plays a role in tissue repair. Include foods rich in vitamin C in your diet, such as citrus fruits, strawberries, kiwi, and bell peppers. If needed, vitamin C supplement can also be taken.

Explore our widest range of nutritional supplements. Buy Now Home-care For Gastritis Here are some home remedies that may help alleviate symptoms of gastritis.

Ginger (Adrak): Ginger has anti-inflammatory properties that may help reduce irritation and inflammation in the stomach. It can be consumed in different forms, such as ginger tea, ginger ale, or by adding fresh ginger to your meals.

Peppermint (Pudina): Peppermint has a soothing effect on the stomach and may help alleviate symptoms of gastritis. Drink peppermint tea or suck on peppermint candies, but be cautious if you have gastroesophageal reflux disease (GERD) as peppermint can worsen symptoms for some individuals.

Chamomile tea: Chamomile has anti-inflammatory and calming properties that can help ease digestive discomfort. Drink chamomile tea between meals to soothe the stomach.

Aloe vera: Aloe vera juice may help reduce inflammation and promote healing of the stomach lining. Drink a small amount of aloe vera juice (about 1/4 cup) before meals.

Garlic (Lehsun): Garlic possesses antimicrobial properties that inhibit the growth of Helicobacter pylori. Consuming raw crushed garlic is another good option to help alleviate symptoms of gastritis.

Liquorice (Mulethi): It protects your stomach lining and reduces the chances of ulcer formation or gastritis.

Cumin (Jeera) water: It has anti-inflammatory and anti-bacterial properties which help reduce gastritis symptoms.

Broccoli: It has antibacterial properties and is known to help relieve gastritis symptoms.

Turmeric (Haldi): Turmeric contains a compound called Curcumin which possesses anti-inflammatory and antioxidant properties. It also inhibits the growth of Helicobacter pylori.

Black seed oil: It has antioxidant and anti-inflammatory properties which help in reducing inflammation in the stomach and manage gastritis.

Note: Remember, these home care remedies may provide some relief but they do not replace professional medical advice. Complications Of Gastritis

Acute gastritis usually does not cause any serious or long-term health problems. However, if it happens frequently, is left unattended, and becomes chronic, it can lead to: Peptic ulcers: Gastritis can lead to the development of open sores on the stomach lining or the upper part of the small intestine, known as peptic ulcers.

Atrophic gastritis: Chronic gastritis, including H. pylori gastritis and autoimmune gastritis, can progress to atrophic gastritis. In this condition, ongoing inflammation leads to the destruction of stomach glands responsible for producing acid and enzymes.

Iron-deficiency anemia: Chronic bleeding from the stomach due to gastritis can cause iron deficiency anemia, where there is a decrease in red blood cells or hemoglobin due to inadequate iron levels.

Vitamin B12 deficiency: Autoimmune gastritis, a type of gastritis, can lead to vitamin B12 deficiency as the immune system mistakenly attacks cells that produce intrinsic factors, a protein required for vitamin B12 absorption.

Deficiency of other vitamins and minerals: Atrophic autoimmune gastritis can lead to deficiencies in vitamins C, D, and folic acid, as well as minerals like zinc, magnesium, and calcium.

Gastric bleeding: Severe inflammation and erosions in the stomach lining can result in gastrointestinal bleeding, leading to the presence of blood in vomit or dark stools.

Gastroesophageal reflux disease (GERD): Gastritis can contribute to the development of GERD, a condition where stomach acid flows back into the esophagus, causing heartburn and other symptoms.

Gastric polyps: These are small masses of cells that form on the lining of the stomach. Does gastritis increase the risk of stomach cancer? Yes, long-term, untreated gastritis, particularly caused by H. pylori infection, can increase the risk of developing stomach (gastric) cancer. Regular monitoring and appropriate treatment of gastritis can help reduce this risk. You must know some common signs and symptoms that could be suggestive of cancer. Read Here Alternative Therapies For Gastritis Here are some complementary and alternative therapies that may be beneficial for gastritis:

Acupuncture It is a technique that involves inserting thin needles into specific points on the body. It is believed to stimulate the body’s natural healing processes and improve energy flow. Some studies suggest that acupuncture may help reduce inflammation and relieve symptoms associated with gastritis. Seek a qualified acupuncturist who has experience in treating digestive disorders. Living With Gastritis

Living with gastritis can be challenging, but with proper management and lifestyle adjustments, you can effectively cope with the condition. Here are some tips to help you live with gastritis:

Follow your healthcare provider’s recommendations: It’s important to work closely with your healthcare provider to develop a treatment plan that suits your specific needs. Follow their advice regarding medication usage, lifestyle modifications, and dietary recommendations.

Take prescribed medications: Your healthcare provider may prescribe medications to reduce stomach acid production, neutralize acid, or treat any underlying infection. Take these medications as directed and report any side effects or concerns to your healthcare provider.

Stay hydrated: Drink plenty of water throughout the day to keep your body hydrated and promote healthy digestion. Avoid excessive consumption of carbonated beverages, as they can increase stomach acid production and worsen symptoms.

Practice portion control: Overeating can put additional strain on your stomach and aggravate gastritis symptoms. Eat smaller portions and avoid eating late at night.

Get enough sleep: Aim for a consistent sleep schedule and ensure you’re getting enough quality sleep. Sleep deprivation and irregular sleep patterns can contribute to stress and exacerbate symptoms.

Keep a symptom diary: Consider keeping a journal to track your symptoms, food triggers, and any patterns you notice. This can help you identify specific triggers and make informed decisions about your diet and lifestyle.

Reach out for support: Living with gastritis can be challenging, both physically and emotionally. Seek support from friends, family, or support groups who can provide understanding, encouragement, and advice.

Adopt a gastritis-friendly diet: Avoid foods that trigger or worsen your symptoms.

Include food in your diet: High-fiber food, such as whole grains, fruits, vegetables, and beans Low-fat food, such as fish, lean meats, and vegetables Less acidic food, such as vegetables and beans Probiotic food, such as kombucha, yogurt etc. Non-carbonated drinks Caffeine-free drinks

Avoid food: Alcohol Caffeine Fried food Spicy food Sweet and sugary food or drinks Acidic food or drinks, such as orange juice and tomato juice Refined carbohydrates, such as white bread and pasta Processed meats, such as bacon, ham and hot dogs Frequently Asked Questions How long does gastritis take to heal? Is it safe to practice intermittent fasting if I have gastritis? Can gastritis lead to stomach bloating? Is gastritis contagious? Are gastritis and GERD the same thing? References InformedHealth.org [Internet]. Cologne, Germany: Institute for Quality and Efficiency in Health Care (IQWiG); 2006-. Gastritis: Overview. 2015 Jun 30 [Updated 2018 Jun 28]. Available from: Azer SA, Akhondi H. Gastritis. [Updated 2022 Jul 4]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan-. Available from: Hunt RH, East JE, Lanas A, Malfertheiner P, Satsangi J, Scarpignato C, et al. Covid-19 and gastrointestinal disease: Implications for the gastroenterologist [Internet]. U.S. National Library of Medicine; 2021 [cited 2023 May 18]. Available from: Cardaropoli S, Rolfo A, Todros T. Helicobacter pylori and pregnancy-related disorders [Internet]. U.S. National Library of Medicine; 2014 [cited 2023 May 18]. Available from: Gastritis [Internet]. [cited 2023 May 18]. Available from: Safercare [Internet]. [cited 2023 May 18]. Available from: InformedHealth.org [Internet]. Cologne, Germany: Institute for Quality and Efficiency in Health Care (IQWiG); 2006-. Gastritis: Overview. 2015 Jun 30 [Updated 2018 Jun 28]. Available from: Definition & Facts for Gastritis & Gastropathy - Niddk [Internet]. U.S. Department of Health and Human Services; [cited 2023 May 18]. Available from: Symptoms of acute gastritis [Internet]. [cited 2023 May 18]. Available from: Vakil N. Medications for the treatment of stomach acid - digestive disorders [Internet]. MSD Manuals; 2023 [cited 2023 May 18]. Available from: MD(Ayu) DJVH. Gastritis causes, types, symptoms, prevention, home remedies [Internet]. 2021 [cited 2023 May 18]. Available from: Center NN& R. Naturopathy treatment can be an effective way to treat gastritis - nirvana naturopathy & retreat [Internet]. [cited 2023 May 18]. Available from: Articles [Internet]. [cited 2023 May 18]. Available from: Definition & Facts for Gastritis & Gastropathy - Niddk [Internet]. U.S. Department of Health and Human Services; [cited 2023 May 18]. Available from: Yadav SK, Sah AK, Jha RK, Sah P, Shah DK. Turmeric (curcumin) remedies gastroprotective action [Internet]. U.S. National Library of Medicine; 2013 [cited 2023 May 18]. Available from: Ayala G, Escobedo-Hinojosa WI, de la Cruz-Herrera CF, Romero I. Exploring alternative treatments for helicobacter pylori infection [Internet]. U.S. National Library of Medicine; 2014 [cited 2023 May 18]. Available from: MD(Ayu) DJVH. Gastritis causes, types, symptoms, prevention, home remedies [Internet]. 2021 [cited 2023 May 18]. Available from: Yamamoto S, Watabe K, Takehara T. Is obesity a new risk factor for gastritis? [Internet]. S. Karger AG; 2012 [cited 2023 Jul 3]. Available from: Rugge M, Sugano K, Sacchi D, Sbaraglia M, Malfertheiner P. Gastritis: An update in 2020 - current treatment options in gastroenterology [Internet]. Springer US; 2020 [cited 2023 Jul 3]. Available from:

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Gastroenteritis Also known as Stomach flu and Intestinal flu Overview Gastroenteritis is inflammation in the digestive system including the stomach, small and large intestines.It can be caused by viruses, bacteria, toxins, parasites, some chemicals and medications, although viruses are the leading cause.It is often called as the ‘stomach or intestinal flu,’ although it is not caused by the influenza viruses.The typical symptoms of gastroenteritis include watery diarrhea, vomiting, and abdominal cramps.It is contagious and can easily spread from an infected person to others through close contact or touching contaminated surfaces. Consumption of contaminated food and beverages can also be a source of infection of gastroenteritis.

Most cases of gastroenteritis can be prevented by basic hand hygiene measures, prompt disinfection of contaminated surfaces, and avoiding contaminated food and water.Gastroenteritis caused by rotavirus can be prevented by vaccination of children during their first year of life. Gastroenteritis can be usually treated at home by maintaining the fluid and electrolyte balance by regular intake of clean boiled water, oral rehydration solution (ORS), coconut water, clear soups and fresh fruit juices.In cases of severe dehydration, hospital admission might be required. Key Facts Usually seen in All age groups but more common in children Gender affected Both men and women Body part(s) involved Stomach Small intestine Large intestine (colon) Prevalence Acute appendicitis Esophagitis Diverticulitis Inflammatory bowel disease Peptic ulcer disease Bowel obstruction Cholecystitis Pseudomembranous colitis Microscopic colitis Irritable bowel syndrome Lactose intolerance Celiac disease Acute HIV infection Colorectal cancer Necessary health tests/imaging Stool test Blood test: Complete blood count (CBC) & Serum electrolytes Urine test: Blood urea nitrogen (BUN) & Creatinine Imaging tests: CT scan, Ultrasound & X rays Treatment Physical examination & medical history Fluid therapy: Water, Oral rehydration solution, saline solution & Lactate Ringer’s solution. Antibiotics: Metronidazole, Ceftriaxone & Azithromycin Antiemetics: Ondansetron & Metoclopramide Anti-diarrheal medications: Diphenoxylate & Atropine Specialists to consult General physician Infectious disease specialist Gastroenterologist Pediatrician Symptoms of Gastroenteritis

Gastroenteritis is an acute illness that usually lasts between 1-2 days. However, symptoms may take 1-3 days to develop depending upon the causative agent and may range from slight discomfort to severe dehydration which can be fatal especially in children. The typical symptoms of the infection, irrespective of the cause include: Diarrhea Vomiting Nausea Abdominal cramps Abdominal pain Headache Body ache Chills Bloating Loss of appetite

Gastroenteritis caused by bacteria also includes bloody diarrhea which is called dysentery. It occurs due to the damage of the intestinal wall by the bacteria. Signs of dehydration Decreased urine output Dark-colored urine Dry skin Thirst Dizziness Feeling dehydrated? Read the following tips to treat dehydration. Click Here!

Signs of dehydration in infants and toddlers Vomiting is more commonly seen in young children and infants which can even lead to severe dehydration. It is very important to notice the signs of dehydration which include: Thirst Dry diapers Less urination Lack of urination Dry mouth Lack of tears Drowsiness Lack of energy Sunken fontanel (the soft spot on the top of an infant’s head) Sunken eyes and cheeks Fever

Read the important things that one should keep in mind if your child has continuous vomiting. Read Now!

Causes of Gastroenteritis

1. Infectious gastroenteritis Infections causing gastroenteritis can be viral, bacterial, or parasitic in origin.

Viruses: The most common viruses responsible for gastroenteritis are: Norovirus: It is the most common cause and is responsible for most cases of viral gastroenteritis. The virus is mostly responsible for outbreaks within closed communities such as nursing homes, schools, military populations, athletic teams, and cruise ships. Rotavirus: The virus is mostly responsible for severe vomiting in young children and infants. The infection of rotavirus in children and infants may require hospitalization.

Less common viruses that can cause gastroenteritis include astrovirus and adenovirus.

How does viral gastroenteritis spread? Viral gastroenteritis is highly infectious. Viruses are present in the vomit and stool of the infected person and can live outside the human body for a long time. It can spread through: Direct contact with vomit or stool of infected person Shaking hands with infected person Touching contaminated surfaces and objects such as handrails, elevator buttons, utensils, doors etc. Sharing food and beverages with the infected person

Bacteria: Although not common, several species of bacteria can also cause gastroenteritis. They include: Campylobacter: This bacteria spreads through contaminated milk and poultry products. Staphylococcus: It is most commonly found in undercooked meats, eggs, and dairy products. E. coli: This bacteria is mostly present in undercooked beef, and unwashed fruits and vegetables. Shigella: This bacteria usually grows in raw food and contaminated water such as swimming pools.

How does bacterial gastroenteritis spread? Improper storage and unhygienic handling of food can allow the bacteria to grow. Bacterial gastroenteritis spreads very quickly by: Eating contaminated food and beverages Handling stool of infected person

Parasite: Parasites refer to the organism that requires a host to grow and multiply. These organisms usually live in the intestine of the patient. The parasites that can cause gastroenteritis include:  
Entamoeba histolytica Giardia lamblia Cryptosporidium

How does parasitic gastroenteritis spread? The parasites are usually present in the bowel of infected humans and animals and can spread through: Swimming in a contaminated pool and accidentally swallowing water, or through contact with infected animals Handling infected animals Changing the nappy of an infected baby and not washing your hands afterwards 2. Chemicals Gastroenteritis can also be caused by foods contaminated with chemicals such as lead, mercury, cadmium, and arsenic or by directly consuming a heavy metal or chemical. 3. Medications Gastroenteritis can be a side effect of some medications such as : Antacids containing magnesium as a major ingredient Antibiotics Chemotherapy drugs Colchicine Digoxin Laxatives

Confirming the drug as a cause of gastroenteritis is difficult. To recognize this, doctors are usually asked to discontinue the therapy and observe the clinical changes. Did you know? Rains provide respite from the scorching heat and dripping sweat. However, this season puts you at a risk of various diseases that are spread through contaminated food and water such as gastroenteritis. So in monsoons, keep a tab on what you eat and drink. Here is a quick list of foods to avoid in monsoons. Read Now! Types of Gastroenteritis

Depending upon the duration of illness, gastroenteritis can be: Acute: The disease is considered as acute if the duration is 14 days or less than that. Persistent: If the symptoms persist for 14-30 days, gastroenteritis is considered as persistent. Chronic: The duration of more than 30 days makes the disease chronic in nature. Recurrent: Gastroenteritis is considered chronic in nature if it recurs after 7 days without diarrhea. Risk Factors For Gastroenteritis

1. Age Infants and young children are more prone to gastroenteritis because they have low immunity.

Episodes of high temperature are common in children during their early years due to their developing immunity. Read what to do if your child gets a fever. Read Now!

1. Malnutrition It is also seen that people having certain nutritional deficiencies such as Vitamin A or zinc deficiency are more prone to gastroenteritis.
2. Poor hygiene People living in poor hygienic conditions with improper sanitation are also at higher risk of catching bacteria and parasites that are responsible for causing gastroenteritis.
3. Weak immune system People with weak immunity are more prone to bacterial, viral infections that can cause gastroenteritis. This includes patients undergoing chemotherapy, infected with HIV infections etc.

Read about 10 ways to boost the immune system. Read Now!

1. Poverty Poor people living in crowded areas having less access to a balanced diet are at higher risk of gastroenteritis infection.
2. Season It is also seen that viral infections such as rotavirus and norovirus are more prevalent in winter.
3. Traveling People who frequently travel especially to the gastroenteritis endemic areas are at higher risk of catching the infection.

Read some important tips to keep in mind while traveling. Read To Know! Diagnosis of Gastroenteritis

Gastroenteritis is diagnosed by observing the symptoms of the patients. Laboratory examination is necessary to determine the cause that helps in initiating the right treatment plan.

Medical history and physical examination In most cases, the doctor will ask about your medical history to rule out the possibility of other diseases that may present with the same set of symptoms. However, if the patient has consistent fever, bloody stool, and severe dehydration, tests are required. A. Stool tests The examination of the stool sample is done to diagnose bacteria and parasites in the stool. The test does not diagnose specific viral causes of gastroenteritis. Patients with bloody stool, high fever, severe abdominal pain, and chronic dehydration are usually recommended for stool tests due to their high specificity for bacterial gastroenteritis.

1. Examining the stool for blood Blood in the stool can be a sign of infectious gastroenteritis. The stool sample is checked for the presence of hidden blood.
2. Stool culture The culturing of the stool is done to identify the disease causing bacteria. For a stool culture, loose and fresh stool samples are taken. Sometimes, more than one stool samples are collected for the culture. The identification of the virus through stool culture can also be done, however it takes longer.
3. Testing the stool for parasites and ova The presence of parasites and ova (the egg stage of the parasite) can also be detected in a stool sample. The identification is done by examining the stool smear under the microscope. B. Blood tests The complete blood count (CBC) is performed to check the infection. The infection can cause mild leukocytosis (high white blood cell count). In case of severe dehydration, electrolytes levels are also measured by blood tests.

Sometimes, serum inflammatory markers are also examined through blood tests. C. Urine test Dehydration can be due to acute kidney injury. Blood urea nitrogen and creatinine tests are also recommended to rule out the possibility of kidney disease. D. Imaging tests The imaging tests are rarely done for gastroenteritis. In some cases, imaging studies such as CT scans, ultrasound, and X-ray are done to diagnose the condition of the intestine. CT scans may show thickened walls of the colon or other inflammatory changes of the bowel. Imaging studies are mostly done to rule out other major causes of the symptoms. Specialist To Visit

In most of the cases, gastroenteritis does not lead to severe complications. However, patients with severe dehydration should consult the doctor immediately as it may cause hypoglycemia and electrolyte imbalance.

Diarrhea should not be ignored in newborns and infants as it can lead to severe dehydration and can prove to be fatal. The immediate medical attention is also advised in case of: Old age Pregnancy Low immunity

The following doctors can be consulted for diagnosis and treatment: General physician Infectious disease specialist Gastroenterologist Pediatrician (in case of children)

Consult India’s best doctors here with a single click. Consult Now! Prevention of Gastroenteritis

Vaccination Immunization for rotavirus is recommended for young children and infants to prevent the risk of gastroenteritis, hospitalization, and death from rotavirus infection.

There are currently 2 vaccines available that are given two or three doses as per the type of vaccine. The first dose is given before the child is 15 weeks of age. Children should receive all doses of rotavirus vaccine before they turn 8 months of age. Hand washing Most viral gastroenteritis can be prevented by washing of hands with soap and water for at least 10 seconds after going to the toilet, before preparing or handling food, before eating food, after handling vomiting of an infected patient, and after changing diapers of the child. The hand washing facilities should be available for staff, residents, children, and visitors in child care centers and hospitals.

There is also evidence that alcohol-based hand sanitizers in addition to handwashing reduces the chances of gastroenteritis in offices and daycares. Reduction in school absenteeism is also observed.

Learn the right way of washing your hands! Tap To Know!

Education People, especially children, should be educated about the importance of hand washing and maintaining good hygiene as the most effective way of preventing gastroenteritis. There should be signs of hand washing in toilets and eating areas to constantly remind the same. Hygiene measures Infectious gastroenteritis spreads through contaminated surfaces. Practicing good hygiene is the best way to prevent infection. The following measures can be taken to ensure the cleanliness: Keep the nails short and avoid wearing false fingernails, nail extenders and nail polish, and jewelry as they restrict adequate cleaning of hands. Clean the surfaces or objects that have been exposed to vomits or feces. Wear disposable gloves and masks while handling feces or vomit of infected individuals. Use disposable paper towels to dry your hands. Clothes towels should be avoided as bacteria can survive on objects. Keep kitchen tops, toys, toilet seats, nappy change tables clean to avoid the growth of bacteria and viruses. Isolation As gastroenteritis is highly contagious, isolation of the patient prevents the spread of the infection. Children who have experienced diarrhea should not return to childcare until 24 hours after symptoms have resolved. Anyone with diarrhea should not swim for at least 2 weeks after complete recovery. Dietary modifications As contaminated food and beverages are the most important source of infection, some dietary modification can help prevent the infection. Cook the foods thoroughly Avoid consuming uncooked and unpasteurized milk Drink only bottled water while traveling. Avoid food buffets, uncooked foods or peeled fruits and vegetables, and ice in drinks. Studies also suggest that daily administration of probiotics especially in children reduces the occurrence of acute gastroenteritis.  
The intake of zinc supplements also has a preventive effect on diarrhea associated with gastroenteritis. Breastfeeding Antibodies in human milk enhance the infant’s immunity and play a major role in the prevention of certain diseases. The complete breastfeeding for the initial four months of life lowers the risk of acute gastroenteritis and it also decreases the rate of hospitalization due to diarrhea. Treatment of Gastroenteritis

The treatment of gastroenteritis is based upon the cause and symptoms. The most important goal of the therapy is to maintain hydration and electrolyte balance that is disturbed due to vomiting and persistent diarrhea.

In some cases such as severe dehydration, uncontrolled vomiting, severe electrolyte disturbances, significant renal failure, continuous abdominal pain, and pregnancy, hospital admission is required. The treatment protocols may include: Fluid therapy Most cases of mild dehydration can easily be managed at home through fluid therapy. It is advised to drink plenty of fluids to compensate for water loss and prevent dehydration.  
Oral rehydration solutions are preferred over other clear fluids for managing diarrhea. Fluids high in sugar (such as cola, apple juice, and sports drink) should be avoided as they may aggravate dehydration and diarrhea. Patients having severe dehydration and persistent vomiting may require hospital admission for continuous monitoring of electrolyte level. Enteral (oral or nasogastric) and intravenous fluids (Saline solution and lactate Ringer’s solutions) are given to patients facing difficulty in taking fluids due to nausea, vomiting, and to correct electrolyte levels. Zinc supplementation Zinc is a metal that is found in a variety of foods such as meat, fish, almonds, and cereals. Diarrhea, the most common symptom of gastroenteritis, is associated with severe zinc deficiency.

Zinc supplementation is a very safe and effective way for reducing complications due to gastroenteritis in children. WHO recommends the intake of 10 to 20 mg of zinc for 10 to 14 days for the management of diarrhea in children. It is given in the form of zinc sulfate, zinc acetate, or zinc gluconate. Probiotics Probiotics are effective in the treatment of diarrhea, especially for diseases with an infectious origin. The use of probiotics is associated with the reduction in the duration of the diarrhea, if started immediately after the onset of symptoms. Antibiotics They are mostly used to treat gastroenteritis caused by bacteria. Some of the commonly used antibiotics in gastroenteritis include metronidazole, ceftriaxone, and azithromycin. Antiemetics Antiemetic medications are the drugs that are used to control nausea and vomiting. The commonly used antiemetic medications are ondansetron and metoclopramide. Antidiarrheal medications Antidiarrheal medications are used only in those patients who are not able to maintain a well-hydrated status. Medications such as diphenoxylate, atropine are used. Home-care For Gastroenteritis

Keep a watch on fluid intake It is advised to have plenty of fluids like fresh fruit juices, coconut water, clear soups etc. In case of severe vomiting, take small sips of fluids at regular intervals. The mothers of the infected infants should make sure that their babies are getting enough breast milk. Have ice chips If you are facing difficulty in digesting fluids, try to suck ice chips. This also helps in rehydration. The ice chips should not be given to small children. Add these foods to your diet B.R.A.T stands for bananas, rice, applesauce, and toast. These food items should be included in the diet as it helps in making the stool smooth and helps in compensating the nutrient loss from vomiting and diarrhea. Foods like chicken or other lean meats, whole grains and potatoes help in reducing the symptoms of gastroenteritis It is also advised to consume smaller easy to digest meals at regular intervals. Avoid certain foods Certain food items should be avoided as they can make the stomach upset and can cause indigestion. The impaired digestion can aggravate diarrhea and vomiting. These include: Greasy and spicy food containing chilly, black pepper, and garlic Drinks with caffeine, such as coffee and tea, and some soft drinks. Fatty junk foods such as fried foods, pizza, and fast foods. Foods and drinks containing large amounts of simple sugars, such as sweetened beverages and packaged fruit juices. Milk and milk products, containing the sugar lactose which can cause some people to develop lactose intolerance Take proper rest People with gastroenteritis should take proper rest even after the completion of therapy. This will lead to complete recovery and healing of the digestive system. Try heating pad Some patients of gastroenteritis suffer from severe abdominal pain. Such patients can use a heating pad to relieve cramps.  
Say no to alcohol Alcohol can cause inflammation in the stomach. This can increase the secretion of gastric acid. So, alcohol should be avoided as it can increase the feeling of vomiting (nausea). Myths and Facts A lot of us try to defend our drinking habits by citing imaginary benefits of alcohol. With a lot of research that backs the ill-effects of alcohol, there are some myths about alcohol that are read true by a lot of us. Here are a few common myths about the ‘benefits’ of alcohol which are not true. Bust Now! Complications Of Gastroenteritis

In most of the cases, gastroenteritis is resolved through fluid therapy and medications. However, persistent diarrhea and vomiting can lead to:

1. Dehydration
2. Metabolic acidosis
3. Electrolyte imbalance Hypernatraemia (high levels of sodium) Hyponatraemia (low levels of sodium) Hypokalaemia (high levels of potassium)

Development of intolerance to food such as lactose, glucose, cow’s milk, and soy protein

1. Increase susceptibility to infection
2. Dehydration can lead to more serious problems, such as: Heat stroke: Lack of fluids could lead to heatstroke. This is more common in physically active patients. Kidney disorders: The long episode of dehydration can develop or trigger kidney stones, urinary tract infections (UTIs), or even kidney failure. Seizures: The electrolyte imbalance can also develop seizures in the long run. Hypovolemic shock: This can develop due to low blood volume and a drop in blood pressure. Alternative Therapies For Gastroenteritis

Home remedies

Tea: Caffeine-free teas are proven to be beneficial in nausea and vomiting. Peppermint and lemon can be added to improve the taste.

Ginger (Adrak): It possesses anti-inflammatory, anti-viral, and anti-bacterial properties. It also eases nausea. It can be taken in raw form or can be boiled in water or tea.

Apple cider vinegar: It can soothe an irritated stomach and thereby reduce nausea, vomiting, and abdominal cramps.

Add 1 teaspoon of apple cider vinegar to a glass of warm water and drink 30 minutes before eating a meal.

Yogurt: It contains a lot of good bacteria that help in maintaining the overall good health of the gut. It also helps in reducing watery diarrhea. It should be added to every meal of the patient suffering from gastroenteritis.

Cinnamon (Dalchini): It has antibacterial and antiviral properties which can be used for combating gastroenteritis. It also helps in reducing stomach pain and bloating.

Turmeric (Haldi): Curcumin, present in turmeric, possesses anti-inflammatory properties. It can be consumed by adding in a glass of warm water or milk.

Basil (Tulsi): It possesses antispasmodic properties and helps in reducing spasms in gastroenteritis. It also has gastroprotective properties which aid in relieving symptoms of gastroenteritis.

Peppermint: It soothes the stomach and helps in treating bloating and gas. The most effective way to use it is to consume it in the form of tea.

Triphala: It is known to improve digestive health and also helps in the absorption of nutrients.

Coriander (dhania): It possesses healing properties and it is known to alleviate the symptoms of upset stomach and diarrhea.

Asafoetida (hing): It is known for years to strengthen the digestive system. It possesses antiviral and antibacterial properties. It can be added in meals or can be consumed with lukewarm water.

Licorice (mulethi): It also promotes the healing of an inflamed stomach and treats indigestion.

Rice water: It is used especially in infants to reduce diarrhea.

Chamomile tea: It is used as a digestive relaxant and can help in the treatment of many gastrointestinal disturbances, like diarrhea and vomiting, which is most commonly observed in gastroenteritis. Acupressure Patients suffering from excessive nausea and vomiting can also try acupuncture finger pressure techniques as it is shown to stimulate trigger points that may help in reducing nausea and vomiting. Frequently Asked Questions For how long does gastroenteritis is contagious? How long does gastroenteritis last in a child? Are gastroenteritis and flu the same illness? How common is gastroenteritis in children? References Viral gastroenteritis factsheet, NSW government, NSW health, Last updated on: 27th July, 2018. Norovirus, National Foundation For Infectious Diseases. Norovirus factsheet, NSW government, NSW health, Last updated on: 14th May, 2018. Illness prevention, Vessel Sanitation Program, Center For Disease Control and Prevention, Last updated on 19th October, 2018. Rotavirus infection factsheet, NSW government, NSW health, Last updated on: 01st July, 2012. Stuempfig ND, Seroy J. Viral Gastroenteritis. [Updated 2021 Jun 24]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan. Gastroenteritis - controlling viral outbreaks in childcare centers and schools, NSW government, NSW health, Last updated on: 06th May, 2019. Gastroenteritis, Better Health Channel. Bacterial Gastroenteritis, Health, John Hopkins University. Understanding Viral Gastroenteritis,John Hopkins University. John Hopkins University. Norovirus infection, Virginia Department Of Health, Last update on: September 2018. Symptoms & Causes of Viral Gastroenteritis (“Stomach Flu”), National Institute Of Diabetes and Digestive Kidney Disease, Last update on: May 2018. Rotavirus Vaccination, Center For Disease Control and Prevention, Last updated on 25th March, 2021.

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Gestational diabetes Also known as Gestational diabetes mellitus, GDM, Pregnancy-induced diabetes, and Type III diabetes Overview

Gestational diabetes refers to the high blood glucose that is diagnosed first time during pregnancy. It mostly develops during the second and third trimester of pregnancy. It can also include undiagnosed type 2 diabetes identified early in pregnancy.

The major cause of gestational diabetes are the release of placental hormones that contribute to the increase in the blood glucose.

The factors that can increase the risk of gestational diabetes include increased body weight, decreased physical activity, family history of diabetes, polycystic ovarian syndrome (PCOS), and prior history of gestational diabetes.

Managing gestational diabetes is very important to avoid both fetal and maternal complications. Dietary and lifestyle modifications are the cornerstone treatment approaches for this condition. In case of failure of these conventional approaches, insulin might be required. Key Facts Usually seen in Women aged between 35 to 39 years of age Gender affected Women Body part(s) involved Pancreas Necessary health tests/imaging Glucose challenge test Oral glucose tolerance test Treatment Dietary modifications Exercise Insulin Specialists to consult Physician Diabetologist Endocrinologist Nutritionist Neonatologist Obstetrician Symptoms Of Gestational diabetes

In most of the cases, gestational diabetes does not have any symptoms. So, screening is very important to diagnose the condition.

Some women might have mild symptoms such as:

Increased urination Increased thirst Fatigue Nausea Vomiting Weight loss in spite of eating more

If the blood sugar levels are very high, women may experience:

Blurred vision Delayed wound healing Genital itching Diabetes can cause dry mouth Dry mouth is a common symptom of high blood sugar. It can worsen the side effects of diabetes and increase the sugar level of the body. Here are several other causes of dry mouth. Tap To Read! Causes Of Gestational Diabetes

Diabetes is characterized by high blood glucose levels in the blood. Normally, the level of glucose is maintained by a hormone called insulin. Insulin helps in the utilization of the glucose. During pregnancy, the sensitivity of insulin is reduced by about 56% via:

Placental hormones: Such as human placental lactogen (hPL), human placental growth hormone (hPGH), growth hormone (GH), adrenocorticotropic hormone (ACTH), prolactin (PRL), estrogens, and gestagens. Inflammatory chemicals: Such as tumor necrosis factor alpha (TNF-α), IL-6, resistin, and C-reactive protein (CRP). Glucose: Produced by the body for the fetus. Studies suggest that endogenous glucose production is increased by 30% in the third trimester of pregnancy.

In most cases, adaptation occurs in the body by increasing the secretion of insulin. But, gestational diabetes happens if insulin secretion is not able to withstand the demand.

Learn more about gestational diabetes from our experts. Watch this video Types Of Gestational Diabetes

Gestational diabetes is classified according to the treatment approach: 1. A1GDM GDM that is managed without taking any medication is termed A1GDM. Here, the treatment approach includes dietary modifications. 2. A2GDM The term A2GDM refers to blood glucose that needs to be managed with the help of medications. Risk Factors For Gestational Diabetes

Gestational diabetes increases the risk of developing type 2 diabetes both in the mother and baby. It can also be turned out as a cause of obesity in the later life of the child. It is always advisable to get tested for diabetes in the second and third trimester of pregnancy. The chances of developing diabetes in pregnancy increase with the following risk factors: 1. Age The prevalence of diabetes is more common in women over 30 years of age. Women at the age of 35-39 are at the highest risk of developing gestational diabetes.

There are several changes in the woman’s body as she turns 30. Explore what the 30s have in store for every woman! Read this now

1. Being overweight and obesity Pregnant women having BMI greater than 25 have more chances of developing complications such as diabetes during pregnancy.

Being overweight or obese causes hormonal imbalances in women which in turn negatively affects their ovulation and menstrual cycles. Know more about how obesity can impact fertility, pregnancy, and childbirth.

Read To Know!

1. Decreased physical activity There is an increased risk of gestational diabetes in women living a sedentary lifestyle.
2. Western diet Studies suggest that the “Western pattern” diet that includes food such as red meat, processed meat, refined grain products, sweets, french fries, and pizzas is associated with an increased risk of GDM.
3. Lack of vitamins and minerals The deficiencies of certain vitamins and minerals also predispose women to develop gestational diabetes. It is seen that women whose intake of Vitamin C is less than 70 mg/day have 1.8 times increased risk of GDM.

Note: Lack of Vitamin D is also associated with an increased risk of gestational diabetes.

Get your Vitamin D levels checked from the comfort of your home to know whether or not you have the deficiency. Book your test now

1. Dyslipidemia It refers to high levels of bad cholesterol and low levels of good cholesterol in the blood. The triglycerides greater than 250 mg/dl and HDL levels less than 35 mg/dl indicate the risk of gestational diabetes.
2. Polycystic ovarian syndrome (PCOS) Pregnant women having PCOS have more chances of developing gestational diabetes. It is seen that more than twice the percentage of pregnancies with diabetes is observed in women with PCOS.
3. High glycosylated hemoglobin (Hba1c) HBa1c is a blood test marker that reflects the glucose control of the last three months. Pregnant women with Hba1c greater than 5.7 % and abnormal oral glucose tolerance test (OGTT) have an increased risk of diabetes.

Keep the guesswork away and get yourself tested with Tata 1mg. Book now

1. Previous history of GDM Studies suggest that women who have a prior history of gestational diabetes are six times more prone to it in the next pregnancy.
2. Family history The history of diabetes in the first-line relatives of the women also makes the woman more prone to gestational diabetes.
3. High-risk race or ethnicity Women that belong to particular races are more prone to gestational diabetes. These include African American, Hispanic or Latino, American Indian, Alaska Native, or Native Hawaiian.
4. History of delivery of infant >4000 gms Women who have previously birthed an infant weighing 4000 grams or more have more chances of developing gestational diabetes in the next pregnancy.
5. Season Recent studies suggest that the chance of getting gestational diabetes is more in summer.
6. In vitro fertilization (IVF) There is a 50% increase in diabetes in pregnancy that results from in vitro fertilization (IVF), where the joining of a woman’s egg and a man’s sperm happens in a laboratory setting.
7. Other medical conditions The presence of cardiovascular disease and hypertension in women is also a risk factor for diabetes during pregnancy. Diagnosis Of Gestational Diabetes

The diagnosis of gestational diabetes in all pregnant women is very essential since it is mostly asymptomatic. It is diagnosed with the help of the following:

1. Screening There are two types of screening:

Universal screening: It involves screening of diabetes in all women between 24 and 28 weeks of pregnancy. The screening in the third and fourth trimesters is essential because insulin resistance is well-established during this period.

Selective screening: Selective screening is done only in the presence of the risk factors mentioned above. It is done in the first trimester. The high blood sugar level in this stage may indicate pre-existing type 1 or type 2 diabetes rather than gestational diabetes.

1. Blood tests There are two tests that are recommended to confirm gestational diabetes. These include:

Glucose challenge test: It is also known as a glucose screening test. It is the first test that is performed to diagnose gestational diabetes. In this, the blood glucose is analyzed after 1 hour of consuming glucose-rich liquid.

Oral glucose tolerance test: In this, 75g of glucose is given in 100-200 ml of water after 8-12 hours of fasting. The blood glucose is measured at regular intervals – fasting, 1 hr, 2 hr, and 3 hr. High blood glucose at any two-time point confirms gestational diabetes.

Getting your tests done has never been easier. Book your tests with TATA 1mg to get accurate results. Click Here Celebs affected Celina Jaitly Celina Jailty is an Indian actress. She was diagnosed with gestational diabetes and kept a strict watch on her diet to manage the condition. Debina Bonnerjee She is an Indian television actress. Recently, she gained popularity through her videos sharing her pregnancy and motherhood journey. She was diagnosed with gestational diabetes and managed her condition through dietary modifications. Specialist To Visit

Gestational diabetes is managed by a team of doctors due to its multi-treatment approach. The speciality of doctors that can help include:

General physician Diabetologist: Help in the management of diabetes. Endocrinologist: Specialize in managing endocrine disorders.

The panel should also include:

Nutritionist: Expert on the relationship between food and health Neonatologist: Diagnose and treat health conditions of newborn Obstetrician: Provide medical care during pregnancy, childbirth and postnatal care

If you suffer from any complications due to diabetes, then getting in touch with the respective specialist can help you to manage and prevent these problems. Some of the common specialists who can help are:

Nephrologists: Specialize in diagnosing and treating kidney conditions. Neurologists: Diagnose and treat disorders that affect the brain, spinal cord, and nerves. Podiatrists: Help with problems that affect your feet or lower legs. Dentists: Specialize in treating problems related to teeth. Ophthalmologists: Experts in treating problems related to the eyes.

Consult India’s best doctors online with a single click to get the right diagnosis and treatment. Consult Now Prevention Of Gestational Diabetes

Gestational diabetes is not completely preventable but some measures can lower the risk of the same. These include:

1. Go for pre-pregnancy counselling It consists of a complete assessment of diabetes and associated complications to check the possibility of any medical condition during pregnancy. This will help to start the treatment plan even before pregnancy.
2. Indulge in some physical activity It is seen that physically active women have 38% lesser chances of developing diabetes during pregnancy. Exercising 3 times a week has been shown to reduce the risk of gestational diabetes by 24% even in overweight individuals.

Here are 9 exercise tips during pregnancy. Click To Know! 3. Tweak diet The risk of gestational diabetes can be reduced by dietary modifications, especially in overweight and obese women. However, it is important to make sure that the woman is getting nutrient-dense foods during pregnancy.

Are you a new mom-to-be? Listen to our experts talk about what to eat and what not to eat during the first trimester. Watch now

1. Keep a check on your weight Women who gain a lot of weight during pregnancy are more likely to develop gestational diabetes. Most of us think that putting on weight is very common during pregnancy. But there are some recommendations regarding weight gain:

For women who were underweight before pregnancy (BMI of less than 18.5): 12.5 to 18 kilograms of weight gain during pregnancy. For women with an average weight before pregnancy (BMI of between 18.5 and 24.9):11.5 to 16 kilograms of weight gain during pregnancy. For women who were overweight before pregnancy (BMI of between 25 and 29.9): 7 to 11.5 kilograms of weight gain during pregnancy. For women who were obese before pregnancy (BMI greater than 30): 5 to 9 kilograms of weight gain during pregnancy.

So, it is advisable to keep weight within this limit to reduce the risk of gestational diabetes. Keep a check on your weight with our widest range of weighing scales. Shop now

Treatment Of Gestational Diabetes

Comprehensive care is very essential for the management of gestational diabetes. Diet and exercise are the pillars to manage it and medications are used in case of no response to these. The treatment includes:

1. Nutritional therapy

The management of gestational diabetes starts with modifications in the diet. The diet plan should be customized for each individual. It is highly advisable to consult a nutritionist. The meal should contain an appropriate amount of carbohydrate, fats, and proteins considering the health of the fetus. The eating plan created by the doctor/dietitian should always be followed which usually include:

Bedtime eating to prevent the development of ketosis overnight 5 Frequent meals– three small to moderate sized meals and 2-3 snacks to maintain optimum blood glucose level Cultural preferences of the women to promote adherence Proteins to avoid hunger

Foods to eat Healthy fats from nuts, olive oil, fish oils, flax seeds, or avocados Fruits and vegetables—ideally fresh, the more colorful the better; whole fruit rather than juices High-fiber cereals and breads made from whole grains High-quality proteins such as eggs, beans, low-fat dairy, and unsweetened yogurt

Foods to avoid Trans fats or deep-fried foods Packaged and fast foods, especially those high in sugar, baked goods, sweets, chips, desserts White bread, sugary cereals, refined pastas Processed meat and red meat Low-fat products that have replaced fat with added sugar, such as fat-free yogurt

1. Exercise It plays a very important role in maintaining optimum blood glucose. The activities that can be included in the regimen are: Walking Swimming Selected pilates Low-intensity fitness exercises.

Studies have shown that 20–30 min of activity 3–4 times a week has significantly reduced fasting and postprandial glucose. However, the exercise regimen should always be discussed with the doctor considering the safety of the baby.

Here is a detailed video on the types of activities that can be safely performed during pregnancy.

1. Insulin The injection of insulin is recommended when the individual is unable to achieve optimal glucose level even with diet and exercise. It is the first-line drug for gestational diabetes due to its safety and effectiveness. The dosage is based on the weight of the mother.

The injection of insulin is self-administered by the patient. The insulin is usually taken in two halves – one half is taken at bedtime and the other half is divided between three meals. The injection is administered before meals to prevent the abrupt rise in glucose.

1. Metformin - A new and safe prospect in managing gestational diabetes?? For several decades, insulin has been the most reliable treatment and the gold standard in the management of gestational diabetes. Metformin is an effective oral hypoglycemic drug and an established first-line treatment in type 2 diabetes currently.

As it crosses the placenta, a safety issue remains an obstacle and, therefore, metformin is currently not recommended in the treatment of gestational diabetes.

Nevertheless, recent research has supported metformin for its equivalent safety and efficacy compared to insulin along with the following reasons: Ease of its use Acceptability by the patients Significantly less maternal weight gain Less maternal hypoglycemia Reduction in the complications associated with GDM such as preterm delivery, early pregnancy loss, and neonatal hypoglycemia.

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1. Management of labor Gestational diabetes can impact the time and type of delivery. It is very important to manage blood glucose during labor to avoid maternal and fetal complications.

Routine glucose monitoring at least 4 times a day is essential to track glucose fluctuations. It includes daily monitoring of fasting glucose and 1 or 2 hours after each meal. The level of glucose after meals helps to assess maternal and fetal complications. The frequency of monitoring is less in women whose glucose is diet controlled.

Buy glucose monitors to keep track of your blood glucose levels in the comfort of your home. Explore here

Home-care For Gestational Diabetes

Along with exercise and diet, there are certain kitchen ingredients that have shown good results in the management of gestational diabetes:

Vitamin C rich foods: Studies have shown that consuming approximately 600 mg of Vitamin C helps in alleviating blood glucose. Women with gestational diabetes are advised to include Vitamin C-rich foods in their diet. Common examples of such food items that can be safely used during pregnancy are tomatoes, oranges, blueberries, strawberries, kiwis, and grapes.

Indian gooseberry (Amla) is also a good source of Vitamin C that helps to control blood sugar levels. It makes the body more responsive to insulin.

Is your diet not able to meet your bodily Vitamin C demand? Fill the gaps in your diet with Vitamin C supplements Shop them here! Fenugreek (Methi): It is known to keep diabetes in check while improving glucose tolerance, lowering blood sugar levels, and stimulating the secretion of insulin. It is always available in the Indian kitchen and can be easily included in the daily diet.

Drumstick (Moringa): It is rich in antioxidants and Vitamin C along with its anti-diabetic property. It can be consumed by sipping the water boiled with its pieces. It can also be added to the daal or curry.

Cinnamon (Dalchini): It is known to control blood glucose levels due to the presence of a bioactive compound that regulates insulin activity. It can be taken with warm water. However, it should be taken in moderation as it can stimulate involuntary contractions during pregnancy. It is always better to consult your healthcare provider before starting it. Complications Of Gestational Diabetes

The blood glucose usually returns to normal after the delivery of the baby. But, some women can develop type 2 diabetes later in their lives. The poor glucose control during pregnancy can lead to:

1. Spontaneous abortion The women who have persistently high blood glucose during pregnancy are at high risk of early miscarriage.
2. Unexplained stillbirths Miscarriages that happen after the 20th week of pregnancy are termed as stillbirths. Uncontrolled blood glucose over a long period of time can cause stillbirths. The excessive production of lactic acid as a result of diabetes can also cause fetal death.
3. Preterm delivery Gestational diabetes can cause preterm labor before 37 weeks of pregnancy. Babies born this early might suffer from long-term intellectual and developmental problems.
4. Cesarean delivery Diabetes in pregnancy increases the chances of cesarean delivery due to a large baby.

The other complications can be categorized as: 1. Maternal complications Preeclampsia Type 2 diabetes Diabetic ketoacidosis (Formation of ketones bodies) Severe hypoglycemia (Low blood sugar levels) Diabetic nephropathy (Damage to the blood vessels of the kidneys) Diabetic neuropathy (Nerve damage) Diabetic retinopathy (Damage to the blood vessels of the eye).

1. Fetal complications

Macrosomia (Large fetus weighing about 4000 gms to 4500 gms). Hypoglycemia (Severe drop in blood glucose) Polycythemia (High number of red blood cells) Shoulder dystocia (failure to deliver the fetal shoulders during vaginal delivery) Hyperbilirubinemia (High levels of bilirubin in the blood) Respiratory distress (Difficulty in breathing) Hypocalcemia (Low level of calcium) Type 2 diabetes later in life Alternative Therapies For Gestational diabetes

Some alternative therapies have shown promise in the management of gestational diabetes. However, it is crucial to consult the doctor before initiating any of them.

1. Chinese herbal medicine It includes several medicines that are prepared from plant products such as leaves, stems, flowers, roots, and seeds. Studies show that Chinese herbal medicines can be used in the management of gestational diabetes.
2. Yoga Yoga plays a very important role in controlling blood sugar levels. It also keeps stress under control and helps in balancing the other vital parameters along with aiding in building strength, endurance capacity, and flexibility of the mother. Living With Gestational Diabetes
3. Postpartum Care for Diabetes The management of diabetes after delivery depends upon its severity during pregnancy. GDM which is diagnosed in the third trimester usually resolves on its own after delivery. There is no need for immediate testing postpartum. However, a glucose tolerance test is advisable at 6 weeks postpartum to check recurrence. Women with a history of gestational diabetes are at higher risk of developing type 2 diabetes within 20 years of diagnosis. The yearly evaluation of diabetes is recommended in such women. The following tips can reduce the chances of occurrence of diabetes in the future:

Maintain a healthy weight Stay active Make healthy food choices Breastfeed your baby. It gives the right nutrition to the baby and also helps the mother to control her weight. 2. Neonatal care A baby born to a diabetic mother has a higher chance of developing diabetes. Such neonates require a special care unit to monitor blood glucose at least for the first 48 hours. Early breastfeeding reduces the chances of developing diabetes both in the baby and the mother. Frequently Asked Questions Will diabetes developed during pregnancy stay a lifetime? Which week is highly critical for gestational diabetes? Is gestational diabetes genetic? Are there any ways to reduce the risk of gestational diabetes? What should be done after delivery if the woman had gestational diabetes? Will the child born to a mother with gestational diabetes be diabetic? References McIntyre HD, Kapur A, Divakar H, Hod M. Gestational diabetes mellitus—innovative approach to prediction, diagnosis, management, and prevention of future NCD—mother and offspring. Frontiers in endocrinology. 2020 Dec 3;11:614533. Modzelewski R, Stefanowicz-Rutkowska MM, Matuszewski W, Bandurska-Stankiewicz EM. Gestational Diabetes Mellitus—Recent Literature Review. Journal of Clinical Medicine. 2022 Sep 28;11(19):5736. Citation: Akhalya K, Sreelatha S, Rajeshwari, et al. A review article- gestational diabetes mellitus. Endocrinol Metab Int J. 2019;7(1):26-39. Gestational Diabetes, Centers For Disease Control and Prevention, Last Updated On: 30 December, 2022. Gestational Diabetes, American Diabetes Association Gestational Diabetes, National Institute Of Diabetes and Digestive and Kidney Disease, Last Updated: May 2017. Quintanilla Rodriguez BS, Mahdy H. Gestational Diabetes. [Updated 2022 Sep 6]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Mirghani Dirar A, Doupis J. Gestational diabetes from A to Z. World J Diabetes. 2017 Dec 15;8(12):489-511. doi: 10.4239/wjd.v8.i12.489. PMID: 29290922; PMCID: PMC5740094. Xu YXZ, Xi S, Qian X. Evaluating Traditional Chinese Medicine and Herbal Products for the Treatment of Gestational Diabetes Mellitus. J Diabetes Res. 2019 Dec 3;2019:9182595. doi: 10.1155/2019/9182595. PMID: 31886289; PMCID: PMC6915007. Breastfeeding after gestational diabetes, Gestational Diabetes UK< Last Updated On: 11 Nov 2016. InformedHealth.org [Internet]. Cologne, Germany: Institute for Quality and Efficiency in Health Care (IQWiG); 2006-. What can help prevent gestational diabetes? [Updated 2020 Oct 22]. Wang CC, Li L, Shao YF, Liu XK, Tam WH, Li RM. Chinese herbal medicines for treating gestational diabetes mellitus. Cochrane Database Syst Rev. 2019 Jun 24;2019(6):CD013354. do Nascimento GR, Borges MDC, Figueiroa JN, Alves LV, Alves JG. Physical activity pattern in early pregnancy and gestational diabetes mellitus risk among low-income women: A prospective cross-sectional study. SAGE Open Med. 2019 Sep 9;7:2050312119875922

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Glaucoma Also known as silent thief of sight Overview Glaucomas are a group of eye disorders characterized by progressive optic nerve damage. It is a condition in which there is a relative increase in intraocular pressure (pressure inside the eyes) which can lead to irreversible loss of vision.

Glaucoma is the second most common cause of loss of vision worldwide after cataract with more than 70 million people affected worldwide.

Glaucoma can occur at any age but is more common among people above 60 years of age. Several risk factors can increase the risk of glaucoma which include old age, family history of glaucoma, and history of eye injury. Other causes are poor blood flow to the optic nerve and conditions such as high blood pressure and diabetes.

Glaucoma is a silent thief of vision. In the early stages of glaucoma, there are no symptoms. In reality, most of those who have glaucoma are completely unaware of their condition. Hence regular eye checkups by an ophthalmologist play an important role in managing the disease at an early stage. Treatment protocols include medications and surgical procedures. Key Facts Usually seen in Adults above 60 years of age Gender affected Both men and women Body part(s) involved Eyes Prevalence Worldwide: 70 Million (2014) India: 12 Million (2016) Mimicking Conditions Compressive or infiltrative lesions of the optic nerve Previous ischemic optic neuropathy (both arteritic and non-arteritic) Congenital and hereditary optic neuropathies Post-traumatic optic neuropathy and inflammatory Demyelinating optic neuritis Necessary health tests/imaging Tonometry Pachymetry Ophthalmoscopy Gonioscopy Treatment Prostaglandins: Latanoprost, Travoprost, Tafluprost & Bimatoprost Beta-blockers:Timolol & Betaxolol Alpha adrenergic agonists: Apraclonidine and Brimonidine Carbonic anhydrase inhibitors: Dorzolamide, Brinzolamide & Acetazolamide Inhibitor of the Rho kinase: Netarsudil Miotic/cholinergic agents: Pilocarpine Surgery: Trabeculoplasty, Iridotomy & Cataract surgery See All Causes Of Glaucoma

The clear fluid inside the eye is called the aqueous humor. This fluid nourishes the eye and gives it its shape. The eye constantly makes aqueous humour. As the new aqueous enters the eye the same amount should drain out of the eye through an area called the drainage angle. This procedure maintains a constant intraocular pressure (IOP) in the eye. Any blockade or problem in drainage results in fluid build up in the eye. As the IOP increases, the optic nerve may get damaged. More than a million microscopic nerve fibres make up the optic nerve. It’s similar to an electric cable, which is made up of numerous little wires. When these nerve fibres begin to perish, one may start getting blind spots in the vision. These blind spots are mostly noticed when the majority of the optic nerve fibres have been destroyed. In case all the fibres are lost, it leads to blindness. Types Of Glaucoma

1. Open angle glaucoma or wide angle glaucoma Open-angle glaucoma is the most prevalent type of glaucoma. It occurs when the drainage canals get partially occluded. As a result, the pressure in the eye begins to rise, thereby harming the optic nerve. This process happens gradually and may go unnoticed for years as most people don’t show any symptoms initially. Open-angle glaucoma usually tends to run in families. The risk of acquiring the disease is higher if your parent or grandparent suffered from it.
2. Angle-closure glaucoma or narrow angle glaucoma or closed-angle glaucoma Angle-closure glaucoma is a relatively less common condition in which the iris (the colored part of the eye that controls light exposure) bulges forward, narrowing or blocking the drainage angle created by the cornea (clear outer part of the eye) and iris. As a result, the drainage of aqueous humor is affected, thereby causing an acute rise in eye pressure. People with small drainage angles are more likely to develop angle-closure glaucoma.

Angle-closure glaucoma can develop quickly (acute angle-closure glaucoma) or gradually (progressive angle-closure glaucoma or chronic angle-closure glaucoma). Glaucoma with acute angle closure is a medical emergency.

1. Normal tension glaucoma Even though your eye pressure is within the usual range, your optic nerve is injured with normal-tension glaucoma. No one knows why this is the case. It’s possible that you have a sensitive optic nerve or that your optic nerve isn’t getting enough blood. Atherosclerosis, or the accumulation of fatty deposits (plaque) in the arteries, or other disorders that affect circulation could be blamed for the reduced blood flow.
2. Congenital glaucoma or childhood, infantile or pediatric glaucoma Congenital Glaucoma is a condition that can affect newborns and children who have a defect in the angle of their eye. It might be present from birth or evolve over time. Drainage blockages or an underlying medical issue could cause optic nerve injury. It is thought to be genetic in origin which usually runs in families or due to any abnormal development during pregnancy.
3. Pigmentary glaucoma Pigmentary Glaucoma is also a form of secondary open-angle glaucoma. In pigmentary glaucoma, pigment granules that give colour to the iris disperse and build up in the drainage ducts of the eye, delaying or stopping the fluid to exit the eye. This leads to an increase in IOP and eventual damage to the optic nerve.
4. Secondary glaucoma Secondary glaucoma is a condition in which other diseases cause increase in eye pressure, resulting in optic nerve damage and eventually loss of vision. Eye trauma, eye diseases like uveitis which cause inflammation in the eye, eye tumors, advanced cases of cataract or diabetes or use of drugs like corticosteroids etc. can give rise to this condition.
5. Pseudoexfoliative glaucoma In this form of secondary open-angle glaucoma, a flaky material exfoliates from the outer layer of the eye lens. This material accumulates in the angle between the cornea and iris and occludes the drainage system of the eye, increasing the eye pressure and damaging the optic nerve. It is usually seen in people of Scandinavian descent.
6. Iridocorneal endothelial syndrome In this rare form of glaucoma, cells on the back of the cornea spread over the eye’s drainage tissue and across the surface of the iris. These cells also form adhesions that stick the iris to the cornea, further congesting the drainage channels. Risk Factors For Galucoma

Because chronic types of glaucoma can cause vision loss before any symptoms or signs appear, be aware of the following risk factors: Very high internal eye pressure (intraocular pressure) Being over 60 years of age Having a family history of glaucoma People of African American, Russian, Irish, Japanese, Hispanic, Inuit, or Scandinavian origin Decrease in corneal thickness and rigidity Having high degree of nearsightedness (myopia) or farsightedness (hypermetropia) or conditions that affect vision Eye injury or in certain types of eye surgery Medical conditions like diabetes, heart disease, high blood pressure, and sickle cell anemia Long-term use of corticosteroid medicines, particularly eye drops.  
Symptoms Of Glaucoma

Glaucoma usually has no early warning signs or symptoms. It progresses slowly and can go years without causing apparent vision loss.

Because the early loss of vision is of side or peripheral vision, and the visual acuity or sharpness of vision is preserved until late in the disease, most persons with open-angle glaucoma feel fine and do not notice a change in their vision at first. The condition is usually fairly advanced by the time a patient notices vision loss. Glaucoma causes vision loss that is irreversible, even with surgery.

However, there are certain signs and symptoms of glaucoma that should not be ignored. These include:

Halos around light: When the pressure rises quickly due to closed angle glaucoma, the cornea becomes waterlogged which can affect the vision leading to halos around lights.

Pain in the eyes: It is mostly seen when there is a sudden buildup of pressure. It does not act as one of the characteristic features/symptoms of glaucoma when the rise in pressure is gradual and not sudden. In some cases, vomiting or nausea accompanying severe eye pain is also seen.

Tunnel vision: It is one of the common symptoms of glaucoma. In this, the pressure on the nerves can damage the retinal nerve fibres which can lead to a characteristic pattern of vision loss. This leads to tunnel vision in which the peripheral vision is blocked. For example, when seeing a photo, you may not be able to see the peripheral picture but can see the centre portion of the picture with clarity. This can be seen when undergoing testing of the eyes.

Changes in the optic disc: The rise in intraocular pressure can lead to cupped, pale optic disc which acts as the key symptoms of glaucoma.

Enlargement of the eye: In kids below three years of age, enlargement of the eye due to raised intraocular pressure can occur. It is one of the characteristic symptoms of glaucoma. In adults, the eye cannot enlarge greatly because growth has ceased. Did you know? Glaucoma can happen in 1 eye or both eyes. This means you might have normal eye pressure in one eye but the pressure on the other eye might be on the higher end. Hence, it is wise to consult your doctor and get tested. Consult Now! Diagnosis Of Glaucoma

A comprehensive eye exam is the only approach to diagnose glaucoma with certainty. Only checking ocular pressure during a glaucoma screening is insufficient to detect glaucoma.

Your ophthalmologist will do the following during a glaucoma exam: Measure the pressure in your eyes Examine the drainage angle of your eye Check for damage to your optic nerve. Check your peripheral vision (side vision). Take a picture of your optic nerve or use a computer to calculate its size. Take a measurement of your cornea’s thickness Slit lamp is used by an ophthalmologist to check a woman’s eyes.

Before making a glaucoma diagnosis, five variables should be checked to ensure safety and accuracy. These include: The inner eye pressure The shape and color of the optic nerve The complete field of vision The angle in the eye where the iris meets the cornea Thickness of the cornea

Tests for glaucoma Two common eye tests for glaucoma patients are tonometry and ophthalmoscopy, however other tests such as perimetry, gonioscopy and pachymetry also help with the diagnosis.

1. Tonometry Tonometry is a test that measures the pressure inside your eye. Eye drops are used to numb the eye during tonometry. A small device or a warm puff of air is used to apply a small amount of pressure to the eye to measure the intraocular pressure.

Pressure is measured in millimetres of mercury (mm Hg). When the pressure in the eye exceeds 20 mm Hg, glaucoma is diagnosed. Some people, however, might develop glaucoma at pressures ranging from 12 to 20 mm Hg as each person’s eye pressure is different.

1. Ophthalmoscopy This diagnostic procedure allows your doctor to check the damage in the optic nerve. After dilatation of the pupil with eye drops, the doctor will use a magnifying tool called an ophthalmoscope and a light source to see inside the eye.This allows the doctor to check the structure and colour of the optic nerve through your eye.

If your intraocular pressure (IOP) is abnormally high or the optic nerve appears abnormal, your doctor may order one or both of the following glaucoma exams: perimetry and gonioscopy.

1. Perimetry Perimetry is a test that measures the visual field function ie. the total area where objects can be seen in the peripheral vision while the eye is focused on a central point.

You will be asked to look straight ahead while a light spot is repeatedly presented in different areas of your peripheral vision during this test. This aids in the creation of a “map” of your vision.

1. Gonioscopy Gonioscopy is a painless examination to determine whether the drainage angle, which is the area where fluid drains out of the eye, is open or closed.
2. Pachymetry Pachymetry is a painless test that determines the thickness of the eye’s cornea using a probe called a pachymeter. Did you know? Not every person with high eye pressure suffers from glaucoma. On the contrary, even people with normal eye pressure can get glaucoma. Hence, the best way to prevent glaucoma is to consult the right doctor if you experience any symptoms or go for regular eye check-ups. Here’s how to pick. Read To Know! Prevention Of Glaucoma

These self-care tips can help you diagnose glaucoma in its early stages, which is critical for preventing or reducing vision loss. Get dilated eye exams on a regular basis. Glaucoma can be detected early on in the course of a full eye checkup, before it causes major damage. If you’re under 40 years old, the American Academy of Ophthalmology recommends a comprehensive eye exam every five to ten years; every two to four years if you’re 40 to 54 years old; every one to three years if you’re 55 to 64 years old; and every one to two years if you’re over 65 years old. If you’re at risk for glaucoma, you’ll need to get your eyes checked more frequently. Inquire with your doctor about the best screening schedule for you. You should be aware of your family’s eye health history. Glaucoma is a disease that runs in families. If you’re at a higher risk, you may need to be screened more frequently. Exercise in a safe manner. Regular, moderate exercise can lower ocular pressure and may help to prevent glaucoma. Consult your doctor about an exercise regimen that is right for you. Use the eyedrops as directed on a regular basis. Glaucoma eye drops can dramatically lower the risk of glaucoma developing from excessive eye pressure. Even if you don’t have any symptoms, eye drops prescribed by your doctor must be used on a regular basis to be effective. Protect your eyes by wearing sunglasses. Glaucoma can develop as a result of serious eye damage. When utilising power tools or playing high-speed racquet sports in enclosed courts, wear eye protection.

The key to protecting your eyesight against glaucoma damage is early detection, which can be achieved through regular and comprehensive eye exams. Five typical glaucoma tests are included in a comprehensive eye exam.

It is critical to have your eyes tested on a regular basis. At the age of 40, you should get a baseline eye examination. At this age, you may notice the first indicators of eye disease and vision problems. Based on the results of this screening, your eye doctor will advise you on how often you should have follow-up checks.

If you have high risk factors for glaucoma, such as diabetes, high blood pressure, or a family history of glaucoma, you should get an eye check right once.

5 simple tips to prevent vision problems. Click To Read! Specialist To Visit

Glaucoma can be diagnosed by an ophthalmologist, who can be referred by your family doctor or general practitioner. Regular eye exams can aid your ophthalmologist in detecting this condition before it causes vision loss. Your ophthalmologist can advise you on how frequently you should have your eyes examined.

Glaucoma can be detected by an optometrist, but the illness must be diagnosed and treated by an ophthalmologist. Glaucoma cannot be diagnosed or treated by an optician.

Consult India’s best doctors online from the comfort of your home. Consult Now! Treatment Of Glaucoma Glaucoma can’t be reversed once it’s started. Treatment and regular examinations, on the other hand, can help decrease or prevent vision loss, especially if the disease is caught early.

Reduced eye pressure is used to treat glaucoma (intraocular pressure). Prescription eye drops, oral drugs, laser treatment, surgery, or a combination of these may be available depending on your situation.

1. Eyedrops Prescription eye drops are frequently used to treat glaucoma. These can help lower eye pressure by changing the way fluid drains from your eye or reducing the amount of fluid produced by your eye. Depending on how low your eye pressure needs to be, you may require more than one of the eyedrops listed below. Prescription eye drops include the following:

Prostaglandins: These reduce your eye pressure by increasing the outflow of the fluid in your eye (aqueous humour). Mild reddening and stinging of the eyes, darkening of the iris, darkening of the pigment of the eyelashes or eyelid skin, and blurred vision are all possible adverse effects. This medication is only to be taken once a day. Some of the medications in this category are: Latanoprost Travoprost Tafluprost Bimatoprost

Beta-blockers: Beta-blockers are a type of medication that prevents the body from lowering the pressure in your eye by reducing the production of fluid in your eye (intraocular pressure). Breathing difficulties, a decreased heart rate, lower blood pressure, impotence, and weariness are all possible adverse effects. Depending on your condition, this class of medicine may be given for once- or twice-daily use. Examples include: Timolol Betaxolol

Alpha adrenergic agonists: These decrease aqueous humour production and promote fluid outflow in your eye. An erratic heart rate, elevated blood pressure, weariness, red, itchy, or swollen eyes, and a dry mouth are all possible adverse effects. This class of medication is normally administered twice daily, although it can also be prescribed three times a day. Common examples are: Apraclonidine Brimonidine

Carbonic anhydrase inhibitors: These medications lessen the amount of fluid produced in your eyes. A metallic taste, frequent urination, and tingling in the fingers and toes are all possible adverse effects. This class of medication is normally administered twice daily, although it can also be prescribed three times a day. Examples are: Dorzolamide Brinzolamide Acetazolamide

Inhibitor of the Rho kinase: This medication decreases ocular pressure by inhibiting the rho kinase enzymes that cause fluid accumulation. Eye redness, irritation, and deposits accumulating on the cornea are all possible side effects. Netarsudil is an example of this class of medicine which is taken once a day.

Miotic/cholinergic agents: These medicines enhance the amount of fluid that leaves your eye. Headache, eye discomfort, smaller pupils, hazy or poor vision, and nearsightedness are all possible side effects. This type of medication is typically administered up to four times per day. These drugs are no longer commonly recommended due to the risk of side effects and the requirement for daily administration. Pilocarpine is an example of this medicine.

Note! You may notice certain adverse effects unrelated to your eyes since some of the eye drop medicine is absorbed into your circulation. Close your eyes for one to two minutes after placing the drops in to reduce absorption. You can also squeeze lightly at the corner of your eyes near your nose for one or two minutes to shut the tear duct. Remove any unused drops from your eyelid using a cotton swab. If you need to use artificial tears or have been prescribed many eye drops, space them out so that you wait at least five minutes between drops.

1. Oral medications If eye drops alone aren’t enough to lower your eye pressure, your doctor may prescribe an oral drug such as carbonic anhydrase inhibitors. Frequent urination, tingling in the fingers and toes, sadness, stomach distress, and kidney stones are all possible adverse effects.
2. Surgery To treat glaucoma, laser surgery is mostly done to aid in the drainage of aqueous humor from the eye. These treatments are frequently performed in an outpatient surgical centre or at an ophthalmologist’s office. Some of the procedures are:

Trabeculoplasty: This operation can be used instead of or in addition to drugs for persons who have open-angle glaucoma. The eye surgeon uses a laser to improve the drainage angle. As a result, fluid drains effectively and ocular pressure is reduced.

Iridotomy: It is advised for people with angle-closure glaucoma. In this, a laser is used by the ophthalmologist to make a tiny hole in the iris which aids in the passage of fluid to the drainage angle.

Trabeculectomy: Trabeculectomy is a type of glaucoma surgery that creates a new pathway for drainage of fluid inside the eye. It is used to prevent vision loss due to glaucoma by lowering the eye pressure.

Drainage devices for glaucoma: A small drainage tube may be implanted in your eye by an ophthalmologist. The fluid is sent to a collection region by the glaucoma drainage implant (called a reservoir). Following that, the fluid is absorbed into neighbouring blood arteries.

Cataract surgery: Cataract surgery is a procedure that is used to remove a cataract. The removal of the normal lens of the eye can reduce ocular pressure in some patients with narrow angles. The iris and cornea are too close together when the angles are narrow. This can obstruct the drainage duct in the eye. When the lens of the eye is removed during cataract surgery, more space is created for fluid to exit the eye. Home-care For Glaucoma

1. Eat a nutritious diet Nutritional factors have been demonstrated to influence eye health and may even prevent the progression of diseases like glaucoma. Some vitamins and nutrients may influence IOP, as well as the occurrence and progression of glaucoma. Fruits and vegetables strong in vitamins A and C, as well as carotenoids, tend to be particularly beneficial. As a result, leafy greens like spinach, collard greens, kale, and brussels sprouts are among the most vital vegetables to eat in your diet. Antioxidants may also aid in the prevention of additional optic nerve injury. Antioxidants can be found in cranberries, black and green teas, flax seeds, pomegranates, and acai berries, among other foods. Other fruits and vegetables to include in your fruit and vegetable intake include peaches, carrots, beets, green beans, and radishes. Caffeine may increase ocular pressure, so experts advise avoiding consuming too much coffee and caffeinated beverages.
2. Exercise every day Exercise on a regular basis to maintain a healthy IOP. Moderate exercise can aid in the maintenance of a healthy IOP. This is due to the fact that exercise boosts blood flow to your eyes and throughout your body. Exercising vigorously, on the other hand, might raise IOP, so don’t overdo it. Exercising can help you to maintain a healthy body mass index (BMI) as high or low BMI is known to increase the risk of glaucoma.

Remember that certain yoga poses might cause an increase in IOP, which is bad for glaucoma patients. Avoid headstands and extended downward-facing dog, legs on the wall, plough, and standing forward bends if you have glaucoma and practise yoga. Instead, practise meditation. Stress appears to raise a person’s chances of having a high IOP. Daily meditation can help reduce ocular pressure.

1. Try supplements Glaucoma supplements made from natural ingredients: If you have a vitamin or mineral shortage, you can restore it with natural and over-the-counter supplements such as: Zinc Calcium Magnesium Vitamin A Vitamin B-complex Vitamin C Vitamin E

All of these things are especially crucial for people who have glaucoma. Taking a daily multivitamin can assist if you feel like your nutrition is lacking. Vitamin supplements, on the other hand, have not been clinically shown to prevent or cure glaucoma.

1. Go for regular checkups Get your eyes checked for glaucoma. If you have a family history of the condition, this is extremely crucial. Also, maintain proper dental hygiene and schedule frequent dental visits. Periodontal (gum) disease has been linked to an increased incidence of primary open-angle glaucoma in some studies (POAG).

Even if you are considering natural alternatives to cure your glaucoma, always ask your doctor before using any medicine or supplements. Certain herbs are thought to benefit in the treatment of glaucoma are ginkgo, bilberry, and forskolin.

Read article on eye care in diabetes and tips to prevent eye complications. Click To Read!

Home-care tips for caregivers

If you have a friend or family member who suffers from glaucoma, you’ll want to learn everything you can about the disease. You will be able to provide supportive, caring, and practical assistance in this manner. Although asking for help may be difficult for your loved one, it is critical to communicate freely and precisely. Encourage him/her to be as specific as possible about how you can assist.

Here are some suggestions for assisting a loved one with glaucoma:

Aids for people with low vision

1. Low-vision aids These are specialized optical equipment that can help people make better use of their remaining vision and continue to perform the things they enjoy. Health insurance covers a lot of low-vision aids. Here are a few examples: Magnifiers made to order for reading, crocheting, and other close work Text-to-speech machines that are computerised Telescopes that may be carried in one’s hand or worn on one’s spectacles for seeing distant objects You can assist your loved one by accompanying him or her to the eye doctor on their next visit. Take a notepad and a pen or pencil with you to jot down the doctor’s advice. Create customized resources that lists organisations, products, and services that can assist people with low vision.

You or the patient might inquire with the doctor about which optical aids will be most beneficial for his or her specific needs.

1. Non-optical aids These may also be recommended by the doctor to assist a person with impaired vision enjoy life more fully. Here are several examples: Large-print books, Audio books Playing cards, clocks, phones, and pillboxes are examples of large-print goods.
2. Household security You can assist your loved one in making home improvements to improve visibility and lessen the chance of falling. Here are some ideas: Lighting: Use high-wattage light bulbs and additional lamps or task lighting to ensure that your home is well illuminated. The kitchen, bathroom, and work rooms are all important areas to concentrate on. Remove any unwanted clutter from your home. Offer to assist in the organisation and labelling of critical materials. Information about how to contact us: Make a large-print list of vital phone numbers on bold-lined paper. Include doctors, transportation, and emergency contacts on the list, and keep it in a handy location. Mark stairwells or slopes with brightly coloured tape to aid mobility. The ideal colours to use are those that contrast with the flooring. Complications Of Glaucoma

Because you can’t feel the pressure in your eye, the major concern with glaucoma is the lack of symptoms. Only a small percentage of people experience headaches, red eyes or blurred vision. If you don’t get your eyes examined on a regular basis, you may discover permanent “holes” in your vision or, in advanced stages, “tunnel vision.” Glaucoma treatment failure frequently results in blindness.

It could be a sign of an angle-closure attack if you have acute eye discomfort, redness, nausea and vomiting, and blurred vision. The iris expands or slides forward to completely block the trabecular meshwork in this acute condition.

If you have angle-closure glaucoma, you’re more likely to have an acute episode in the dark because the pupil opens up and the angle narrows in low light. There may be halos surrounding objects and slight blurring in a moderate assault, but there is no pain.

Extreme discomfort and a red, swollen eye indicate a medical emergency; if not treated, people can go blind quickly. Did you know? Normal eye pressure varies from person to person. What could be normal for 1 person may be higher for another. Eye pain is one of the common symptoms of glaucoma. Here’s more about the causes of eye pain. Read To Know! Living With Glaucoma

To effectively control your glaucoma, you will usually just need to make a few lifestyle changes. You can continue to live a full life as long as you are diagnosed early, see your doctor on a regular basis, and follow your doctor’s treatment recommendations. Schedule medication intake around daily routines like waking, mealtimes, and bedtime. Your drugs will become a natural part of your day in this manner. It’s just as vital to pay attention to your emotional and psychological health just like your physical health. Make sure to express your emotions. It can be beneficial to talk about your anxieties, especially in the beginning. Confide in your spouse, a family member, a close friend, or a clergy member. Speak with other glaucoma sufferers. It can be beneficial and soothing to share thoughts and feelings regarding living with a chronic illness.

Points to remember when outdoors

Some everyday tasks such as driving or participating in sports, may become more difficult. Some of the possible impacts of glaucoma that may interfere with your activities are loss of contrast sensitivity, glare issues, and light sensitivity.

For example, if you have difficulty seeing at night, you might want to avoid driving at night. Stay safe by changing your schedule so that you accomplish most of your trips during the day.

Sunglasses or tinted lenses can aid with glare and contrast. Yellow, amber, and brown are the finest tints to filter away glare from fluorescent lights. On a bright day, try utilising brown lenses for your glasses. Use lighter shades of yellow and amber on overcast days or at night.

Other tips and tricks that can help! Even though some glaucoma treatments make your eyes feel irritated or blurry, do not rub them. It’s a good idea to use goggles when swimming and protective glasses when doing yard work or playing contact sports if you’ve undergone eye surgery. Pay attention to the rest of your body. It’s just as vital to look after your whole health as it is to look after your eyes. It’s critical to eat healthy meals, exercise regularly, avoid smoking, limit caffeine use, and maintain a healthy weight. Before beginning any intense exercise regimen, see your physician. Drink alcohol in moderation. Make time for relaxation and reduce stress in your life. Frequently Asked Questions Will I lose my sight from glaucoma? How often should I visit my optometrist? What is the importance of family members getting eye exams? Is there a treatment for glaucoma? Is it a hereditary trait? References Weinreb RN, Aung T, Medeiros FA. The pathophysiology and treatment of glaucoma: a review. JAMA. 2014 May 14;311(18):1901-11. Foris LA, Tripathy K. Open Angle Glaucoma. In: StatPearls. Treasure Island (FL): StatPearls Publishing; 2018 Jan. At a glance: Glaucoma.. National Eye Institute. National Institute of Health (NIH). Last updated in Sep 2021. What Is Glaucoma? Symptoms, Causes, Diagnosis, Treatment by Kierstan Boyd. American Academy of Ophthalmology (AAO). Glaucoma. National Health Portal (NHP), India. Last updated in Feb 2016. Ahmad A, Ahmad SZ, Khalique N, Ashraf M, Alvi YPrevalence and Associated Risk Factors of Glaucoma in Aligarh, India – A population based study.DJO 2020;31:36-40. Križaj D. What is glaucoma? 2019 May 30. In: Kolb H, Fernandez E, Nelson R, editors. Webvision: The Organization of the Retina and Visual System [Internet]. Salt Lake City (UT): University of Utah Health Sciences Center; 1995. InformedHealth.org [Internet]. Cologne, Germany: Institute for Quality and Efficiency in Health Care (IQWiG); 2006-. Glaucoma: Overview. 2013 Jun 5 [Updated 2019 Aug 1]. Dietze J, Blair K, Havens SJ. Glaucoma. [Updated 2022 Jan 2]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan. Schuster AK, Erb C, Hoffmann EM, et al. The Diagnosis and Treatment of Glaucoma. Dtsch Arztebl Int. 2020;117(13):225-234.

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Goiter Overview Goiter refers to swelling of the thyroid gland that appears like a lump in the neck. The thyroid is a small butterfly shaped gland present in the neck. It produces thyroid hormones that help in the regulation of the body’s metabolism. They also aid in smooth functioning of the brain, heart, digestive system, and muscles.

The main causes of goiter are overactive thyroid, underactive thyroid, or any other underlying disease. It may or may not be associated with abnormal thyroid hormone level.

The main symptom is enlargement of the throat, ranging from a small lump to a huge mass. It can be seen in people from any age group starting from new born baby to elderly. Pregnant or menopausal women, people older than 40, and people who have an autoimmune disease or a family history of goiter have a higher risk of developing goiter.

The treatment of goiter depends on the cause, symptoms, and complications associated with the disease. It can be successfully managed by medications, hormone therapy, and surgery. Key Facts Usually seen in All age groups but more common in elderly Gender affected Both men and women but more common in women Body part(s) involved Thyroid gland Surrounding organs Prevalence Worldwide: 15.8 % (2020) Mimicking Conditions Branchial cleft cyst Carotid artery aneurysm Lymphatic malformation (cystic hygroma) Fibroma Lipoma Lymphadenopathy (common) Parathyroid adenoma Parathyroid cyst Pseudogoiter (common) Thyroglossal duct cyst Thyroid abscess Thyroid lymphoma Necessary health tests/imaging Physical examination and medical history Blood tests: TSH test & Antibody test Imaging tests: Thyroid ultrasound, Radionuclide thyroid scan, MRI & CT scan Biopsy Treatment Medications: Thionamide, Methimazole, Levothyroxine & Radioactive iodine Surgery: Hemithyroidectomy or lobectomy, Isthmusectomy & Total thyroidectomy See All Symptoms Of Goiter The main distinguishing feature of goiter is a swollen thyroid gland which looks like a lump at the front of the neck. It does not present any symptoms if the swelling is small. The size of the goiter may vary from person to person. In some cases, the enlarged thyroid gland obstructs the respiratory tract and larynx (voice box) and can cause symptoms such as:

Coughing Tight feeling in the throat Difficulty in swallowing Difficulty in breathing Hoarseness Snoring Some symptoms depend upon changes in thyroid function. People with goiter can have either underactive (hypothyroidism) or overactive (hyperthyroidism) thyroid gland. However, both hypothyroidism and hyperthyroidism can develop without goiter also. Symptoms of hypothyroidism The common symptoms include: Tiredness Weight gain Constipation Body aches Dry skin Increased sensitivity to cold Muscle weakness Symptoms of hyperthyroidism The common symptoms include: Weight loss Sweating Shortness of breath Diarrhea Palpitations Hair thinning Menstrual changes Tiredness Muscle weakness Did you know? Gaining too much weight could be a sign of hypothyroidism. Read in detail to know more about it. Read To Know! Types Of Goiter

Classification based on levels of thyroid hormones Toxic goiter In this, the amount of thyroid hormones produced by the enlarged thyroid gland increases. Non toxic goiter In this, the thyroid gland is enlarged without an increase in the level of thyroid hormones. Non toxic goiter is associated with the absence of hypothyroidism or hyperthyroidism.

Classification based on the cause Endemic goiter It occurs due to deficiency of iodine in a community. More than 10% of the people of the community are affected. Sporadic goiter In this a lesser number of individuals from the community are affected. It can affect people with possible factors such as family history, iodine deficiency, age (over 40 years) and female gender.

Classification based on how it enlarges Simple (diffuse) goiter In this, the whole thyroid gland swells and it feels smooth to touch. Nodular goiter In this, thyroid nodules develop in the thyroid gland. Nodules are solid or fluid filled lumps in the thyroid gland. They can be: Uninodular (with one nodule) Multinodular (with more than one nodule) Myth: Goiter and thyroid nodules are the same. Fact: No, goiter and thyroid nodules are not the same thing. Thyroid nodules are lumps in the thyroid gland while goiter is termed an overall enlargement of the thyroid gland. Bust more such myths related to thyroid disorders. Tap To Read! Causes Of Goiter

Iodine deficiency Iodine is the crucial element needed by the thyroid gland to make thyroid hormones. Lack of iodine in the diet can lead to swelling of the thyroid gland as it tries to make enough hormones. About 30% of the world’s population remains at a risk of iodine deficiency due to lack of iodine in the diet.

Know more about iodine deficiency. Click To Know!

Grave’s disease It is an autoimmune disorder in which the body starts attacking the thyroid gland. This can result in swelling of the thyroid gland.

Know more about Grave’s disease. Click To Read!

Thyroiditis Thyroiditis refers to the inflammation of the thyroid gland and can predispose to goiter. It can be due to several causes such as: Hashimoto’s thyroiditis (autoimmune disease) Infections Radiotherapy Thyroid cancer Infiltrating papillary thyroid cancer, lymphoma, and anaplastic thyroid cancer can also be a possible cause of goiter. Medications Some medicines such as lithium, phenylbutazone and amiodarone can cause the thyroid gland to swell. Goitrogenic food Goitrogens are food items that can interfere with the thyroid function. The excessive consumption of these foods may lead to goiter. It includes foods such as Brussel sprouts, kohlrabi, turnips, strawberries, radishes, cabbage, broccoli, kale, and cauliflower. Risk Factors For Goiter

Gender The chances of goiter are higher in women than men when exposed to iodine deficiency. Women have 2 to 10 times more chances of developing it than men. Age The association between age and goiter is dependent on iodine status. In case of severe iodine deficiency, the risk of developing goiter is more in teenagers. Smoking Tobacco smoking is also linked with the increase in chances of developing goiter due to the formation of thiocyanate in smokers. Thiocyanate leads to deficiency of iodine and is an important risk factor in the formation of multiple nodules.

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Pregnancy Pregnancy is also a risk factor for goiter in iodine deficient women. The incidence of goiter can be easily prevented by increasing the iodine in the diet.  
Menopause The postmenopausal women are at higher risk of developing goiter. Family history People with a family history of thyroid disorders are having higher chances of developing goiter. Radiations Studies suggest that exposure of radiation (such as during CT scans) to the thyroid gland increases the risk of nodular goiter in early years of life. This is commonly seen in people under 20 years of age. Environment The exposure to several harmful chemicals such as nitrates, benzene, formaldehyde, pesticides, bisphenol A, polychlorinated biphenyl, polyhalogenated aromatic hydrocarbons, and polybrominated diphenyl ether also increase the chances of developing goiter. These chemicals can be consumed through contaminated water, air, and food. Mutations Mutations refers to the change in the gene which is a unit of heredity. Several mutations such as change in genes RAS, SPOP (4/38), ZNF148 (6/38), and EZH1 (3/38) are known to be associated with an increase in risk of nodular goiter and benign nodules. Insulin resistance and metabolic syndromes Several studies suggest that insulin resistance and other metabolic syndromes such as obesity increases the risk of goiter and papillary thyroid cancer. Obesity in both males and females makes the individuals more prone to thyroid cancer also. Elevation in thyroid stimulating hormone (TSH) The elevated levels of TSH increases the thyroid volume over a period of time. This increases the risk of goiter, especially nodular goiter. This is commonly seen in iodine sufficient endemic goiter and in obesity. Obese person often have high levels of TSH than normal people. This makes them more prone to goiter. Hyperinsulinemia It refers to the excess insulin secretion in the body. Insulin receptor levels have been shown to be increased in thyroid cancers. It is also associated with an increased risk of thyroid nodules. Diagnosis Of Goiter 1.Physical examination & medical history The doctor physically examines the patient for any signs of thyroid enlargement. The lymph nodes adjacent to the thyroid gland are also checked. Patient is asked about his/her medical history and the symptoms he/she is experiencing for the detailed understanding of the disease. 2. Blood tests Thyroid stimulating hormone (TSH): TSH is the principal hormone that regulates the production of thyroid hormones which includes triiodothyronine (T3) and thyroxine (T4).

High level of TSH mostly indicates underactive thyroid gland (hypothyroidism). Low levels can be due to an overactive thyroid gland(hyperthyroidism).

Thyroxine total (T4): Most of the T4 in the blood is attached to a protein called thyroxine-binding globulin. The “bound” T4 can’t get into body cells. Only about 1%–2% of T4 in the blood is unattached (“free”) and can get into cells. The free T4 and the free T4 index are both simple blood tests that measure how much unattached T4 is in the blood and available to get into cells. In hypothyroidism, the thyroxine levels are lower than normal whereas in hyperthyroidism, they are elevated.

Thyroxine total (T3): Triiodothyronine (T3) Total Test measures the total levels (both free and bound forms) of triiodothyronine (T3) hormone in the blood and is usually done as a part of the thyroid profile total test.

Along with these three tests, supporting tests may be required to evaluate and monitor the condition, such as: Anti thyroglobulin antibody Thyroxine binding globulin 3. Imaging tests The following imaging tests can be used to find the cause of hypothyroidism: Thyroid scan: Thyroid scan can help to evaluate the size, shape, and position of the thyroid gland. This test uses a small amount of radioactive iodine to help diagnose the cause of goiter and check for thyroid nodules as well. Ultrasound: Ultrasound of the thyroid is used to closely look at thyroid nodules. Thyroid nodules are solid or fluid-filled lumps that form within the thyroid gland. Ultrasound can also help the doctor to evaluate if the nodules are cancerous in nature. Radioactive iodine uptake test: A radioactive iodine uptake test also called a thyroid uptake test, measures how much radioactive iodine the thyroid takes up from the blood after swallowing a small amount of it. It can help check thyroid function and find the cause of goiter.

MRI or CT scan: These imaging tests are used in case the size of the goiter is very large or the goiter has spread to the chest. 4. Biopsy During biopsy, a small amount of tissue is removed from the nodule which is then examined for the presence of cancer. It is mostly recommended in case the size of the thyroid nodule is more than ½ inch. Specialist To Visit

You should visit a doctor, if you are experiencing symptoms of either hypothyroidism or hyperthyroidism alongwith the enlarged thyroid gland. You can consult the following doctors for a diagnosis: General physician Endocrinologist Surgeon

If you are facing such an issue, seek advice from our professionals. Consult Now! Prevention Of Goiter

Take proper diet The iodine is very essential for the synthesis of thyroid hormones. If deficiency of iodine in diet is the cause of goiter, the following measures can be taken to maintain the iodine levels:

Use iodized salt Iodized salt is the major source of iodine in the diet. It has been the mainstay of the prevention of iodine deficiency. Use of iodine-containing supplements is recommended in areas where iodized salt is not available.

The recommended dietary allowance (RDA) for iodine in adult men and women is 150 microgram/day as per The Institute Of Medicine. The recommendations are higher in pregnant and breastfeeding women. It is 220 microgram/day for pregnant women and 290 microgram/day for breastfeeding women.

Consume iodine rich foods Iodine is a mineral that is mostly found in soil and oceans which makes it available in seafoods. Iodine rich foods should be included in the diet to prevent goiter and other thyroid related problems such as hypothyroidism. The iodine rich food include: Cheese Cows milk Eggs Frozen yogurt Saltwater fish Seaweed (including kelp, dulce, nori) Shellfish Soy milk Soy sauce

Limit goitrogenic foods Some foods reduce the absorption of iodine which can be a cause of goiter. Limiting such foods and avoiding their raw form may help in the prevention of goiter through balancing the body’s iodine demand. The common goitrogenic foods include: Cabbage Cauliflower Brussels sprouts Broccoli Turnips Mustard greens Kale Cassava root Lima beans Sweet potato Millet Soy and soy products Green tea Avoid overexposure to radiation Radiation at the workplace or during any treatment can cause several thyroid disorders including goiter. Avoiding radiation helps prevent goiter. Did you know? Lifestyle changes that include diet and exercise helps in maintaining and regulating your thyroid function. Read in detail about the type of foods taken during thyroid treatment. Read Now! Treatment Of Goiter The cause and size of goiter decides the treatment approach for it. Iodine supplements are recommended, if the cause is deficiency of iodine in the diet. The iodine supplements prevent the enlargement of the thyroid gland, however reducing the size of the already enlarged gland is difficult. There are various cases of asymptomatic goiter with normal thyroid function. If such cases are found to be benign in ultrasound, normal follow-up ultrasounds are required depending upon the size of nodules without specific treatment.

Depending upon the other conditions causing goiter, the following treatment approaches are discussed in detail: Medications Goiter can be due to hypothyroidism or hyperthyroidism, both of them have a different treatment approach.

Medications for hyperthyroidism In case of overactive thyroid or hyperthyroidism, there is an excess production of thyroid hormones. Here the objective of the treatment is to control the production of hormones. Antithyroid medicines such as thionamide, methimazole, and propylthiouracil are given to reduce the function of the thyroid gland.

Medications for hypothyroidism In hypothyroidism, treatment involves the use of synthetic replacement of thyroid hormone to restore the activity of underactive thyroid. The common medication used is levothyroxine. The dose of the medication (hormone) is gradually increased to avoid the chances of side effects. The hormone helps in reducing the size of enlarged thyroid gland and symptoms usually start to improve within the first week of initiating the treatment.

Anti-inflammatory medications In some conditions associated with the thyroid such as thyroiditis, anti-inflammatory medications are used to reduce the size of the thyroid. One such commonly used medication is aspirin.

Radioactive iodine In this, the iodine is given to the patient as a capsule or liquid which accumulates in the thyroid gland. This helps in shrinking the enlarged thyroid or goiter. Surgery Surgical removal of the goiter is required if the size of goiter is very large and is compressing the adjacent cervical structures. It involves removal of either the entire thyroid gland or part of it. Thyroid gland surgery is advised in the following conditions: If the nodule of the thyroid gland is cancerous or may become cancerous. This can be confirmed by biopsy. If the size of the gland has become so big that it is causing symptoms such as trouble swallowing, difficulty in breathing, or changes to the voice due to the compression of nearby structures. If the patient with an overactive thyroid is not responding to the treatment, this can be seen in conditions such as Grave’s disease. Types of surgery The removal of the thyroid gland can be performed in several ways. A certain type can be recommended to you considering the condition of your thyroid gland and overall health. Hemithyroidectomy or lobectomy: This surgery involves removal of only one lobe of the thyroid gland. It is performed in case a nodule is only present on one side of the thyroid gland. Isthmusectomy: It involves removal of the isthmus which acts as a bridge between two lobes of the thyroid. It is useful in cases where small tumors are present only on the isthmus. Total thyroidectomy: As the name suggests, it involves removing the entire thyroid gland. It is required in case of thyroid cancer, bilateral thyroid nodules, and Graves’ disease. Home-care For Goiter

Showers with cold water It is advisable to end the shower with cold water targeting mainly the thyroid gland (throat and neck). It is known to stimulate the blood flow to the thyroid gland and increases the accessibility of essential nutrients to it. This helps in the smooth functioning of the thyroid gland. Use of medications Some medications can trigger goiter, so it is important to keep a tab on medications taken for any other disease. Regular neck exercises These exercises help in reducing swelling by targeting the tissues of the thyroid gland. It is always good to recommend your doctor before including these exercises in your regimen. Some common neck exercises are:

1. Upward neck stretch: Sit on a chair Lift your chin towards the ceiling Stretch the neck as much as possible Stay in that position for a few seconds Repeat this exercise 10-12 times.
2. Sideways neck stretch Slowly bend your neck to the side Make sure that ear touches your shoulder Stretch as much as possible Repeat on the other side. Do 10 repetitions on each side.

Note: Avoid overexertion while doing these exercises. Stretch as much as you can without a feeling of discomfort or pain. Stop the exercise immediately, in case you are experiencing any pain. Gentle massages Gentle massages over the area of swelling with olive oil or coconut oil is also helpful for the patients with enlarged thyroid gland. Complications Of Goiter

The major complications that can develop due to untreated goiter are: Compression of the trachea Iodo-Basedow phenomenon, which is the development of hyperthyroidism if exposed to iodine intake Intra-nodular hemorrhage or necrosis

Complications due to hyperthyroidism: Bulging eyes, blurred vision, double vision or even vision loss Tachycardia and problems with heart rhythm. Osteoporosis Red and swollen skin Thyrotoxic crisis Complications due to hypothyroidism: Hypercholesterolemia Tingling sensation in the nerves Infertility Birth defects Miscarriage Depression Myxedema

Read more about complications of hypothyroidism. Read To Know!

Complications associated with thyroid surgery Thyroid surgery is a safe procedure, however it is associated with certain risks which includes: Bleeding in the neck Hoarseness/voice change Hypocalcemia Seromas Infection Alternative Therapies For Goiter

Home remedies Apple cider vinegar: It is mildly acidic and helps to restore the pH balance of the body. It also helps in the balanced production of hormones. It also increases the iodine absorption and is also found to reduce swelling. It can be consumed with honey and warm water, preferably on an empty stomach.

Watch this video by our expert to know more about apple cider vinegar.

Castor (Arandi) oil: It reduces swelling of the thyroid gland as it possesses anti-inflammatory properties. It has to be massaged around the swollen neck area. Leave it overnight until the swelling reduces.

Coconut (Nariyal) oil: It contains medium chain fatty acids that help in the proper functioning of the thyroid gland. It also possesses anti-inflammatory and anti-microbial properties. It is also shown to improve metabolism. It can be added to hot drinks, smoothies, or can be used in cooking for health benefits.

Bentonite clay: It is a natural clay with antimicrobial properties. It is useful in goiter due to its toxin absorption property which helps in the absorption of toxins from the goiter. This helps in reducing the swelling. A smooth paste of bentonite clay made by adding water to it is applied on the swollen area. It is then rinsed off with water after drying.

Seaweed: It is a good source of iodine that helps in the production of thyroid hormones. It also contains amino acids such as tyrosine that aids the production of thyroid hormones. It can be taken as a salad or can be added as dressing.

Dandelion leaves: It also helps in reducing swelling of the thyroid gland due to its antioxidant and anti-inflammatory properties. The leaves are grinded with some water to make a paste that is applied on the neck.

Lemon juice: It aids in removing toxins that may be present due to infection in the thyroid gland. It also possess antimicrobial properties that help in killing any microbes present in the thyroid gland.

Turmeric (Haldi): It is shown to exhibit healing properties. It also reduces swelling of the thyroid gland due to its antiinflammatory nature.

Garlic (Lehsun): Garlic stimulates the production of glutathione in the body. Glutathione increases the amount of selenium in the body which is required for normal functioning of the thyroid gland. Acupuncture This is also known to ease the symptoms of goiter. However, the efficacy of acupuncture also needs more relevant research. Living With Goiter

Goiter is not a very severe disease but it is not something that can always be treated with the right medical intervention. It is necessary to visit the doctor for the correct diagnosis and effective treatment. Correcting iodine levels It is not always necessary that the cause of goiter is iodine deficiency. After the consultation with the doctor, he/she will guide you about the recommendations of iodine needed by your body. It is necessary to correct the iodine levels to make the treatment plan work.

So, the following measures should be considered for correcting iodine levels: This recommended daily serving of iodine is 150 mcg/day for adults. It helps in the normal functioning of the thyroid gland. If the goiter is caused due to malnutrition, then getting enough iodine could help treat it. If iodine deficiency is diagnosed as the cause of thyroid, do not start taking supplements without medical consultation. This is because too much iodine can also cause several thyroid problems. The main source of iodine is iodized salt. Switch over to iodized salt, if you are using non-iodized salt to get your daily iodine serving. Frozen and processed foods are usually very salty, but in most cases they don’t use iodized salt. Don’t rely on these food items for your daily iodine intake. It is advised to reduce the iodine if the cause of goiter is excess iodine. In this case, take steps to reduce your iodine intake. For this following measures can be taken such as switching from iodized to non-iodized salt and reducing the intake of seafood and seaweed Cut your iodine intake after the consultation with your doctor, if the cause of goiter is found out to be because of excess of iodine. The excess consumption of salt can also cause several other health problems, so take it as per recommendations. Post-operative care The patients who have undergone surgery are advised to limit their physical activity. The patient can resume his lifestyle including exercise and physical activity gradually as per the surgeon’s indications. Post-operative medications In case of thyroidectomy, where all the thyroid gland is removed, lifelong thyroid supplements are required to be taken by the patient. Sometimes, calcium supplements are also required to be taken by patients after surgery. These are required for a short period of time depending on the calcium levels. Lifestyle modifications Some lifestyle changes are also required to be adopted by the patient for the smooth functioning of the thyroid gland. This includes: Limiting alcohol Limiting smoking Eating healthy Planning while traveling Patients with goiter can travel normally but they are recommended to carry the medications for the entire trip. Patients who have undergone their surgery should pack their thyroid supplements with them. Goiter during pregnancy Pregnant women should inform their endocrinologist about their condition well in advance. This will help the doctor to create a customized treatment plan for them. Frequently Asked Questions Does goiter always lead to cancer? Do benign goiters turn cancerous? Which doctor treats goiter? Can you have a goiter without thyroid problems? Can goiter make you gain weight? References Overview, goiter, Last Updated on: 15th April, 2022. Singh G, Correa R. Diffuse Toxic Goiter. Foods To Avoid For goiter, Live Strong.com. Best Home Remedies To Treat goiter Naturally, The Health Site.com. How to Shrink goiters: Can Natural Remedies Help, wiki How. Carlé A, Krejbjerg A, Laurberg P. Epidemiology of nodular goiter. Influence of iodine intake. Best practice & research Clinical endocrinology & metabolism. 2014 Aug 1;28(4):465-79. Can AS, Rehman A. Goiter. [Updated 2021 Aug 30]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan. Goiter, American Thyroid Association. Simsir IY, Cetinkalp S, Kabalak T. Review of factors contributing to nodular goiter and thyroid carcinoma. Medical Principles and Practice. 2020;29(1):1-5.

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Gonorrhea Also known as The clap Overview Gonorrhea is a sexually transmitted disease (STD) caused by bacteria, Neisseria gonorrhoeae. It is transmitted from one person to another during sexual contact which includes oral, vaginal, and anal sex. Pregnant women can also transmit the infection to the newborn. It can infect both men & women.

It targets male and female reproductive organs, urethra, eyes and throat. It can affect people of any age group but is more common in young people of age 15 to 24 years.

The disease is usually asymptomatic. Even when a patient has symptoms, they are often mild and nonspecific. The symptoms are often mistaken for a bladder or vaginal infection in females. Swabs from the genital organs are taken for examination. The presence of bacteria is confirmed either through nucleic acid amplification tests or culture methods.

The disease can be treated with antibiotics. Untreated gonorrhea can lead to long term complications such as pelvic inflammatory diseases (in women) and epididymitis (in men). One can prevent gonorrhea by adopting safe sexual practices such as using condoms, dental dams, and avoiding multiple sexual partners. Key Facts Usually seen in All age groups Adults between 15 to 24 years of age Gender affected Both men and women but more common in women Body part(s) involved Urethra Vagina Uterus Penis Cervix Throat Prevalence Worldwide: 30.6 million (2016) Mimicking Conditions Chlamydia Trichomoniasis Syphilis Mycoplasma genitalium Herpes simplex virus Conjunctivitis Urethritis Cervicitis Proctitis, Pharyngitis Arthritis Necessary health tests/imaging Physical examination Nucleic acid amplification test (NAAT) Culture test Smear test Treatment Ceftriaxone Doxycycline Gentamicin Azithromycin Gemifloxacin Amoxicillin Erythromycin See All Causes Of Gonorrhea

Gonorrhea is caused by an obligate pathogen, Neisseria gonorrhoeae. Obligate pathogens are the bacteria that transmit disease from one host to another. These bacteria cannot survive outside the host body.

The bacteria is mainly present in the discharge of penis & vagina. The disease can be transmitted through: Unprotected vaginal, anal & oral sex Sharing of contaminated vibrators & sex toys Infected mother to baby during childbirth

Neisseria gonorrhoeae cannot survive on the surfaces outside the body. Due to which, the infection of gonorrhea does not spread by kissing, hugging, or sharing swimming pools, toilet seats, towels, or utensils. Types of Gonorrhea

Gonorrhea can be classified as either uncomplicated or complicated. Uncomplicated gonorrhea This type is much more common and causes urogenital, anogenital, or pharyngeal infections. Complicated gonorrhea The infection that leads to the spread of bacteria to joints and other tissues is considered as complicated gonorrhea. Symptoms Of Gonorrhea

The incubation period of gonorrhea (the time between exposure to the infection and the appearance of symptoms) is 10 days in women and 1-3 days in men. The various symptoms are listed below: A. Symptoms of uncomplicated gonorrhea in men Urethral discharge Dysuria (painful urination) Urgency Frequent urination Urinary itch Painful erection B. Symptoms of uncomplicated gonorrhea in women Dysuria Hematuria (blood in urine) Inflammation of the anus Increase in vaginal discharge

Here’s more on the common causes & treatment of vaginal discharge.

C. Symptoms of complicated gonorrhea in men

1. Epididymitis: It refers to inflammation of epididymis(a coiled tube attached to each of the two male reproductive organs, the testes). The typical symptoms include: Swelling of the epididymis Severe pain in epididymis, groin and lower abdomen Discharge from the urethra
2. Seminal vesiculitis: It refers to the inflammation of the tube that produces fluid for the semen known as the seminal vesicles. The typical symptoms include: Dysuria (painful urination) Frequent urination Hematuria (passage of clear urine with blood) Hemospermia (blood in semen) Lower abdominal pain
3. Prostatitis: It refers to the inflammation of the prostate gland. The typical symptoms in gonorrhea include: Chills Fever Frequent urination Pain or discomfort in the pubic region D. Symptoms of complicated gonorrhea in women
4. Pelvic inflammatory disease: It refers to the inflammation of the female genital tract). It is characterized by the following symptoms: Chills Fever Anorexia (loss of appetite) Nausea Vomiting Lower abdominal pain Irregular vaginal bleeding Abnormal vaginal discharge
5. Perihepatitis: It refers to the inflammation of the liver capsule. It is characterized by: Sudden pain in the upper abdomen Fever Nausea Vomiting E. Symptoms of gonorrhea at other sites
6. Oral gonorrhea: It is also known as pharyngeal gonorrhea. Oral contact with either penis or vagina can cause oral gonorrhea. Usually oral gonorrhea remain asymptomatic but can cause following symptoms: Sore throat Difficulty in swallowing food Redness of the throat White spots on the throat Swollen lymph nodes in the neck Fever

These symptoms are common for men and women and usually take 7-21 days to appear after oral contact with the infected genitals. Kissing does not spread oral gonorrhea as bacteria do not infect the mouth and tongue.

1. Gonococcal conjunctivitis (GC): GC infects the eyes and spreads through the direct contact of the eye with the infected secretions of the genitals.

An infected pregnant woman can also transmit the infection to the neonates during delivery. It occurs due to exposure of the neonate to the vaginal secretions which contain bacteria. When it occurs in neonates, GC is also known as gonococcal ophthalmia neonatorum. Symptoms take 24 to 28 hours following exposure to the bacteria and include: Red eyes Thick pus in the eyes Swelling of the eyelid and conjunctiva Turbid and foggy cornea

1. Proctitis: It refers to the inflammation of the lining of the rectum. It is developed due to anal-genital intercourse. In most of the cases, it is asymptomatic. Some patients may experience symptoms such as : Itching and burning sensation in anus Discharge from the anus Rectal bleeding Blood in the stool Rectal pain Tenesmus (frequent and urgent feeling of passing the stool) Risk Factors For Gonorrhea

You are at higher risk of gonorrhea if you:

Have unprotected oral, anal or vaginal sex with an infected partner Have low immunity Have been diagnosed with gonorrhea in the past Are having multiple sexual partners Have sexual partner who has multiple partners Are sexually active Are a sex worker Have sex with somone from endemic are, having previous gonorrhea, having any sexually transmitted infections & having human immunodeficiency infection (HIV)

Lack of education & low socioeconomic status also increases the risk of developing gonorrhea. If the condom breaks during sex with an infected partner, it increases the risk of gonorrhea. Men who have sex with men (MSM) are more likely to cause gonorrhea. Diagnosis Of Gonorrhea

The laboratory confirmation is done through the detection of bacteria in samples from the urinary tract, rectum, throat or eyes. In various cases, urine samples are also used. In case of any symptoms of gonorrhea, abstain from any kind of sexual activity until it is confirmed negative by the tests. The following tests helps in the diagnosis of gonorrhea:

1. Physical examination: It includes looking for any signs of gonorrhea. Manifestations such as discharge from throat, rash, eye symptoms, and pain in abdomen are evaluated by the health-care provider.
2. Nucleic acid amplification test (NAAT): This method detects the genetic material of the Neisseria gonorrhoeae in either urine or swab samples of the patients. The swab sample is taken from urethra for males. In females, the sample is taken from vagina or cervix. In case of rectal or pharyngeal infection, samples may be taken from rectum or throat respectively.
3. Culture: This test is one of the most widely used tests for gonorrhea as it has a specificity of 100%. The test can be done from the samples collected from the throat, urethra, vagina or rectum except the urine in both men and women.
4. Smear test: This test is usually used to diagnose uncomplicated gonorrhea in men. It involves examination of urethral smears under the microscope. Prevention Of Gonorrhea

Gonorrhea is a sexually transmitted disease (STD) that spreads by sharing sexual fluids. This can be prevented by following safer sex practices like: Using condoms, dental dams or latex/nitrile gloves while having oral, anal or vaginal sex Getting tested for STDs regularly, if you are sexually active Avoiding sex with your partner until he/she has finished his/her treatment for any STD Washing hands after touching your partner’s genitals Washing the sex toys with soap and water regularly Using condoms on sex toys Avoiding multiple partners

Note: Washing the genitals, urinating, or douching after sex will not prevent gonorrhea.

Are you using condoms in the right way? Here’s 9 condom mistakes that you should avoid. Click To Read! Specialist To Visit

Gonorrhea can affect anyone who is sexually active. You should immediately consult the doctor if you fall under the following category: If you have symptoms such as genital discharge, burning during urination, rash, unusual rash etc. If your partner has been recently diagnosed with any STD

The annual gonorrhea screening is also recommended, if you: Are young and sexually active Are old but have risk factors such as multiple sex partners etc.

Pregnant women should also be tested for any STD including gonorrhea as a part of routine examination. This will help in reducing complications in the fetus.

In most cases, the best place to visit is a sexual health clinic also called a genitourinary medicine clinic (GUM). The specialists who can help treat this infection include: General physician Infectious disease specialist Gynecologist

If you are falling into any of the categories mentioned above, seek advice from our professionals. Book Now! Treatment Of Gonorrhea Gonorrhea can be treated by antibiotics. The various treatment options for different symptoms or types of gonorrhea are discussed as follows: Urogenital infections The following antibiotics are prescribed for managing urogenital infections: Ceftriaxone Doxycycline

If a person is allergic to ceftriaxone other antibiotics can be used such as: Azithromycin Gemifloxacin Gentamicin Gonococcal conjunctivitis Newborns who developed gonococcal conjunctivitis are treated with ceftriaxone as per their body weight. The eyes should be washed every hour with normal saline. Mothers of infected newborns should be examined, and those with gonorrhea should be treated. Gonorrhea during pregnancy Erythromycin or amoxicillin are the drug of choice for treating gonorrhea during pregnancy. Follow-up Usually follow-up testing is not recommended for rectal and genital infections. However, if the symptoms persist even after getting treatment for a few days, he/she should consult the doctor. Re-evaluation after 7-14 days of treatment is recommended for throat infection. Re-test is advised after 3 months of treatment to check re-infection. Sexual partner management If you are diagnosed with gonorrhea, it is important to test the sexual partner, if you had sex before the onset of symptoms or within two months of the diagnosis. Any kind of sexual activity should be avoided before the completion of treatment. The mother of a neonate diagnosed with gonococcal conjunctivitis should be tested for gonorrhea alongwith her sexual partner. Complications Of Gonorrhea

Untreated gonorrhea usually spread to other part of the body leading to several complications: 1. Pelvic inflammatory disease (PID) Gonorrhea can spread from vagina to the other reproductive parts of the female such as the fallopian tubes & uterus. The symptoms of PID include fever & abdominal pain and can lead to reproductive complications such as: Long term pelvic pain Infertility Internal abscesses Endometritis Ectopic pregnancy 2. Pregnancy related complications Gonorrhea in pregnant women increases the chances of miscarriages, premature labor, and first trimester abortion.

A pregnant woman can also pass the infection to the fetus. It can develop several abnormalities in the baby such as conjunctivitis, joint pain, blindness, and blood infections.

However, early treatment of the pregnant woman can reduce the chances of these complications. 3. Infertility in men Gonorrhea can cause a painful infection in the testicles and prostate gland. It can also cause inflammation of the epididymis. All these changes can affect the fertility in men. 4. Disseminated gonococcal infection (DGI) DGI occurs as a result of untreated gonorrhea over a long period of time. In DGI, infection spreads through the bloodstream and can cause sepsis. It can also lead to conditions such as Septic arthritis (inflammation of the joints) Tenosynovitis (inflammation of a tendon and its sheath) Endocarditis (inflammation of the inner lining of the heart’s chambers and valves) Dermatitis (inflammation of the skin) 5. Fitz- Hugh-Curtis Syndrome It is also known as perihepatitis. It is developed due to PID and is characterized by inflammation of the liver capsule. It causes formations of adhesions in the liver that results in persistent pain. Did you know? Gonorrhea, if not treated, increases the risk of acquiring or spreading HIV infection. Read more about HIV infection. Tap To Read! Home-care For Gonorrhea

Home remedies Gonorrhea can be easily treated with antibiotics. However, the following home remedies can be used as an adjunct to the antibiotics:

1. Garlic (lehsun): It possesses antibacterial properties and can be used to combat bacterial infections like gonorrhea.
2. Apple cider vinegar: It is well known for its antibacterial properties. It is consumed every morning using a metal straw as it can abrade the teeth.
3. Aloe-vera gel: It moisturizes the skin and fastens the recovery of wounds due to its antibacterial and antiinflammatory properties.
4. Goldenseal: This plant is also known for its antimicrobial properties. It is available in capsule and cream form. It is advised to take recommendation from the doctor for the right dosage before taking or applying it.
5. Echinacea: This plant is used to reduce inflammation in the genitals due to its anti-inflammatory properties. It is available in the form of creams and gels. Living With Gonorrhea

Though gonorrhea can be managed with antibiotics a few important points are to be kept in mind: Avoid sexual activity Patient diagnosed with gonorrhea should avoid any kind of sexual actvity for atleast 1 week following antibiotic treatment. It is advised to resume the sexual activity only after the symptoms subside. Retesting for gonorrhea It is advised to test for the infection after the completion of the therapy or if symptoms persist for a long period of time. Retesting helps in identifying any antibiotic resistance and avoiding further treatment failure. Testing for other sexually transmitted infections(STIs) Infected patients with gonorrhea are also at increased risk of contracting other STIs, including HIV. So, it is necessary for the patients to get themselves tested for other STIs such as HIV infection. Frequently Asked Questions Is gonorrhea contagious? When can I have sex after gonorrhea treatment? Can I get gonorrhea more than once? What to do If I am pregnant and have gonorrhea? References Gonorrhea (the clap), Health direct, Updated on: September, 2021. Gonorrhea, Overview, NHS, Updated on: 15th September, 2021. Gonorrhea: What should know, American Family Physician, Updated on: May, 2006. Causes and risk factors of gonorrhea, Verywell health, Updated on: 22nd December, 2021. Sexually transmitted disease: Natural remedies to treat gonorrhea at home, Healthsite.com, Updated on: 15th September, 2009. Dela H, Attram N, Behene E, Kumordjie S, Addo KK, Nyarko EO, Kyei NN, Carroll JN, Kwakye C, Duplessis CA, Adams N. Risk factors associated with gonorrhea and chlamydia transmission in selected health facilities in Ghana. BMC Infectious Diseases. 2019 Dec;19(1):1-8. Costumbrado J, Ng DK, Ghassemzadeh S. Gonococcal Conjunctivitis. [Updated 2021 Sep 14]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan. Oral Gonorrhea Symptoms, MedicineNet. Conjunctivitis (Pink eye), Center For Diseases Control and Prevention, Updated on: 4th August 2021. Gonorrhea – CDC Fact Sheet (Detailed Version), Center For Diseases Control and Prevention, Updated on: 22nd July 2021. Safer Sex, Planned Parenthood. What Is Gonorrhea? Symptoms, Causes, Diagnosis, Treatment, and Prevention, Everyday Health, Updated on: 7th January, 2021. Springer C, Salen P. Gonorrhea. [Updated 2022 Apr 21]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan. National Center for STD Control, Chinese Centers for Disease Control and Prevention, Committee of STD, Branch of Dermatovenereology, Chinese Medical Association, Committee of STD, Chinese Dermatologist Association, Wang QQ, Zhang RL, Liu QZ, Xu JH, Su XH, Yin YP, Qi SZ, Xu DM. National Guidelines on Diagnosis and Treatment of Gonorrhea in China (2020)#. International Journal of Dermatology and Venereology. 2020 Sep 1;3(03):129-34.

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Gout Also known as Crystalline arthritis, Gouty arthritis, and Urethritis, Tophaceous gout and Podagra Overview Gout is one of the most common and painful forms of arthritis. It causes inflammation in the joints due to high levels of uric acid in the body. Uric acid is a waste product which in excess can lead to accumulation in the form of urate crystals in the joints.

The symptoms of gout include swelling and redness in joints along with sudden sharp pain. The most common area to be affected by high uric acid is the joint at the base of the big toe. Gout in feet is immensely tender and painful that even a mere touch on the swollen area becomes unbearable.

Gout often causes a burning sensation with severe pain that often results in an emergency visit to the hospital. However, with early detection and keeping the uric acid levels under control, gout can be controlled without much suffering.

In addition to medicines, diet also plays a key role in the management of gout. Some beneficial foods to eat with gout include green leafy vegetables, fruits, legumes, etc. Eggs and low-fat dairy products like slim milk and yogurt also qualify as foods good for arthritis and gout. Key Facts Usually seen in Adults between 40-60 years of age Gender affected Both men and women Body part(s) involved Joints Knee Foot Wrist Elbow Hand Prevalence Worldwide: 0.54% (2017) India: 0.12 - 0.19% (2022) Mimicking Conditions Septic arthritis Stress fracture Pseudogout Rheumatoid arthritis Cellulitis Psoriatic arthritis Necessary health tests/imaging Blood test: Uric acid Urine test: Uric Acid Imaging tests: X-ray of affected joint, Ultrasound, Conventional CT (CCT), Dual-energy CT (DECT), Magnetic resonance imaging (MRI), Nuclear scintigraphy & Positron emission tomography (PET) Other tests: Synovial fluid analysis & Synovial biopsy Treatment Nonsteroidal anti-inflammatory drugs (NSAIDs): Naproxen, Indomethacin, Ibuprofen & Celecoxib Corticosteroids:Dexamethasone, Methylprednisolone, Prednisolone, Prednisone & Triamcinolone Colchicine IL-1 blockers: Canakinumab Xanthine oxidase inhibitors (XOI): Allopurinol & Febuxostat Urate lowering drugs: Losartan, Flurbiprofen & Probenecid Uricosurics: Sulfinpyrazone & Benzbromaron See All Causes Of Gout

Gout arises from deposition of urate crystals in joints. Urate crystals are formed due to high levels of uric acid in the body. Uric acid is formed by the breakdown of purine in the body. Purine is a natural substance found in the body. It is also found in certain foods.

Usually, uric acid is excreted via the kidneys into the urine. However due to overproduction of uric acid or reduced excretion of uric acid, it can build up, forming sharp, needlelike urate crystals. Once the blood is saturated with urate crystals, they are deposited in the bones and joints leading to pain, inflammation and swelling. The main factors affecting serum urate concentration include: Overproduction of uric acid This condition is known as hyperuricemia, where uric acid level in the blood rises above the normal i.e. 6.8 mg/dL (milligrams per deciliter). The causes include:

Diet: Foods rich in purines such as cooked or processed food from animal and seafood origin is a key element of increasing uric acid precursors. They are: Red meat Fish Alcohol (particularly beer and spirits)

Endogenous urate production: Turnover of urate crystals increases in the following conditions: Chronic haemolytic anemia Haemoglobinopathies Secondary polycythaemia Thalassaemia Glucose-6-phosphate dehydrogenase (G6PD) deficiency, Lesch-Nyhan syndrome Malignancies (cancer) Lead poisoning

Drugs: Some drugs are linked with overproduction of uric acid. These include: Diuretics Low dose salicylates Pyrazinamide Ethambutol Cytotoxics Decreased excretion of uric acid Most urate excretion occurs in the kidneys while the rest is excreted through the gastrointestinal tract (GIT). Reduced renal excretion is seen in the following: Hypertension Hypothyroidism Sickle cell anemia Hyperparathyroidism Chronic renal disease

On the basis of causes, gout can be classified into two categories, namely: Primary gout: That is caused due to either overproduction or underexcretion of the uric acid. Secondary gout: That is caused due to chronic kidney disease or prolonged medications affecting the kidney’s ability to remove uric acid from the body . Stages of gout Gout can progress in four stages, starting with asymptomatic gout under which the individual experiences no symptoms of the medical condition; however, the levels of uric acid keep on increasing in the body.

This stage is followed by the acute gout stage, accompanied by symptoms of severe pain and redness and can last for a few weeks.

The third stage is intercritical gout wherein recurring gout attacks are experienced without pain in between the attacks.

The final stage is chronic tophaceous gout, leading to other medical complications, especially kidney disease. Symptoms Of Gout

An attack of gout generally happens overnight, which is so sharp and sudden that it often wakes up the affected person in the middle of the night with a burning sensation in the affected area. Acute gout attacks can last for somewhere between 3 and 10 days, and if you do not get the uric acid treatment in time, it can become chronic, causing permanent damage to your joints.

Some of the common symptoms and signs of high uric acid include: 1. Severe joint pain Gout generally causes severe pain in the joint of the big toe, but the attack can occur in other joints as well, like the knee, ankle, foot, wrist, hand, and elbow or even fingers.

This pain is caused due to high uric acid in the joints, which can go out to the space between the bones and end up running against the soft lining of the joints, causing unbearable inflammation. This scenario is referred to as a gout attack. The pain is at peak within the first 4 to 12 hours of the attack and generally occurs either early morning or after midnight. 2. Prolonged discomfort Even after the episode of the gout attack, the joint discomfort can last for days or weeks, but the pain gets subsidized. However, any gout attack in the future on the same joint generally lasts longer, causing sharper pain. Such later gout attacks can also affect other joints which were not affected in the previous strikes. 3. Swelling and redness The area affected by gout swells up and becomes red with a feeling of tenderness, making it extremely sensitive to any sort of touch or weight over it. In cases of severe gout attacks, high uric acid can also turn the affected area purple in color. 4. Trouble in movement As the gout attack becomes more frequent over one joint, high amounts of uric acid crystals get deposited in the joints. This reduces the ease of movement or the comfort of movement, which can also get converted into abnormal movement of the joints. This is one of the common high uric acid symptoms of chronic gout. 5. Tophi The presence of high uric acid can lead to crystallization of the compound in the affected joint, resulting in the formation of small and firm lumps called tophi. These visibly large urate crystals are white and generally form near the toes, knees, elbow, fingers, wrist, or ears. Tophi, which generally occurs in the case of chronic tophaceous gout, can get swollen up to the point of a breakdown or burst and leak a pus-like fluid.

The fluid generally does not cause any pain but can prevent the affected person from doing normal activities on a day-to-day basis. In some cases, tophi can also potentially damage the cartilage and bone, leading to extreme pain while using the joint for routine activities.

In addition to the above-mentioned symptoms, another one of the common symptoms of gout in the ankle includes shiny and flushed skin. This is one of the externally visible symptoms, which can help you with gout’s early detection. Apart from this, there may also be a burning pain in the ankle. Did you know? Gout is also known as “Disease of Kings” as many wealthy kings suffered from it, owing to their lavish standard of living and high consumption of alcohol. Risk Factors For Gout

The root cause of gout is high uric acid concentration in the body, and thus the factors leading to a higher level of uric acid in the body are also the risk factors of gout, which primarily include: Non- modifiable factors

1. Family history If the history of gout attack runs through the family, then the chances of a person inheriting the genes, which makes it more likely that the kidney would not drain or urate the uric acid out of the body, increase, even if the kidneys are healthy. This happens especially when parents or grandparents have suffered from gout during their lifetime.
2. Gender and age Men are more prone to developing gout as their body naturally contains a higher level of uric acid, and the risk is at its peak during the age of 30-50 years. Whereas for women, the levels of uric acid generally tend to be lower than that of males. However, after menopause, the concentration of uric acid in a female body reaches almost equivalent to that of a male body and puts them at an equivalent risk of developing gout.
3. Surgery or trauma If an individual has undergone surgery or a traumatic experience, then the chances of developing gout increase. This is true especially in the case of an organ transplant due to the effects of the anti-rejection drugs prescribed to the patient after such surgical procedures.
4. Race/ethnicity The risk of development of gout varies across populations according to race and ethnicity. According to studies, African Americans had a twofold increased risk of gout when compared to other people.
5. Genetic factors Genetic aberrations in genes SLC22A12 SLC22A12 which are integral to uric acid absorption can also predispose to gout.
6. Other chronic diseases Other ailments like high blood pressure, diabetes, heart diseases, and kidney-related diseases put an individual at a greater risk of being vulnerable to developing gout on top of foot, ankle joint, and other joints. Thus, if you are suffering from any medical condition, it is prudent that you consult a doctor to avoid the risk of developing gout further. Modifiable factors
7. High purine diet Food and beverages with high purine content like red meat, shellfish, or beer increase the risk of high levels of uric acid in the blood and, thus, the risk of developing gout. To reduce uric acid levels in your blood and avoid the risk of gout on top of foot or any other joint, you should ensure that you eat a balanced diet with low purine content.
8. Obesity Being overweight increases the amount of uric acid produced by the body, which puts a lot of stress on the kidneys to excrete it. This often leads to saturation of uric acid in the blood due to the inability of the kidney to eliminate high levels of uric acid daily. Thus, to avoid the risk of gout, particularly chronic tophaceous gout, you must exercise and maintain an active physical regime to keep your body mass index (BMI) in check and reduce uric acid content in the body.
9. Certain medications Some medications used to control hypertension or low dose aspirin or beta-blockers can also cause a higher level of uric acid concentration in the blood and hence increasing the risk of gout. Thus, it is always wise to check the side effects of your medications with your doctor before consuming them so that you can find a solution to reduce uric acid concentration in your body.
10. Alcohol consumption Studies have reported that alcohol intake increases the risk of developing gout. Alcohol ingestion increases lactate levels which inhibit uric acid excretion via the kidneys. Alcohol also prompts purine degradation, leading to an increased uric acid level.
11. Fructose/sweetened- sugar beverages Increased quantities of fructose and sugar-sweetened beverages (main sweetener being fructose) in the diet, contribution to gout. Did you know? Eating chocolates may help relieve the symptoms of gout. Chocolates have polyphenols that act as antioxidants and anti-inflammatory agents. Chocolates can also lower uric acid concentration in the body along with reducing raised blood pressure levels; thereby, providing much-need pain relief during gout attacks. Diagnosis Of Gout

A diagnosis of gout is usually simple as it is externally visible due to inflammation and redness of the skin of the affected joint. Any person experiencing symptoms like swelling, sharp pain, redness, and tenderness over their joints should consult a doctor to check the presence of gout and get the right uric acid treatment.

A diagnosis for gout is usually done in any of the following ways: Physical examination Depending upon the case, a doctor might be able to confirm the presence of gout via a physical examination of the patient as the effects of a gout attack are visible near and over the affected skin area. During physical examinations, the most commonly and easily found gout is gout on top of foot. Blood test Uric acid : This test checks the concentration of uric acid in the blood, which can hint toward the possibility of the presence of gout as the correlation between uric acid and gout is quite high. A uric acid level in the blood over 6.8 mg/dL (milligrams per deciliter) is high. However, not everyone with a high uric acid level has gout. Urine test Uric acid: The uric acid urine test can also be used to measure the level of uric acid in urine. A 24-hour urine sample is needed for the same. Imaging tests X-ray of affected joint: The medical condition can also be detected with the help of an x-ray examination of the affected joint. An x-ray enables the doctors to check the presence of uric acid crystals as well as bone damages in the affected area. Ultrasound: Ultrasound is used for detection of joint effusion, synovitis (inflammation of soft tissues lining the joint spaces) and evaluation of cartilage, bone contour, and crystal deposition. Conventional CT (CCT): CT is characterized by excellent resolution and high contrast, hence it is the best technique for the assessment and characterization of urate crystals. Dual-energy CT (DECT): This new imaging technique for diagnosis of gout that allows the differentiation of deposits. Magnetic resonance imaging (MRI): MRI helps in assessment of inflammation, synovial thickening and erosion of joints. Nuclear scintigraphy: It uses very small, tracer amounts of radioactive molecules to diagnose diseases involving bone and soft tissues. Positron emission tomography (PET): This technique is helpful when gout presents at unusual locations. Other tests Synovial fluid analysis: Synovial fluid is a thick, straw-colored liquid found in small amounts in the joints. Its analysis helps to diagnose and treat joint problems like Gout. Synovial biopsy: Synovial membrane refers to the tissue lining a joint. The examination of this tissue helps in diagnosing gout, or rule out other infections.

Here’s more on what uric acid test means and what the results indicate. Click To Know! Celebs affected Jared Leto American actor Jared Leto, best known for movies like Fight Club, Dallas Buyers Club, and Requiem for a Dream, developed gout after gaining weight for a film. Jim Belushi American actor and comedian Jim Belushi also suffered from gout. He got to know about his medical condition when he suffered from a gout attack during one of his performances. Prevention Of Gout

Gout can be prevented in several ways, usually, a combination of such ways can lead to a reduced level of uric acid in the body and hence gout pain relief. Some of the ways in which you can relieve gout knee pain, gout pain in foot, and other joints are: 1. Avoid or limit alcohol Alcohol consumption impacts the ability of the body to excrete uric acid from the system, which as a result increases the concentration of uric acid in the blood and poses a greater threat of developing or undergoing a gout attack. Similarly, fructose-sweetened drinks also cause the same condition, and hence their consumption should be either avoided or limited to reduce the risk of gout. 2. Increase intake of water Increasing water consumption aids the kidney in flushing out the uric acid with urine and hence, reducing the chances of developing urate crystals in the body. However, the ideal amount of water consumption varies on an individual basis, depending upon their age, sex, level of fitness, and other factors.  
3. Maintain a healthy body weight An individual with healthy body weight is less vulnerable to a gout attack, as obesity leads to a higher level of uric acid in the body, making the job of kidneys of flushing out the uric acid difficult. However, it is important to note that weight loss should not be sudden as it can cause other complications. You should aim for a gradual and steady weight loss journey that will help reduce the risk of developing gout. 4. Avoid a high purine diet Certain food items naturally contain a higher level of purine, which can lead to a higher level of uric acid in the body. This is because purine is naturally broken down in the body to form uric acid. Food items like red meat, tuna, turkey, bacon, and alcoholic beverages should be either avoided or consumed in a limited quantity to avoid the risk of developing a higher concentration of uric acid in the blood. Foods good for arthritis and gout include nuts, olive oil, berries, dark leafy greens, garlic, and onion. 5. Avoiding certain medications Medications like diuretics can cause hyperuricemia - which is a higher level of uric acid concentration in the blood. If someone is consuming such medications, they should consult their doctor to see if there is a replacement or substitute for such drugs. Otherwise, regular consumption of such drugs can lead to the formation of urate crystals in the body. Specialist To Visit

Gout can lead to potential bone damages, and hence if a person experiences a sudden sharp gout pain in the foot or other joint along with redness and swelling, they should not ignore such gout symptoms and consult a doctor at the earliest.

Specialists that can help and consult with gout are: General physician Orthopediacian Rheumatologist

Consult India’s best doctors from the comfort of your place with a single click. Book Now! Treatment Of Gout

A gout pain relief can be treated on the basis of the following: Treatment of gout attacks

1. Nonsteroidal anti-inflammatory drugs (NSAIDs): These drugs reduce both pain and inflammation. However, in some cases they may cause side effects, including ulcers, bleeding, and stomach pain.

Some of the common examples of these drugs include: Naproxen Indomethacin Ibuprofen Celecoxib

1. Corticosteroid medications: Corticosteroids help reduce gout pain and inflammation. They are available as both oral pills and in the form of injections. Corticosteroids used for gout include: Dexamethasone Methylprednisolone Prednisolone Prednisone Triamcinolone
2. Colchicine: This drug has been found to be effective in reducing inflammation which causes pain, swelling and other symptoms of gout. However, it is contra-indicated in severe cases of chronic kidney diseases.
3. IL-1 blockers: Canakinumab, a long lasting antibody to IL-1 beta, is considered for the management of gout flares in patients with frequent flares contraindicated to NSAIDs, colchicine and steroids (oral or injectable). Treatment of chronic gout
4. Xanthine oxidase inhibitors (XOI): XOI works by inhibiting uric acid synthesis. This class includes: Allopurinol Febuxostat
5. Non-steroidal anti-inflammatory drugs: Long term treatment with non-steroidal antiinflammatory drugs is sometimes used to prevent recurrent gout.
6. Urate lowering drugs: These drugs act by reducing serum urate concentration. Initiation of urate lowering drugs is associated with an increased risk of gout flares due to crystal mobilization. This should be explained to the patient before the treatment. These include: Losartan Flurbiprofen Probenecid
7. Uricosurics: Uricosuric drugs should not be used in patients with significant kidney impairment or a history of kidney stones. Drugs used are: Sulfinpyrazone Benzbromaron Use ice pack for immediate relief from gout pain Gout attacks are highly painful and often need instant remedies to relieve the distress. In such situations, you can apply an ice pack to control swelling and pain. However, you should try not to keep the ice pack for more than 20 minutes at a time. However, if pain or swelling still persists, consult a doctor right away. Click Here! Home-care For Gout

Gout is a rare medical condition but is known to cause high levels of pain and discomfort. If someone at your home is suffering these sudden gout attacks and pain breakout, you can practice the following do’s and don’ts, especially to keep a check on food to eat with gout. Do’s Drink at least 9-10 glasses of water to keep yourself well-hydrated. Include citric fruits such as orange and lemon in your diet. Eat more cherries to reduce inflammation in the body. Drink coffee to lower uric acid levels in the body. Elevate your joint to reduce swelling. Avoid taking stress as it increases the inflammation in the body. Don’ts ❌ Do not consume alcohol ❌ Do not consume fructose-sweetened drinks ❌ Do not consume foods containing high levels of purine ❌ Do not delay seeking medical consultation for gout ❌ Do not starve yourself for losing weight ❌ Do not consume sugar-rich foods

Here’s more on what to eat and what to avoid in case of gout. Click To Read! Complications Of Gout

Chronic tophaceous gout can lead to the following medical complications: 1. Joint damage and deformation Chronic gout can lead to swelling in your joints, deformation of joints, permanent joint damage, as well as permanent movement disabilities. In severe cases, individuals suffering from gout pain in foot and other joints can also require joint replacement surgery. 2. Tophi Lumps of urate crystals are called tophi. They harden the skin over and near the joints, damaging cartilage. In rare cases, Tophi can also occur on the ears. These pointed crystals usually do not cause gout pain in the foot or other joints but can cause severe damage, restricting their movement permanently. 3. Kidney stones Uric acid and gout go hand in hand. Therefore, individuals suffering from gout are more vulnerable to developing kidney stones in their urinary tract as the kidneys filter the uric acid. 4. Kidney damage and chronic kidney diseases As the uric acid passes through the kidneys, its high concentration can damage the organs and cause permanent damage, leading to various chronic kidney diseases (CKDs) such as loss of kidney function, glomerulonephritis, and chyluria. 5. Psychological and emotional breakdown A chronic tophaceous gout can cause permanent walking issues due to chronic gout knee pain and discomfort in other joints. This can affect the mental and emotional well-being of individuals suffering from medical conditions. This can further lead to severe issues, including anxiety and depression. Thus, if you have been suffering from uric acid and gout issues, it is wise to reach out for medical help to maintain your physical and emotional health. Alternative Remedies For Gout

You can make use of the following home remedies for gout pain relief and its treatment. Naturotherapy

1. Cherries: Consumption of cherries, including strawberries, blueberries, red cherries, etc., help prevent gout attacks and relieve gout knee pain and discomfort in other affected joints.
2. Ginger (adrak): Ginger is a great culinary ingredient for reducing inflammation in joints. You can have ginger by grading it in veggies, tea, or you can even try having raw ginger. Studies have found ginger to be effective in reducing gout pain. It ranks significantly among the foods good for arthritis and gout.
3. Celery (ajmoda): Celery is known for treating urinary issues. You can consume its extract, sticks as well as seeds to reduce the inflammation in your joints.
4. Hibiscus (gudhal): Hibiscus is a traditional herb that can be consumed in tea or with your regular food to treat gout at home. The flower has been found to be potentially effective in reducing uric acid levels in the body.
5. Hot/cold packs: Applying hot or cold water bags may also help in reducing joint inflammation and pain caused due to gout.
6. Dandelion: Dandelion is a flowering plant known for improving the functioning of the kidneys and liver. Research has shown that consumption of its extract in tea or as a supplement may reduce uric acid levels in the body.
7. Lemon water: Drinking two liters of water with two freshly squeezed lemons helps reduce the levels of uric acid in the body. Lemon effectively reduces uric acid as it neutralizes and helps get some relief from the pain. Yoga Yoga poses can also help in management of gout. You can try the following yoga poses along with meditation to treat gout and get some relief from sudden pain:
8. Ardha matsyendrasana: The spinal twist pose can help reduce uric acid levels in the body. It can be performed by sitting with legs stretched in front and bending your left leg so that its heel touches your right hip. After this, place your right leg over your left knee and twist your waist, shoulder, and neck.
9. Dhanurasana: The bow pose can be performed by lying on your stomach with your knees and elbows folded backward to hold your ankles.
10. Salabhasana: The locust pose can be simply performed by lying on your stomach with your arms by your side. With the pose, keep inhaling and exhaling for at least 20 seconds.
11. Ananda balasana: The happy baby pose can be performed by lying on your back and bringing your knees close to your chest from front. Remember to keep your arms inside your knees during this pose and hold your big toes gently.
12. Viparita karani: The legs-up-the-wall pose can be performed by sitting next to a wall with legs spread and pressed against the wall. Lie on your back and breathe gently for around 5 minutes. Traditional chinese medicine (TMC) TMC has also been used as an alternative therapy for management of gout. The main mechanisms of TCM treatment for gout during the remission stage include: Benefiting Qi ( the force that makes up and binds together all things in the universe) Nourishing blood Tonifying spleen and kidney Inhibiting inflammatory factors in joint fluid Reducing blood uric acid level Promotion of uric acid excretion Enhancing immune function Blocking the sensation of peripheral nerves

However, TMC needs more research and in-depth studies for scientific backing. Did you know? Elevating your foot having a gout can help reduce the feeling of inflammation as well as the recurring pain. You can do this while lying down by placing 2-3 pillows or cushions under your affected foot. Make sure to keep the elevation above your heart level. Living With Gout

Living with gout can be painful and difficult. However, you can manage and reduce its effects by adopting the following lifestyle recommendations.

1. Follow your medication diligently: Medication plays a highly significant role in the treatment of gout. You should follow your medication schedule timely and without fail. Also, if you start experiencing relief after following the prescribed medication, you should not make the mistake of leaving the medication in between without seeking your doctor’s permission.
2. Check your uric acid levels every 6 months: You should monitor and keep a check on your uric acid levels. Ideally, you should check your uric acid concentration twice a year and maintain it below 6 milligrams per decilitre.
3. Maintain a healthy body weight: You should maintain healthy body weight as per your body mass index (BMI). However, you should not indulge yourself in fad diets as it can strain your health, resulting in adverse effects on your body instead of doing any good.
4. Follow a 30-minute walk regimen: You should follow a 30-40 minutes walk routine to keep your body movements functional. This will also help you in achieving your ideal body weight.
5. Drink at least 7-8 glasses of water: Drinking water may help remove excess uric acid from the blood. Ideally, you should drink at least 7-8 glasses of water in a day to keep yourself hydrated. Frequently Asked Questions Does walking on foot with gout make it worse? Should i wear socks with gout? Is cheese bad for gout? Is salt bad for gout? Why does gout hurt more at night? What is the best thing to drink if you have gout? What are the main triggers of gout? References Nuki, G., Simkin, P.A. A concise history of gout and hyperuricemia and their treatment. Arthritis Res Ther 8, S1 (2006). Triggers of acute attacks of gout, does age of gout onset matter? A primary care based cross-sectional study Abhishek A, Valdes AM, Jenkins W, Zhang W, Doherty M (2017) Triggers of acute attacks of gout, does age of gout onset matter? A primary care based cross-sectional study. PLOS ONE 12(10): e0186096. Roddy, Edward, and Michael Doherty. “Gout. Epidemiology of gout.” Arthritis research & therapy 12.6 (2010): 1-11. Major, Tanya J., et al. “An update on the genetics of hyperuricemia and gout.” Nature Reviews Rheumatology 14.6 (2018): 341-353. Singh, Jasvinder A., and Angelo Gaffo. “Gout epidemiology and comorbidities.” Seminars in arthritis and rheumatism. Vol. 50. No. 3. WB Saunders, 2020. Kuo, CF., Grainge, M., Zhang, W. et al. Global epidemiology of gout: prevalence, incidence and risk factors. Nat Rev Rheumatol 11, 649–662 (2015). Cronstein, B.N., Terkeltaub, R. The inflammatory process of gout and its treatment. Arthritis Res Ther 8, S3 (2006). Costa-Bauza A, Grases F, Calvó P, Rodriguez A, Prieto RM. Effect of Consumption of Cocoa-Derived Products on Uric Acid Crystallization in Urine of Healthy Volunteers. Nutrients. 2018; 10(10):1516. Xiansu Chi1, Hongxiu Zhang2†, et al. Chinese herbal medicine for gout: a review of the clinical evidence and pharmacological mechanisms. Chi et al. Chin Med (2020) 15:17. Gaafar Ragab, Mohsen shahawy et al. Gout: An old disease in new perspective – A review. Journal of Advanced Research. Volume 8, Issue 5, September 2017. Diagnosis and management of gout. Clinical Review. BMJ VOLUME 332 3 JUNE 2006. Singh JA, Reddy SG, Kundukulam J. Risk factors for gout and prevention: a systematic review of the literature. Curr Opin Rheumatol. 2011 Mar;23(2):192-202. MacFarlane LA, Kim SC. Gout: a review of non modifiable and modifiable risk factors. Rheum Dis Clin North Am. 2014 Nov;40(4):581-604.

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H1N1 Influenza (Swine Flu) Also known as H1N1 flu, Pig influenza, Hog flu, and Pig flu Overview

Swine flu, also known as H1N1 influenza, is a common respiratory infection in pigs worldwide.

However, the H1N1 swine influenza viruses can potentially cause infections in humans if the capability of stimulating an immune response of the virus changes. Swine flu was at its peak in the 2009-10 flu season and the World Health Organization (WHO) declared the H1N1 flu to be a pandemic in 2009 due to human-to-human transmission. The H1N1 flu strain from the pandemic later became one of the strains that cause seasonal flu.

This condition causes upper and in some cases lower respiratory tract infections. The most common symptoms include nasal secretions, chills, fever, and decreased appetite.

Though anyone can get affected by it, the people at higher risk are individuals on the extreme spectrum of age like children below 5 years, or adults over 65 years of age. Also, individuals who have other health conditions like asthma, diabetes, or an autoimmune disorder, or pregnant women are at a greater risk.

The best way to prevent infection is to maintain proper hand hygiene, avoid crowded areas during the outbreak, and get vaccinated. The treatment generally includes supportive measures like bed rest, intake of fluids, eating a healthy balanced diet, etc. Antiviral drugs may also be prescribed in some cases. Key Facts Usually seen in Children between 9-12 years of age Gender affected Both men and women Mimicking Conditions Acute respiratory distress syndrome Adenovirus Arenaviruses Cytomegalovirus Dengue Echovirus infection Hantavirus pulmonary syndrome HIV infection and AIDS Human parainfluenza viruses and other parainfluenza viruses Legionnaires disease Necessary health tests/imaging Real-time PCR Nucleotide sequencing Phylogenetic analysis Treatment Antivirals: Oseltamivir, Zanamivir, and Peramivir Analgesics and Antipyretics: Acetaminophen (paracetamol) and Ibuprofen Antibiotics: Cefuroxime, Cefotaxime, Clarithromycin, and Erythromycin. Specialists to consult General Physician Emergency medicine doctor Internal Medicine specialist Pediatrician (in children) Pulmonologist Symptoms Of Swine Flu (H1N1 Influenza)

The clinical manifestations of swine flu are similar to any other flu. The symptoms include:

Fever ( (100 F or greater) Chills Runny or blocked nose Cough Sore throat Watery and redness of eyes Fatigue Body aches Joint pains Headache Shortness of breath Rapid breaths Vomiting Diarrhea

Rare symptoms include:

Conjunctivitis Parotitis in toddlers (inflammation of the parotid salivary gland) Note: The immuno-compromised patients and patients in extremes of age (infants and elderly) may show altered mental status and respiratory distress.

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Differences and similarities between swine flu and the common cold

Swine flu and the common cold are both contagious respiratory tract illnesses, but they are caused by different viruses. They have a lot of similarities and it becomes difficult to distinguish between them. Some of the most common similarities and differences include: 1. Symptoms Similarity: The symptoms of cold and flu are very similar at the onset with a runny nose, headache, fatigue, and difficulty in breathing. Difference: Cold symptoms are usually milder than the symptoms of swine flu and it generally does not result in serious health problems.

1. Cause Similarity: Both cold and influenza are caused by viruses. Difference: Swine flu is caused by the H1N1 influenza virus. Whereas the common cold can be caused by a number of other viruses, including rhinoviruses, parainfluenza, and seasonal coronaviruses.
2. Incubation period Similarity: Both diseases are highly contagious and have an incubation period (the period between exposure to an infection and the appearance of the first symptoms) of a minimum of 1 day before the individual starts experiencing symptoms. Difference: The incubation period for influenza is usually 1-4 days and 1-7 days for colds.
3. Duration of illness Similarity: Swine flu and the common cold cause respiratory tract illnesses ranging from 4 days to two weeks. Difference: A cold’s duration (how long it lasts) is about 7 to 10 days; however, depending upon the viral strain, it can last up to two weeks. The swine flu’s duration varies from about 5 days to two weeks with an average of 8 days.
4. Risk factors Similarity: Both have similar risk factors i.e. younger children, old people, pregnant women, and immunocompromised individuals are at a higher risk. Difference: Individuals who do not receive the swine flu vaccine are more likely to risk getting infected with the flu virus but there is no vaccination to prevent the common cold.

Are you confused if it is a common cold or swine flu? Know if your cold is more than just a common cold. Read this

Differences and similarities between swine flu and COVID-19

Swine flu and COVID-19 are both contagious respiratory infections of the respiratory system but are caused by different viruses. COVID-19 is caused by an infection with a coronavirus (first identified in 2019). And swine flu is caused by the H1N1 virus. They are both quite similar yet different, some of the common similarities and differences between them include:

1. Duration of illness Similarity: It is two days on average before an infected person starts experiencing the symptoms of illness. Difference: COVID-19 may take a longer duration for the symptoms to start whereas, in the case of flu, the symptoms begin between 1-4 days.
2. Mode of the spread Similarity: Both COVID-19 and swine flu can spread from person to person between people who are in close contact with one another i.e. within about 6 feet through droplets from sneezing, coughing, or talking. Difference: COVID-19 is generally more contagious than the swine flu virus.
3. Risk factors Similarity: Older adults, individuals with certain underlying medical conditions, pregnant women, and children are at higher risk of getting both COVID-19 and swine flu. Difference: COVID-19 seems to cause more serious illnesses in some people resulting in hospitalization and death can occur even in healthy people.
4. Complications Similarity: Respiratory complications occur in patients infected with swine flu and COVID-19. Difference: Most people with swine flu can recover on their own in a few days to two weeks whereas COVID-19 complications can happen even after the recovery (long covid syndrome).

The only trusted way to know for sure, if your symptoms are that of the flu or COVID is to get tested. Do not neglect your symptoms thinking it’s just the flu. Book your RT PCR to know if it is COVID Tap Here

Differences and similarities between swine flu and seasonal influenza

Regular flu or influenza may be caused by RNA viruses belonging to the family Orthomxoviridae. Swine flu is caused by a family of viruses that affects pigs. Some of the similarities and differences between them include:

1. Cause Similarity: Both swine flu and influenza are caused by viruses. Difference: The strains that cause Influenza viruses A, B, and C. The known strains that cause swine flu include subtypes of influenza also known as H1N1.
2. Symptoms Similarity: Both present with similar symptoms that include fever, chills, sore throat, body ache, headache, coughing, and fatigue. Difference: In swine flu, some people may experience gastrointestinal symptoms, such as nausea or diarrhea. This is thought to be one of the ways it differs from seasonal flu.
3. Incubation period Similarity: Symptoms for both begin after about two days from the contraction of the virus. Difference: The known incubation period for H1N1 swine flu ranges from 1 to 4 days, but for some individuals, it may be as long as 7 days. In the case of seasonal flu, symptoms typically begin about two days but can range from 1-4, after flu viruses infect the respiratory tract.
4. Mode of transmission Similarity: Both spread through droplets of nuclei from an infected person. Difference: The virus is transmitted through larger droplets in the case of swine flu, and infection can spread from an infected animal to humans.

Learn more about influenza (seasonal flu) Read Here Causes Of Swine Flu (H1N1 Influenza)

H1N1 swine influenza is a common respiratory infection in pigs worldwide, and hence the name, swine flu. Sometimes, people who are in the close proximity of pigs develop swine flu (zoonotic swine flu). The H1N1 swine influenza viruses can potentially cause infections in humans if the capability of stimulating an immune response of the virus changes.

Influenza A pandemics such as the one in 2009 occurred due to person-to-person transmission through airborne droplets, and potentially, through human contact with inanimate objects contaminated with the virus which got transferred to the eyes or nose. Did you know? A person cannot acquire swine flu from eating pig products such as bacon, ham, and other pig products. Risk Factors For Swine Flu (H1N1 Influenza)

There are a number of factors that can increase your risk of contracting swine flu. They include:

Individuals above 65 years of age Children below 5 years of age People with chronic diseases like Diabetes Chronic pulmonary conditions including asthma Congestive cardiac failure Kidney failure Liver failure Blood abnormalities including sickle cell disease Neurologic conditions Neuromuscular disorders Pregnant women Teens receiving long- time period aspirin therapy Immunocompromised individuals People on medications for HIV. Diagnosis Of Swine Flu (H1N1 Influenza)

A physical exam is done to look for symptoms of H1N1. There are many tests used to diagnose influenza. But not everyone who has the flu needs to be tested. A diagnosis of confirmed swine flu requires laboratory testing of a respiratory sample (a simple nose and throat swab). The tests include:

1. Real-time PCR This test is used to detect seasonal influenza A, B, H1, H3, and avian H5 serotypes. The test is done by collecting samples from the throat and nose of the suspected individual. It provides an accurate and rapid diagnosis of swine flu.
2. Nucleotide sequencing It refers to the general laboratory technique for determining the exact sequence of nucleotides, or bases, in a DNA molecule. It is helpful in determining the H1N1 strain.
3. Phylogenetic analysis It is done to isolate the gene from the pigs. This test is indicated to determine the exact strain of swine flu.

Not sure where can you get these tests done? We are here to help. Book lab tests with TATA 1mg Tap Here Celebs affected Brian Litrell Backstreet Boys member Brian Littrell was diagnosed with the H1N1 virus in 2009, according to a statement released by the band. As a preventative measure, Litrell and his fellow band-mates were prescribed antiviral medication and had to cancel appearances in New York. Rupert Grint ‘Harry Potter’ star Rupert Grint reportedly caught the H1N1 virus in 2009 while filming the latest installment of the “Harry Potter” series. After taking a few days off from filming, he was able to attend the premiere of the film and later return to filming. Prevention Of Swine Flu (H1N1 Influenza)

Prevention and control measures for swine influenza are based on understanding how the disease is transmitted. Preventive measures include

1. Prevention of pig-to-human transmission The transmission between pigs and humans mainly occurs in swine farms where farmers are in close contact with live pigs. Measures to prevent it include vaccines for swine to prevent their infection. Avoiding smoking near the infected animal, and wearing gloves while handling them can decrease infections to a larger extent.
2. Prevention of human-to-human transmission This virus is not transmitted through food. In humans, it is most contagious during the first 5 days of the illness. However, children can remain contagious for up to 10 days. Recommendations to prevent the spread of the virus among humans include:
3. Take quarantine seriously: The close contacts of the suspected, probable, and confirmed swine cases are advised to remain at home and avoid traveling for at least 7 days. In case of any symptoms, the contacts should undergo a prompt test for H1N1 influenza and consult a physician.
4. Follow cough and hand hygiene: Hands must be frequently washed with soap and water or alcohol-based or antiseptic handwash or hand rub. The infected persons should cover their nose and mouth with a single-use tissue while coughing or sneezing The used tissue must be disposed of immediately The healthcare workers who are involved in the direct care of patients with confirmed or suspected swine should use gowns, eye protection, gloves, and disposable N95 respirators.
5. Give importance to chemo-prophylaxis: Antiviral medicines can be used for prophylaxis (to prevent) contact with the patient with a high risk for complications and the healthcare personnel. Oseltamivir is given once a day until 10 days after the individual’s last contact with the patient and can be given for a maximum of 6 weeks.
6. Get vaccinated: WHO recommends vaccination of all the healthcare staff coming in contact with the suspected or confirmed cases of swine flu (physicians, nurses, paramedical, and ambulance staff). This vaccine against influenza A/H1N1 can be taken yearly. The immune response of the body takes about 2-3 weeks to develop after vaccination.
7. Other general measures Early self-isolation of those feeling unwell or have symptoms Avoid close contact with sick people Avoid touching your eyes, nose, or mouth Disinfect surfaces that have come in contact with the infected person Cook red meat at 1600F (700C) to kill the virus. Disinfect used tissues before discarding them.

Keep this in mind! Children and teenagers recovering from flu-like symptoms should never take aspirin. This is due to the risk of Reye syndrome, a rare but potentially life-threatening condition.

Listen to our experts talk how viruses spread and about effective ways to prevent it. Watch this video

Doctor To Visit

People who have the swine flu with a fever above 100 F (38 C), cough, or sore throat might need medical interventions from:

General Physician Emergency medicine doctor Internal Medicine specialist Pediatrician Pulmonologist

An emergency medicine doctor is a specialist who treats patients in the emergency department. An internal medicine specialist specializes in the internal organs and systems of the body. A pediatrician is a doctor who deals with the diseases of children whereas a pulmonologist is a doctor who specializes in the respiratory system.

Consult India’s best doctors here Consult Now Treatment Of Swine Flu (H1N1 Influenza)

The treatment is basically supportive care in mild to moderate cases. Depending on the severity, the treatment options include the following:

1. Supportive measures Swine flu requires supportive management, with or without antiviral medications. These include: Bed rest Staying hydrated Electrolytes Administration of intravenous fluids in severe cases Painkillers and antipyretics (like paracetamol and ibuprofen) to manage pain and fever Broad-spectrum antibiotics (like cefuroxime, cefotaxime, clarithromycin, and erythromycin) to treat or prevent secondary bacterial pneumonia Oxygen therapy or in severe persistent hypoxia (decreased oxygen)

Note: Corticosteroids may be used in case of management of septic shock.

1. Antiviral therapy Your doctor may prescribe antiviral drugs to reduce the severity of symptoms and lower the risk of complications. Examples of antiviral medications used to treat swine flu include: Oseltamivir Zanamivir Peramivir

Looked everywhere but couldn’t get your medications on time? Don’t worry. Order from Tata 1mg for guaranteed delivery Tap Here

1. Management in Pigs Though swine influenza isn’t deadly to pigs, little treatment beyond rest and supportive care may be required. Vaccination and animal management techniques with antibiotics are used to prevent bacterial pneumonia and different secondary infections in animals weakened by the influenza virus. Home Care For Swine Flu (H1N1 Influenza)

Like any other flu, even swine flu can be managed at home by taking adequate rest, getting enough sleep, being well hydrated, and managing fever and body aches with painkillers and antipyretics. Along with these, there are certain home remedies that can help get rid of the symptoms soon. They include:

Turmeric (Haldi): Turmeric is known for its anti-inflammatory properties. Add a pinch of turmeric to a glass of warm milk and drink it every night to help your body fight the swine flu infection.

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Garlic (Lahsun): Studies show that garlic has anti-viral properties. It also improves your body’s immunity and is loaded with antioxidants. Swallow 2 garlic pods with warm water on an empty stomach every morning to reap the benefits. People on blood thinners should avoid too much consumption of garlic.

Basil (Tulsi): Research suggests that tulsi is one of the major herbs used for influenza-like disease treatment. Eating tulsi leaves can clear up infections in your throat and lungs, along with building immunity.

Indian gooseberry (Amla): It is rich in vitamin C, and research suggests that it is blessed with immune-boosting properties. You can eat the whole fruit or drink its juice to keep your body infections at bay.

Ginseng: Studies demonstrate that oral administration of ginseng extract can protect against the H1N1 influenza virus. Drinking a cup of ginseng tea every day can prove to be beneficial for individuals with swine flu. People on blood thinners should avoid Ginseng as it can cause a risk of bleeding.

Olive (Zaitoon) leaves: Studies indicate that these are rich in properties that can help your body fight the symptoms of swine flu like nausea, chills, fever, and headaches effectively. Give your body the extracts of this herb regularly to keep swine flu at bay.

Tulsi: Consuming tulsi leaves can aid in clearing the infection in your throat and lungs, while also strengthening your immune system to combat swine flu infection.

Buy Tulsi products to keep your immune system robust. Click Here

Aloe vera: Aloe vera is not just an immune system enhancer, it also possesses anti-inflammatory properties. It can be beneficial in fighting infections and alleviating swine flu symptoms such as joint pain.

Check out our range of aloe vera juice to keep up your immunity. Click Here

Giloy: It is a herbaceous plant that has been used in Ayurveda to treat various disorders. Giloy juice helps in reducing high fever. Complications Of Swine Flu (H1N1 Influenza)

Swine flu is a respiratory tract illness that can cause mild to moderate symptoms. However, in some cases, it can lead to complications like:

Pneumonia: This is due to a secondary bacterial infection. Swine flu can lead to more serious problems like lung infection and other breathing problems. Respiratory failure: Studies suggest that the infection causes severe hypoxemic respiratory failure or acute respiratory distress syndrome (ARDS, fluid build-up in lungs) with multi-organ involvement. Seizures: these are generally seen in children along with encephalopathy (disease of the brain).

Prevent complications by understanding how viruses spread from the surface. Listen to our experts

Alternative Therapies For Swine Flu (H1N1 Influenza)

Flu symptoms can be managed with complementary therapies along with supportive treatment. Even the cases that require antiviral therapy can benefit from the following alternative therapies:

1. Homeopathy Studies suggest that Oscillococcinum is a highly diluted homeopathic preparation that some people take regularly over the winter months either to prevent flu or as a treatment for flu symptoms.
2. Traditional Chinese medicine Research suggests that some plants that are extensively used in traditional Chinese medicine could prove useful for the management of swine flu. The herbal blend used in this therapy can be the most effective formula, especially if started within the first 24 hours of symptoms. Living With Swine Flu (H1N1 Influenza)

Swine flu is an upper respiratory tract infection that generally clears up within a week or so. Both adults and children can get affected by it, however, it is more common among teenagers and severe in some of the very young.

Tips for Parents In kids, diarrhea and vomiting are more common than in adults. Infants may present with fever and lethargy without respiratory symptoms. Managing kids while they are sick can be quite a task. Here are a few things to keep in mind:

Be vigilant, and watch your kids closely Make sure you wash your hands while handling the kids Wash their hands frequently Avoid crowded areas Avoid direct contact with sick individuals If your kid is sick, do not send them to school Get them vaccinated.

Here are 10 more tips to follow if your child has a fever. Read This Frequently Asked Questions Is there a difference between swine flu and Spanish flu? Is swine flu (H1N1) contagious? When should I see my doctor? What kind of face mask is required to protect against swine flu? What is the vaccination against swine flu? References Gautam Rawal et al. Swine Flu (H1N1 Influenza A): A concise review. Indian Journal of Immunology and Respiratory Medicine, April-June 2017;2(2):29-32. Kothalawala, Hemal & Toussaint, M.J.M. & Gruys, E. (2006). An overview of swine influenza. The Veterinary Quarterly. 28. 46-53. 10.1080/01652176.2006.9695207. Himani et al. A review article on swine flu. Indian Journal of Forensic and Community Medicine 2020;7(3):109–116. Dandagi GL, Byahatti SM. An insight into the swine-influenza A (H1N1) virus infection in humans. Lung India. 2011 Jan;28(1):34-8. How Does the Flu Spread? Influenza (Flu). Centre for Disease Control and Prevention. Sep 2020. Bányai K, Kovács E, Tóth Á, Biksi I, Szentpáli-Gavallér K, Bálint Á, Dencol, Dán Á. Genome sequence of a mono reassortant H1N1 swine influenza virus isolated from a pig in Hungary. J Virol. 2012 Dec;86(23):13133. DNA Sequencing. National Human Genome Research Institute. Kim, J. I., Lee, I., Park, S., Lee, S., Hwang, W., Bae, Y., Heo, J., Kim, D., Jang, I., Kim, K., & Park, S. (2014). Phylogenetic Analysis of a Swine Influenza A(H3N2) Virus Isolated in Korea in 2012. PLOS ONE, 9(2), e88782. Overview. Influenza (seasonal). World Health Organization. Rouf R, Uddin SJ, Sarker DK, Islam MT, Ali ES, Shilpi JA, Nahar L, Tiralongo E, Sarker SD. Antiviral potential of garlic (Allium sativum) and its organosulfur compounds: A systematic update of pre-clinical and clinical data. Trends Food Sci Technol. 2020 Oct;104:219-234. Jadhav P, Lal H, Kshirsagar N. Assessment of the potency of PC-complexed Ocimum sanctum methanol extract in embryonated eggs against Influenza virus (H1N1). Pharmacogn Mag. 2014 Jan;10(Suppl 1): S86-91. Yoo DG, Kim MC, Park MK, Song JM, Quan FS, Park KM, Cho YK, Kang SM. Protective effect of Korean red ginseng extract on the infections by H1N1 and H3N2 influenza viruses in mice. J Med Food. 2012 Oct;15(10):855-62. Arora R, Chawla R, Marwah R, Arora P, Sharma RK, Kaushik V, Goel R, Kaur A, Silambarasan M, Tripathi RP, Bhardwaj JR. The Potential of Complementary and Alternative Medicine in Preventive Management of Novel H1N1 Flu (Swine Flu) Pandemic: Thwarting Potential Disasters in the Bud. Evid Based Complement Alternat Med. Salamanca A, Almodóvar P, Jarama I, González-Hedström D, Prodanov M, Inarejos-García AM. Anti-influenza virus activity of the elenolic acid-rich olive leaf (Olea europaea L.) extract Isenolic®. Antivir Chem Chemother. 2021 Jan-Dec;29:20402066211063391. Rawal G, Kumar R, Yadav S, Sujana R. H1N1 Influenza Induced Acute Respiratory Distress Syndrome Rescued by Extracorporeal Membrane Oxygenation: a Case Report. J Transl Int Med. 2017 Sep 30;5(3):182-185. Vijay et al. AYURVEDIC APPROACH TO TREAT SWINE FLU. World Journal of Pharmaceutical Research. Vol 6, Issue 13, 2017. Mathie RT, Frye J, Fisher P. Homeopathic Oscillococcinum® for preventing and treating influenza and influenza-like illness. Cochrane Database Syst Rev. 2015 Jan 28;1(1): Kansas State University. “1918 Flu Resulted In Current Lineage Of H1N1 Swine Influenza Viruses.” ScienceDaily. ScienceDaily, 1 May 2009. Vaccine Information for Clinicians and Health Care Professionals. H1N1 Flu. Center for Disease Control And Prevention.

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Hiccups Also known as Hiccough and Singultus Overview Almost every one of us must have experienced hiccups in our lifetime. A hiccup is a repeated involuntary contraction of the diaphragm (the muscle that separates the chest from the abdomen) followed by a sudden closure of the vocal cords. This checks the inflow of air and produces the characteristic “snap” or “hic” sound. Eating or drinking too quickly, having very hot or freezing foods, spicy food, alcohol and carbonated beverages are common causes of getting hiccups. Babies also may get hiccups after feeding, crying or coughing. However, many times a reason for hiccups cannot be identified. Hiccups are usually harmless and settle by themselves in a few minutes. Breath-holding, drinking a glass of water or eating sugar are common ways to stop hiccups. However, in some cases, prolonged hiccups that last for days or weeks may be suggestive of some underlying disorder. It is essential to identify the cause and treat it accordingly. Key Facts Usually seen in All age groups Gender affected Both men and women but more common in men Body part(s) involved Diaphragm Epiglottis Nerves that supply the diaphragm Mimicking Conditions Coughing Gagging Necessary health tests/imaging Laboratory tests: Serum electrolytes, Calcium test, Blood urea nitrogen (BUN) test, Creatinine test, Lipase test, Liver function tests Imaging tests: ECG, Chest radiograph, CT and MRI. Treatment Acute hiccups: Self resolving Persistent and intractable hiccups: Treatment of underlying disorder Medications to calm the diaphragm Invasive procedures Specialists to consult General physicians Otolaryngologists Gastroenterologists Neurologists Pulmonologists Symptoms of Hiccups

The only symptom of hiccups is a slight tightening sensation in your chest, abdomen, or throat that causes the hiccup sound. The hiccup reflex involves the synchronized action of the Diaphragm: It is a large muscle located below the lungs that demarcates the chest from the abdomen. It contracts rhythmically and continually to aid in respiration. The muscles that open and close the windpipe The nerves that act upon the diaphragm If any of the nerves involved in this cycle are triggered, for whatever reason, the diaphragm may contract involuntarily, allowing the air to be drawn into the lungs. As a result, epiglottis( the top of the windpipe) closes, resulting in the distinctive cough-like ‘hic’ hiccup sound. Types of Hiccups

On the basis of the duration hiccups can be classified as:

Acute hiccups: Less than 48 hours duration Persistent hiccups: Last over 2 days Intractable hiccups: Last over a month Causes of Hiccups

Common causes of acute hiccups: Eating too quickly or too much Eating very hot or very cold foods Consuming spicy food Drinking alcohol and carbonated beverages Swallowing air with chewing gum or sucking on candy Indigestion Bad odor Inhaling toxic fumes Cigarette smoking Over-stretching the neck Sudden temperature changes Feeling nervous or excited

Causes of persistent and intractable hiccups: 1. Nerve damage or irritation Conditions that may cause damage or irritation to the nerves that control the diaphragm including Gastroesophageal Reflux Disease(GERD), sore throat, goiter, tumor or cyst. 2. Medications Certain medications can cause hiccups, such as- Antibiotics like azithromycin Psychiatric medications like aripiprazole Anesthetic drugs like propofol Steroids Certain epilepsy medications

1. Instrumentation Certain procedures that require the use of instruments can mechanically irritate the nerves that control the diaphragm and induce hiccups. For eg. abdominal or chest surgery .
2. Other medical conditions Some of the conditions that may prompt frequent or prolonged attacks of hiccups include:

Oesophagitis (inflammation of the food pipe) An overactive thyroid gland Pleurisy (inflammation of the membrane surrounding the lungs) Pneumonia (inflammation of the lungs) Tuberculosis Influenza (flu) Pericarditis (inflammation of the tissue surrounding the heart) Diabetes Malaria Hernia Uremia (increased levels of waste products in blood) Hypocalcemia (deficiency of calcium) Chronic kidney failure Multiple sclerosis Stroke Cancer

Causes of Hiccups in Infants

It is prevalent for babies under 12 months to get hiccups. Newborns and infants may experience hiccups more frequently during or after feeding as they may swallow food too quickly or overfeed.

This can lead to stomach distension, and when the stomach distends, it pushes against the diaphragm, which causes it to contract and cause hiccups.

Hiccups can be a sign of an infant being full. Therefore, pediatricians typically recommend short feeds with burping breaks.

Your baby will usually stop hiccupping within 5 to 10 minutes, but if your baby’s hiccups do not stop within a couple of hours, you should see your doctor. Note: Generally, hiccups are a sign of healthy growth and development. Did you know ? Babies often hiccup in the womb before they are born. In most cases, fetal hiccups are completely normal and not a cause for concern. They usually indicate that the baby’s respiratory and nervous systems are developing well, as are their reflexes. Risk Factors For Hiccups Men are more prone to develop long-term hiccups as compared to women Anxiety, stress and intense emotions Patients who have received general anesthesia Post-surgery, particularly abdominal surgery or chest surgery Pregnancy Did you know? Beyond respiratory symptoms, persistent hiccups have been reported as a rare symptom of hospitalized COVID-19 patients. Learn more about COVID-19. Click Here Diagnosis of Hiccups

No specific test is required in the diagnosis of hiccups, but in the case of persistent or intractable hiccups, it is important to detect any probable underlying illness. 1. History A physician may ask for the history of the current sickness that includes the length of the hiccups, any treatments used, and their relevance to a recent condition or operation. They may also ask about your past medical history, including information about known gastrointestinal and neurologic disorders, and drug history that also includes details concerning alcohol use.

1. Physical examination During the physical exam, the doctor may perform a neurological exam to check your- Balance and coordination Muscle strength and tone Reflexes Sight and sense of touch
2. Laboratory testing While no specific evaluation is required for acute hiccups, the following lab tests might be suggested for diagnosis of long term hiccups: Serum electrolytes Calcium test Blood urea nitrogen (BUN) test Creatinine test Lipase Liver function tests
3. Imaging techniques These tests may help to identify abnormalities inside the chest, neurological changes or lesions causing hiccups. ECG (Electrocardiogram) Chest radiograph Computerized tomography (CT) Magnetic resonance imaging (MRI) Specialists To Visit

The majority of hiccup bouts are self-limiting and pass quickly. However, if they persist even after 2 days, it can be because of an underlying condition. Doctors that can help diagnose and treat hiccups include:

General physicians Otolaryngologists Gastroenterologists Neurologists Pulmonologists

An otorhinolaryngologist is a surgical doctor for the management of conditions of the head and neck. A gastroenterologist is specialized in the diagnosis and treatment of the gastrointestinal tract disorders. A neurologist specializes in the treatment of disorders affecting the brain, spinal cord, and nerves. A pulmonologist is a doctor who treats disorders of the lungs.

When to see a doctor?

Contact a doctor if the hiccups last for more than 48 hours, return frequently, or are interfering with your life. Consult them right away if you experience the following symptoms along with the hiccups: Headache Problems in balancing All-over numbness If you are facing such an issue, consult a professional immediately. To book a consultation Click Here

Prevention Of Hiccups Hiccups are very common and usually resolve on their own. Try these tips to prevent hiccups by making some changes in your habits:

Do’s: Eating smaller meals A cold water shower Managing stress and anxiety effectively Self-protection from sudden changes in temperature

Don’ts: Eating too fast Consuming spicy food Drinking alcoholic, fizzy, or carbonated drinks Eating or drinking something very cold immediately after something hot Chewing gum Smoking Over-stretching your neck Inhaling toxic fumes Say goodbye to ‘hic’ or hiccups. Read about hiccups in a nutshell. Click Here Treatment of Hiccups

The doctor will want to know if your hiccups are caused by a medical condition or medication you are taking. If the underlying problem is treated or you switch medications, the hiccups should go away. The underlying cause determines the pharmacological treatment, which may include: Medications based on specific causes:

1. For nasal symptoms: Nebulized 0.9% saline (2 mls over 5 minutes)
2. To reduce gastric irritation: Proton pump inhibitors can be given. They include: Omeprazole Pantoprazole Lansoprazole
3. To reduce gastric distension (enlargement): Medications include: Metoclopramide Domperidone Itopride
4. Antiflatulent: These medications are used to treat or prevent excessive intestinal gas. They include- Simethicone Peppermint water Carminative agent

Medications for Intractable Hiccups

1. Dopamine antagonists: These medicines can relax the diaphragm muscle or its nerve supply and may stop persistent hiccups. They include:

Haloperidol Olanzapine Chlorpromazine Methylphenidate

1. GABA agonist: Baclofen is the medication of choice as it helps relax muscles.

Note: Caution is advised in the elderly and patients with kidney dysfunction.

1. Local anesthetic: Low-dose of lignocaine infusion or nebulization help stop hiccups.
2. Antiepileptic: These help relax the nerve supply to the diaphragm and relieve hiccups. The most commonly used drugs include:

Gabapentin Sodium valproate

1. Calcium channel blocker: These blockers, such as nifedipine, can help control hiccups.

Invasive procedures

More invasive options might be attempted only in case of extreme cases of hiccups. These include the following: Nasogastric intubation: Insertion of a tube into the stomach via the nose. Phrenic nerve block: The phrenic nerve which supplies the diaphragm can be blocked using anesthetic medication. Diaphragmatic pacemaker: It is a battery-powered device that can be implanted surgically. It helps to stimulate or pace the nerves supplying to the diaphragm (the phrenic nerve or vagus nerve) and regulating breathing. Did you know? As per a study, rectal massage can also be helpful in relieving intractable hiccups. It can be done by inserting a finger into the rectum and massage using sterile gloves and sufficient lubricant. However, your doctor’s consent should be taken before trying this. Home-care For Hiccups

Hiccups usually resolve on their own. However, if the hiccups don’t stop, here are some tips that can help. Not many studies evaluate the effectiveness of these hiccup remedies. However, they are backed by anecdotal evidence. Additionally, some of the most common remedies stimulate your vagus or phrenic nerves, which are connected to your diaphragm.

Posture and breathing tips: Pull your knees up to the chest and lean forward Hold your breath for several seconds or longer Breath out against closed mouth and nose Breathe into a paper bag (do not put it over your head)

Pressure points tips: Pull hard on the tongue Put pressure on your diaphragm (the diaphragm separates your abdomen from your lungs) Squeeze your nose closed while swallowing water. Use your thumb to apply pressure to the palm of your other hand. Give a gentle massage on your carotid artery on both sides of your neck.

Dietary tips: Swallow a teaspoon of sugar Slowly drink a glass of warm water without stopping to breathe. Sip ice-cold water or gargle with ice water. Bite on a lemon or taste vinegar.

Other tips: Distract yourself with something engaging. Tapping or rubbing the back of your neck.

Home- Care tips for hiccups in infants: Here are some tips that can be helpful in toddler or infant hiccups. Feeding tips: Encourage your baby to burp as you switch from one breast to another or after feeding. After each feeding, keep the baby upright for 20 to 30 minutes. Resuming feeding can sometimes stop hiccups. If your baby is bottle-fed, make sure to tip the bottle while feeding to limit the amount of air the baby swallows. You can also use anti-colic bottles, which do not allow air passage during feeding.

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Other general tips:

Cold water can be given to the baby. Teas containing fennel, chamomile or peppermint can be introduced into your infant’s mouth using a dropper. It relieves the muscle spasms that cause hiccups. Rubbing the baby’s back. Applying light downward pressure to the infant’s upper stomach. Tickling can distract your toddler’s attention from their hiccups.

It is always advisable to seek the child’s pediatrician’s consent before starting these tips.

What not to do: Never startle or scare the baby. Never try holding the baby’s breath.

Complications of Hiccups

Frequent episodes of acute hiccups, persistent and intractable hiccups, can significantly impact the quality of life and cause physical pain, humiliation or psychological distress.The following complications are associated with them: Dehydration Malnutrition Tiredness Insomnia (lack of sleep) Weight loss Anxiety and depression Delay the healing of a scar (wound) after recent abdominal surgery. This increases the likelihood of wound complications. Strong hiccups can also cause: Reduced heart rate Drop in blood pressure The collapse of the lung due to air or gas in the space between the lungs and the chest wall Alternative Therapies For Hiccups

Acupuncture Acupuncture can be explored as an alternative treatment option for persistent and intractable hiccups. It stimulates the nerves that are responsible for hiccups.

Some case studies show that acupuncture may effectively treat persistent hiccups, even when conventional forms of treatment don’t work. Although there is insufficient evidence evaluating the safety and effectiveness of acupuncture in resolving hiccups, some people have been able to cease their long-term hiccups with this therapy, so it may be worth a shot.

Massage A carotid sinus massage may be suggested to manage chronic hiccups. This involves rubbing the main carotid artery in the neck by the healthcare provider.

Living With Hiccups

Hiccups are usually harmless and resolve themselves in a few minutes. Simple home remedies also come in handy to manage them. However, chronic or prolonged hiccups can be highly stressful, annoying and disrupt daily routines. They can make sleeping difficult or wake you up in the middle of the night. If the condition lasts for a long time, the lack of sleep can cause a loss of energy throughout the day, leading to exhaustion. All these factors can negatively impact a person’s quality of life. To cope with the condition, getting plenty of rest, eating and drinking small amounts regularly, and being aware of potential complications are critical. Take prescribed medications on time. Keep yourself busy and distracted. Develop a hobby. Join support groups facing the same challenges. Maintain regular contact with your doctor throughout treatment to avoid the recurrence of hiccups and complications associated with chronic hiccups. Did you know? An interesting case report suggested that a 40-year-old man’s 4 days of continuous hiccuping ceased immediately following sexual intercourse. Celebs affected Jennifer Lawrence Actress Jennifer Lawrence once shared her bizarre hiccup cure. She said, “The only thing that ever works for getting rid of hiccups for me is when I drink water and raise my arms over my head and lower them very slowly.” Frequently Asked Questions Are hiccups common in newborn babies? Can stress cause hiccups? Will holding my breath cure hiccups? Can honey stop hiccups? How long do hiccups last? References Giannos P, Katsikas Triantafyllidis K, Geropoulos G, Kechagias KS. Persistent hiccups as an atypical presentation of SARS-COV-2 infection: A systematic review of case reports [Internet]. Frontiers in neurology. U.S. National Library of Medicine; 2022 [cited 2022Dec14]. Hiccups in neurocritical care - e-jnc.org [Internet]. [cited 2022Dec14]. Gotfried J. Hiccups - gastrointestinal disorders [Internet]. MSD Manual Professional Edition. MSD Manuals; 2022 [cited 2022Dec14]. Harris J, Smith T, Preis J. Intractable hiccups due to herpetic esophagitis in an immunocompromised patient. IDCases. 2016 Feb 24;4:34-7. doi: 10.1016/j.idcr.2016.01.001. (PDF) hiccup: Mystery, nature and treatment - researchgate [Internet]. [cited 2022Dec14]. Hiccups, chronic [Internet]. NORD (National Organization for Rare Disorders). [cited 2022Dec14]. Viera AJ, Sullivan SA. Remedies for prolonged hiccups [Internet]. American Family Physician. 2001 [cited 2022Dec14]. Hiccups in neurocritical care - e-jnc.org [Internet]. [cited 2022Dec14]. NHS choices. NHS; [cited 2022Dec14]. Chang F-Y, Lu C-L. Hiccup: Mystery, nature and treatment [Internet]. Journal of neurogastroenterology and motility. U.S. National Library of Medicine; 2012 [cited 2022Dec14]. NCBI Bookshelf [Internet]. [cited 2022Dec14]. Hiccup: Mystery, nature and treatment [Internet]. Journal of Neurogastroenterology and Motility. Korean Society of Neurogastroenterology and Motility; 2012 [cited 2022Dec14]. Hiccups NCG guidelines - tata memorial center [Internet]. [cited 2022Dec14]. Peleg R, Peleg A. Case report: Sexual intercourse as potential treatment for intractable hiccups [Internet]. Canadian family physician Medecin de famille canadien. U.S. National Library of Medicine; 2000 [cited 2023Jan23]. A; OMBHO. Termination of intractable hiccups with digital rectal massage [Internet]. Journal of internal medicine. U.S. National Library of Medicine; [cited 2023Jan23].

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Hirsutism Also known as Excessive hair, Pilosity and Hairiness Overview Hirsutism or excessive hair growth is a common clinical condition that can be seen in women of all ages. This condition is caused by hormonal imbalance where increased levels of androgens (male sex hormones like testosterone) are produced in women.

Hirsute women usually present with increased growth of hair on the sides of the face, upper lip, chin, upper back, shoulders, sternum, and upper abdomen. Hirsutism requires in-depth clinical evaluation and investigation for treatment. Before starting the treatment, the right diet and exercise are advised for all women. For obese women, weight loss therapy is recommended, as obesity has been associated with increased free testosterone levels which can contribute to hirsutism.

Most women resort to hair removal by different epilation methods such as plucking, shaving, and waxing before reporting to a clinic. Though simple and inexpensive, these methods are temporary and have their own side effects like physical discomfort, scarring, folliculitis, irritant dermatitis, or discoloration. Medications such as oral contraceptives and antiandrogens along with lasers are the main stays in treatment of hirsutism. Key Facts Usually seen in Female of all age groups Gender affected Women Body part(s) involved Face Chest Back Mimicking Conditions Congenital adrenal hyperplasia Adrenal tumor Polycystic ovary syndrome Ovarian tumor Hypertrichosis Cushing’s syndrome Thyroid dysfunction Hyperprolactinemia Necessary health tests/imaging Lab tests: Testosterone, Dehydroepiandrosterone sulfate (DHEAS) & 17 Hydroxy progesterone Urine test:Serum thyroid-stimulating hormone (TSH), Prolactin & LH/FSH (Luteinising hormone to Follicular stimulating hormone) Imaging tests: Pelvic ultrasonography & Magnetic resonance imaging (MRI) Treatment Oral contraceptive pills (OCP) Androgen receptor blocker: Spironolactone (SPA) & Cyproterone acetate (CA) 5-alpha-reductase inhibitors (5-RA inhibitors): Finasteride Adrenal suppression: Glucocorticoids (dexamethasone) Specialists to consult Endocrinologists Dermatologists Psychologist Dietician Symptoms Of Hirsutism

Hirsutism is a condition in which stiff or dark body hair appears on those body parts where women usually do not have hair. These areas include face, chest, lower abdomen, inner thighs, and back. Hirsutism is caused by high levels of androgen or male sex hormones. It can be accompanied by various other symptoms like:

Decreased breast size Enlarged ovaries Enlarged shoulder muscles Acne Oily skin Enlarged clitoris Irregular periods Deepening of voice Causes Of Hirsutism

Increased levels of androgens (male sex hormones such as testosterone) or oversensitivity of the hair follicles to androgens can cause hirsutism.The conditions that can cause hirsutism include: Polycystic ovarian disorder (PCOS) It is a common hormonal condition that causes excessive production of androgens. Some women with this disorder do not have cysts, while some women without the disorder can develop cysts. Other than Hirsutism, PCOS can also cause:

Thinning hair on the head Infertility Acne Mood changes Pelvic pain Headaches Sleep problem Weight gain/ obesity Genetic disorder A group of genetic disorders that affect the adrenal glands (a pair of walnut-sized organs above the kidneys) like congenital adrenal hyperplasia can cause hirsutism. Adrenal and ovarian tumor Tumors of the adrenal glands, pituitary glands, and ovaries can sometimes lead to hirsutism. In the rare group of ovarian and adrenal tumors female sex hormone levels are often suppressed to or below the lower limit of normal, while the levels of androgen in the circulation is twice the upper limit of normal or higher. Idiopathic hirsutism Hirsutism with normal androgen levels is called idiopathic hirsutism. Idiopathic Hirsutism may be due to increased sensitivity to androgens. A typical example is familial Hirsutism, a typical symptom of this is a gradually increased growth of rough facial hair. Cushing’s syndrome Cushing syndrome is a sign of very long exposure of cortisol. Cortisol is a steroid hormone and its level is increased in case of high levels of stress and low blood glucose concentration. Along with excessive hair growth, some visible signs are having a big stomach but thin arms and legs. It can also lead to abnormal weak muscles, weak bones, breakouts, and sensitive skin. Increased sensitivity to Androgens Under a quarter of premenopausal women who have hirsutism have normal androgen levels. This happens due to increased sensitivity to androgens. Certain medications The following medications can lead to excessive hair growth or hirsutism: Anabolic steroids Testosterone Glucocorticoids Minoxidil Cyclosporine Phenytoin Diazoxide Progestin-containing medications Did you know? Polycystic ovary syndrome (PCOS) is the most common endocrine disorder in women which is known to affect around 6-8% of women in reproductive years. PCOS is one of the cause of hirsutism which causes hormonal imbalance in the body and leads to unwanted hair growth. Here are a few home remedies for PCOS that can help manage the symptoms and help in the treatment.Click to know more about it. Click To Read! Risk Factors

Several factors can influence your likelihood of developing hirsutism, including Family history Several conditions that cause hirsutism, including congenital adrenal hyperplasia and polycystic ovary syndrome, run in families.Up to 50% of women with hirsutism have a family history of the disorder. Regional differences Women of Mediterranean, Middle Eastern, and South Asian ancestry are more likely to have more body hair with no identifiable cause than are other women. Obesity Obesity or being overweight can cause an increase in androgen production, which can lead to hirsutism. Did you know? Obesity also increases the risk of hirsutism, infertility, and pregnancy complications in women with PCOS. Here are a few tips how to maintain weight and combat many serious issues related to it. Click To Read! Diagnosis Of Hirsutism

Medical history A physician will look at the detailed medical history with a special focus on the menstrual cycle. Detailed history includes the age of onset of hirusitsm (puberty, middle age, menopause), rate of onset of symptoms (gradual or sudden), and any other signs or symptoms (acne, deepening of voice, infrequent menstruation, loss of breast tissue, increased muscle mass as in shoulder girdle, malodorous perspiration, etc). The doctor will also inquire about the history of weight gain or diabetes and whether a drug history prior to onset should be taken. Physical examination Complete general physical examination is done including the palpation of the abdomen for any ovarian mass.

To evaluate hirsutism in females, the Ferriman-Gallwey score is used to measure the amount and location of the hair. The score is used to determine whether a patient’s hirsutism is considered mild, moderate, or severe. Ferriman–Gallwey Scoring System for Hirsutism evaluates the extent of hair growth (score 0-4) in 9 areas of the body. A score of 8-15 is mild, score >15 is moderate/severe. This score can be helpful in determining response to treatment. Lab tests Testosterone: Serum testosterone may be normal or elevated in case of PCOS (polycystic ovarian syndrome) and CAH (Congenital adrenal hyperplasia) but is significantly raised (>200 ng/ml) in case of malignant tumor of the adrenal or ovary. Dehydroepiandrosterone sulfate (DHEAS): DHEA stands for dehydroepiandrosterone. This is a hormone produced by the adrenal glands which are located above the kidneys. A raised DHEAS (>700 μg/dl) always indicates an adrenal cause, benign or malignant. 17 Hydroxy progesterone: This serum marker is unique for congenital adrenal hyperplasia. Cortisol: Cortisol is measured for those having signs and symptoms of Cushing’s syndrome. Cushing syndrome occurs when the body makes too much of the hormone cortisol. Serum Thyroid-stimulating hormone (TSH): Serum TSH is usually regarded as a marker of thyroid function. TSH is responsible for the synthesis and secretion of thyroxine (T4) and triiodothyronine (T3) by the thyroid gland. Hypophyseal hypothyroidism (a condition resulting from decreased production of thyroid hormones) can act as a cofactor in hirsutism causing raised TSH levels. Prolactin: A prolactin (PRL) test measures the level of prolactin in the blood. Prolactin is a hormone made by the pituitary gland, a small gland at the base of the brain. High levels of prolactin may induce hirsutism via several mechanisms. LH/FSH (Luteinising hormone to follicular stimulating hormone): Luteinising hormone and follicular stimulating hormones play an important role in sexual development and functioning. The change in the LH to FSH ratio can disrupt ovulation. This ratio can be a useful indicator in diagnosing PCOS.

If you are looking to book a test just sitting back at home, you are just a click away. Click Here!

Imaging tests Pelvic ultrasonography: A pelvic ultrasound is a test that uses sound waves to take pictures of the organs inside your pelvis. It is a noninvasive diagnostic exam that produces images that are used to assess organs and structures within the female pelvis. This test can be useful in detecting an ovarian neoplasm or a polycystic ovary. Computed tomography (CT) /Magnetic resonance imaging (MRI) of abdomen or pelvis: These imaging technologies create three-dimensional detailed images of the organs and tissues of the abdomen or pelvis. Prevention Of Hirsutism Though, hirsutism cannot always be prevented, the following measures can control the causative factors of excessive hair growth like PCOS: Maintaining a healthy weight PCOS can be managed by losing weight. It can also improve reproductive health,lower the risk of heart disease and make it easier to manage diabetes. Exercising regularly Burning more calories while reducing the number of calories you eat creates a calorie deficit. Exercise can help prevent excess weight gain and help maintain healthy weight. This in turn helps in maintaining the hormonal balance in the body. Eating a well-balanced diet A well balanced diet should include high-fiber foods, lean proteins (skinless chicken and fish), and healthy fats (coconut, olive, and fish oils). Dairy, sugar, processed, baked and junk foods should be avoided. Foods like wheatgrass, barley grass, and spirulina, can help manage PCOS and hence prevent hirsutism. Managing stress Too much stress can result in weight gain, difficulty losing weight and elevated levels of cortisol, which all predispose to excessive hair growth. Consider chatting with friends, doing a hobby, trying yoga, listening to music, journaling, or whatever else eases your stress levels. Getting regular and adequate sleep Adequate sleep can help in managing your stress and anxiety level. Including long walks in nature, yoga or meditation, switching off electronic devices at least two hours before sleeping can ensure sound sleep. Specialist To Visit

Sometimes it is difficult to diagnose the cause of hirsutism, a general practitioner may be concerned with the cause of the issue. The general practitioner can further suggest other doctors according to the needs of the patient. Endocrinologist: Specializes in the function and disorders of the endocrine system of the body. The doctor will help you with managing conditions like congenital adrenal hyperplasia and will also help with managing associated conditions such as diabetes. Once the underlying cause is treated, the hirsutism will gradually disappear. Dermatologists: Specializes in the study of the skin and its disorders. In the case of familial hirsutism, which means excessive hair growth runs in your family’s genes, an appointment with a dermatologist can be taken. Psychologist: If a person experiences any psychological issues such as anxiety or depression, a person may be referred to a psychiatrist for medical support. Dietician: If a person is having obesity issues, you can discuss how to maintain a healthy weight and work on a nutrition plan together with a dietitian.

If someone is facing such issues, contact and seek medical help immediately. Consult Now!

Treatment Of Hirsutism

Lifestyle modifications are first-line treatments in women with polycystic ovary syndrome, particularly if they are overweight. It has been shown that obese women with polycystic ovary syndrome who manage to lose more than five percent of their initial body weight have a significant improvement in their biochemical profile, including a reduction of testosterone, an increase in sex hormone-binding globulin, and an improvement in their Ferriman-Gallway scores.

All medical therapies require a minimum of 8 weeks before the noticeable result appears. Cosmetic therapies (temporary solution) Most women adapt to the removal of hair by different epilation methods, such as plucking, shaving, and waxing before presenting to the clinic. Though these methods are simple and inexpensive, these methods are temporary and have side effects like physical discomfort, scarring, irritant dermatitis, and discoloration. Electrolysis (50% efficacy) Hair follicles are damaged by inserting a needle that emits a pulse of electrical current into each hair follicle. With repeated treatments, the efficacy ranges from 15 to 50% permanent hair loss. However, it is difficult to treat large areas like hairs on the chest or upper back with electrolysis and it can be time-consuming. Laser hair treatment (80% reduction) Lasers have gained wide popularity in the past two decades and can achieve permanent reduction of hair (not removal).

Laser therapy works on the principle of selective photothermolysis where the laser energy acts specifically to destroy the target (melanin) and it acts specifically on anagen hair follicles. Therefore, multiple treatments are required to get a significant (i.e. 80%) reduction. An ideal candidate for laser hair removal is a patient with light skin color and dark-colored hair.

The possible side effects like skin irritation, swelling, and redness can be explained by the dermatologist.

Mostly used lasers are the 755-nm alexandrite laser, 800-nm diode laser, and 1064-nm Nd: YAG laser and pulsed light sources Medications Before starting any medications, the right diet and exercise are advised for all women with PCOS. For all obese women, weight loss as a therapy should be advised. The drugs usually used in the treatment of hirsutism are:

1. Oral contraceptive pills (OCP): OCP is the first-line treatment for hirsutism, particularly in women desiring contraception. These estrogen/progesterone combinations act by Reduction of gonadotropin secretion and thereby reducing ovarian androgen production. Inhibiting adrenal androgen production. Increasing levels of SHBG (Sex hormone-binding globulin, which is a protein that binds to the sex hormones testosterone and estrogen) resulting in lower levels of free testosterone.

Various drugs used as OCPs are: Ethinyl estradiol Norgestimate Desogestrel Norethindrone Ethynodiol diacetate Drospirenone

1. Anti- androgen therapy Spironolactone (SPA): It is an androgen blocker and competes with Dihydrotestosterone (DHT) (a sex hormone created from testosterone in the body) for binding to the androgen receptor. Spironolactone is more effective in treating hirsutism when combined with Oral Contraceptives, because, together, these drugs have complementary anti-androgenic actions. Cyproterone acetate (CPA): It has strong progestogenic and anti-androgen properties. It produces a decrease in circulating androstenedione (androstenedione is a precursor of testosterone and other androgens) levels and has been used as an effective treatment for hirsutism. However, CPA has steroidal side effects and can cause abnormalities in liver function and menstrual irregularities. Flutamide: It is used primarily in the management of prostate cancer, but has been used off-label for managing hirsutism.

Note: Although anti-androgens are an effective therapy for hirsutism, their use is not suggested because of the potential adverse effects on a developing male fetus in the uterus. However, in women who cannot conceive, or who are using a reliable contraceptive method, anti-androgens may be considered for monotherapy.

1. 5-alpha-reductase inhibitors (5-RA inhibitors) Finasteride, a 5-alpha reductase inhibitor, is effective in the treatment of Idiopathic hirsutism (IH).
2. Gonadotropin-releasing hormone (GnRH agonists) This therapy is reserved for women with severe hirsutism who don’t respond to oral contraceptives (OC) and antiandrogens. GnRH analogs reduce ovarian stimulation, estrogen production, and hence testosterone. This therapy is used in combination with an oral contraceptive pill containing estrogen and progestin. An example of this class of this drug is leuprolide acetate.
3. Corticosteroids Glucocorticoids: The main use of corticosteroids (dexamethasone and prednisone) has been to treat hirsutism associated with congenital adrenal hyperplasia .
4. Biological modifiers Topical eflornithine hydrochloride: This is a new agent, which is used as a topical cream for decreasing or arresting facial hair growth in women. It is thought to inhibit hair growth by inhibiting an enzyme involved in keratin synthesis. Gradual improvement is seen in six to eight weeks. It can also be used in combination with laser treatments for better effects. Insulin lowering agents: Insulin-sensitizing agents may improve hirsutism by reducing insulin levels and, therefore, circulating free and biologically active androgens. An example of this drug is metformin. Home-care For Hirsutism

Home remedies Spearmint tea (pudina): This tea is among the best natural remedies for hirsutism. Drinking spearmint tea regularly is shown to have a strong anti-androgenic activity which can help manage hirsutism. Zinc: Zinc works by blocking an enzyme involved in testosterone metabolism that causes excessive and unwanted hair growth. Some of the sources of zinc include chickpeas, pumpkin seeds, yogurt, beans, beef, chicken, and oyster. Cinnamon (dalchini): It is one the best natural remedies for hirsutism. In women with PCOS, it is known to improve insulin sensitivity and lipid profile. Folic acid: It helps in balancing the levels of homocysteine, which is a common amino acid found in the blood. This is also helpful in improving reproductive health. Licorice (mulethi) tea: One of the main compounds of the tea, glycyrrhizic acid, has proven to be effective in halting hair growth for those suffering from unwanted hair growth. Flax seeds (alsi): Flax seeds can cause reduction in Body Mass Index (BMI), total serum testosterone, and free serum testosterone levels, leading to decrease in excessive hair growth. Astragalus polysaccharide: Astragalus polysaccharides can be effective in improving insulin resistance, high androgen hormone status, and lipid metabolism in patients with PCOS. Alternative Therapies For Hirsutism

Diet Reduce calorie intake, especially during the evening. Distribute calorie intake into 5 to 6 meals per day. This keeps the weight under control and reduces the chances of obesity and hence, hirsutism. Eat foods with a low glycemic index (GI) that do not increase blood glucose levels sharply such as non-starchy vegetables and legumes. Include at least 20g of protein with every meal like eggs, chicken, fish, shellfish, and turkey. Drink lots of fresh, filtered water between meals, about half your body weight in ounces per day Increase your intake of vitamin B, especially B2, B3, B5, and B6. Avoid trans fat. Eating foods with trans fat contributes to issues such as hormonal imbalance and symptoms like hirsutism. Trans fat is found in packaged processed foods such as cookies, cakes, unhealthy vegetable oils, pastries, and crackers replace these with healthy fats like avocado oil, nuts, and seeds. Acupuncture Acupuncture is a traditional Chinese medicine technique that involves sticking finely pointed needles in areas of the body known as acupuncture points. It has shown promise in management of excessive hair growth. Yoga and exercise Doing yoga and exercises regularly can help improve blood circulation, help the body to feel fresh and prevent it from feeling fatigued all the time. They are useful in reducing stress or pressure on the body and have also proven to relieve stress, manage anxiety, and pain management. Hot water bath A hot water bath has muscle relaxant properties, the heat from the water can improve the blood circulation in the body and also ease tension in the muscles. Living With Hirsutism

Self-management can help in taking care of yourself.

Know about your condition: Sometimes hirsutism can affect the mental health of a person and it can lead to anxiety and depression. Talking to your near and dear ones can eliminate cases of emotional drainage and thus an effective treatment plan. Exercising daily: It increases the blood circulation of the body and frees the mind from tension and stress. Take your medicine on time: Medicines if prescribed, should be taken regularly under medical supervision. Talk with a doctor openly in case of any questions related to the issues faced: Feel free to ask as many questions that come to his mind. Lower stress levels: Practicing meditation and yoga help in eliminating stress and keeps the person happy. Take adequate sleep: Sleep activates and calms the body and mind. This makes the person feel less fatigued. Frequently Asked Questions What causes excessive facial hair in women? What are the complications of hirsutism? How much time is required for the treatment of hirsutism? What Is the connection between hirsutism and irregular menstruation? What is the pathophysiology of hirsutism? References Sachdeva S. Hirsutism: evaluation and treatment. Indian J Dermatol. 2010. Escobar-Morreale HF. Diagnosis and management of hirsutism. Ann N Y Acad Sci. 2010 Sep. Excessive hair growth. National Health Service. 15 March 2022. Health.Polycystic ovary Syndrome. Johns Hopkins Medicine. Patient Resource. Hirsutism. Jan 2022. Endocrine Society. Mihailidis J, Dermesropian R, Taxel P, Luthra P, Grant-Kels JM. Endocrine evaluation of hirsutism. Int J Womens Dermatol. 2017 Feb 16. van Zuuren EJ, Pijl H. Hirsutisme [Hirsutism]. Ned Tijdschr Geneeskd. 2007 Oct 20. Hafsi W, Badri T. Hirsutism. [Updated 2021 Aug 7]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan. Matheson E, Bain J. Hirsutism in Women. Am Fam Physician. 2019 Aug 1. Hirsutism: diagnosis and treatment. Alexandre Hohl, Marcelo Fernando Ronsoni, Mônica de Oliveira. Natural Remedies for Polycystic Ovarian Syndrome (PCOS): A Review. International Journal of Pharmaceutical and Phytopharmacological Research. Priyanka Kantivan Goswami, Dr. Anubha Khale, and Sunita Ogale. Jun 2012.

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HIV infection Also known as AIDS and HIV Overview HIV (Human Immunodeficiency Virus) attacks the immune system of the body and leads to AIDS (Acquired Immunodeficiency Syndrome). The first signs of HIV infection are flu-like symptoms that are seen within 2 to 4 weeks after getting infected. This is known as primary or acute HIV infection. Some people do not have any symptoms during this phase. It is followed by a latent stage during which the virus multiplies and usually there are no detectable signs and symptoms. Gradually the virus weakens the immune system and progresses to AIDS.

The most common cause of HIV is sexual contact with the infected person. A person can also get infected by blood transfusion, sharing infected needles and syringes contaminated with infected blood. Pregnant women infected with HIV can transmit the virus to the fetus through shared circulation.

Although the cure for the disease is still under research, some medications at certain stages can prolong the life of HIV-positive patients. These medications include protease inhibitors, fusion inhibitors, multidrug combinations, HIV-positive and reverse transcriptase inhibitors. Key Facts Usually seen in Individuals between 15 to 24 years of age Gender affected Both men and women but more common in women Body part(s) involved Immune system Prevalence Worldwide: 37.7 million (2020) Mimicking Conditions Flu Dementia Pneumonia Cancer Lymphoma/leukemia (blood cancer) Celiac disease Crohn’s disease and ulcerative colitis Necessary health tests/imaging HIV 1 and HIV 2 antibody test CD4 count Enzyme linked immunosorbent assay (ELISA) Western blot Rapid antibody screening Rapid antigen/antibody test Treatment Antiretroviral therapy (ART): Maraviroc, Fostemsavir, Raltegravir & Dolutegravir Nucleoside reverse transcriptase inhibitors (NRTIs): Lamivudine, Didanosine & Zidovudine Non-nucleoside reverse transcriptase inhibitors (NNRTIs): Efavirenz, Nevirapine & Etravirine Multi-drug combination: Dolutegravir+tenofovir+emtricitabine & Raltegravir+tenofovir+emtricitabine See All Symptoms Of HIV Infection

There are several symptoms of HIV infection which vary from person to person and also as per the stage of the infection. The three stages of HIV infection are:

Stage 1: Acute HIV infection It is estimated that 50-70% of individuals with HIV infection experience a flu-like illness within 2 to 4 weeks after a primary infection. This is known as primary or acute HIV infection and lasts for weeks. Some people do not have any symptoms during this phase. The symptoms can include: Fever Chills Rashes Headache Swollen lymph glands, mainly on the neck Night sweats Mouth ulcers or genital ulcers Joint Pain Fatigue Stage 2: Clinical latency In this stage, the virus is getting multiplied, but at a very low level. There are no detectable signs and symptoms in this stage. This stage is called Chronic HIV infection. Although the length of time from initial infection to the development of clinical disease varies greatly, the median time for untreated patients is ~10 years. The rate of ongoing progression is directly correlated with HIV RNA levels. Patients with high levels of HIV RNA in plasma progress to symptomatic disease faster than do patients with low levels of HIV RNA. The transmission of HIV is highest during this stage if viral load is detected in the blood. There is a risk of transmitting HIV to your sexual partner.

Stage 3: AIDS If a person is having HIV and is not on HIV treatment, gradually the virus will weaken the immune system and progress to AIDS. A diagnosis of AIDS is made in any individual age 6 years and older with HIV infection and a CD4+ T cell count <200 per microliter and in anyone with HIV infection who develops one of the HIV associated diseases considered to be indicative of a severe defect in cell mediated immunity. Symptoms of AIDS include: Pneumonia Sores of the mouth and anus Extreme tiredness Rapid weight loss Recurring fever Memory loss and depression Each of these symptoms can lead to another illness. Many of the severe symptoms of HIV are opportunistic infections. These infections come into action when the immune system of the body weakens. Causes Of HIV Infection

The human immunodeficiency virus belongs to the family of human retroviruses and subfamily of lentiviruses, it causes AIDS. HIV is a sexually transmitted disease (STD). AIDS is caused by HIV. HIV is a virus that attacks the immune system of the body. As HIV progressively damages the immune cells of the body, the immunity of the body gets compromised and it will get prone to many opportunistic infections. The point of very advanced HIV infection is called AIDS. It can take many years for AIDS to develop.

The main causes of HIV include:

1. Sexual contact: The most frequent cause of transmission of the virus is through sexual contact through unprotected vaginal or anal sex.
2. Blood transfusion: In some cases, you can come in contact with the virus through blood transfusion.
3. Sharing Infected needles: HIV can be transmitted by sharing infected needles and syringes.
4. From mother to child: The virus is passed from the expectant mother to the child, during or before birth or even during breastfeeding.
5. Through body fluids: These fluids have also proven to spread HIV infection like blood, semen, vaginal fluid, breast milk, the amniotic fluid surrounding the fetus, and cerebrospinal fluid surrounding the brain and spinal cord. Myth: AIDS is transmitted through mosquito/insect bite Fact: This is not true. Mosquitoes or insects cannot transmit HIV. Researchers have found out that HIV cannot replicate or survive in the saliva of insects nor through mosquito bite. Moreover, HIV is a fragile virus that does not live outside the human body. Read to know more common myths & facts about HIV. Check Out Here! Risk Factors For HIV Infection

A risk factor increases the chances of getting the disease. Certain lifestyle factors are related to HIV infection, by changing them the risk of getting HIV gradually lowers. The most common risk is: Having unprotected sex: Most people get HIV by having unprotected sex. During sex, the rectum, mouth, and genitals allow the virus to enter the body. To avoid this protection should be used. The use of condoms will lower the risk of sexually transmitted diseases. The chances are also higher for men having men as a partner and having multiple partners. Drug use: Sharing needles used by other people increases the risk of getting HIV. Even a small amount of blood is enough to transmit HIV. Certain health problems: Having certain sexually transmitted diseases increases the risk of HIV. The common ones are gonorrhea, warts, syphilis, and genital herpes. Blood products: Blood banks do not test for HIV. The infection can be passed on to normal individuals during a blood transfusion. Having certain professions: Working in places where you come in contact with bodily fluids and blood samples of patients makes you at a higher risk of having HIV. Like healthcare professionals and people working in laboratories. The risk factors for mother-to-child transmission of HIV via breastfeeding include: 1. Detectable levels of HIV in breast milk 2. The presence of mastitis(inflammation in breast tissues) 3. Lower maternal CD4+ T cell counts 4. Maternal Vitamin A deficiency Diagnosis Of HIV Infection

HIV test is done to test Human Immunodeficiency Virus in serum, saliva, and urine. The only way one could be sure if the person is infected with HIV is to have an HIV test. The symptoms of HIV may not appear for many years. Anyone who thinks they could have HIV should get tested.

Clinical history The doctor will ask about your symptoms and health history. A physical examination is done to confirm certain risks that make your chances of infection higher. If the doctor suspects HIV, you need confirmatory tests to start the treatment as soon as possible.

Laboratory tests (nucleic acid testing and antigen/antibody tests) The following test can be done to confirm if a person is HIV positive or negative. HIV 1 and HIV 2 antibody test: HIV is of two types HIV-1 and HIV-2. HIV-1 is found in people having a higher risk of AIDS. HIV -2 infected patients are found in West Africa. This test primarily checks the amount of virus present and p24 antigen present in the blood, these usually increase during the first week of infection. CD4 count: The CD4 cells are a type of White Blood Cells (WBC) that are specifically destroyed and targeted by HIV. A healthy person has a CD4 count of up to 1000. The CD4 count is associated with immunity levels of the patient, the higher the CD4 count the better the immunity, But when HIV infection progresses to AIDS the CD4 count becomes less than 200. Enzyme-linked immunosorbent assay (ELISA): The ELISA test is a blood antibody test that detects the proteins that are made during HIV infection. It is the most sought-after method for the detection of HIV. The ELISA test is also called enzyme immunoassay, as it is used to detect HIV antibodies. Western blot: A positive ELISA test is always followed by a western blot. It is a confirmatory diagnostic test for AIDS. Rapid antibody screening It is usually done by taking blood from a finger prick or with oral fluids. The results are obtained within 30 minutes.

Rapid antigen/antibody test The rapid test is an immunoassay used for screening and produces results within 30 minutes. It uses blood or oral fluids to look for antibodies for HIV. All immunoassays that give a positive result need further follow-up from a doctor.

Oral fluid antibody self test The OraQuick in-home HIV test is a self-administered over-the-counter test (OTC). The test uses oral fluid to check for antibodies to HIV-1 and HIV-2, the virus that causes AIDS.

Note: No HIV test can detect HIV soon after the infection. The time between acquiring the infection and when a test can tell for sure whether the virus is present or not is called the Window Period. The window period varies from person to person and depends on the type of test to detect HIV. A nucleic acid test usually tells after 10 to 33 days after HIV exposure. An antigen/antibody test performed in the laboratory detects HIV infection after 18 to 45 days after exposure. A rapid finger prick usually takes a longer time than 18 to 90 days. Antibody tests usually take 23 to 90 days to detect the infection. Celebs affected Billy Porter The Emmy-winning star of the TV show Pose was diagnosed with HIV in 2007 and revealed the news during the covid. Freddie Mercury The flamboyant front man for the band Queen kept quiet about his HIV until the day before his death from AIDS-related HIV due to bronchial pneumonia in 1991. A popular movie was made on his life in 2018 by the name of ‘Bohemian Rhapsody’. Did you know? HIV testing is the only way to know the HIV status of a person meaning whether a person is HIV positive or negative. It is important to get tested and know your HIV status so as to keep you and your partner healthy. The Centers for Disease Control and Prevention (CDC) recommends that everyone above 13 years to 64 years should get tested for HIV at least once as a part of a routine health care check-up. Want to know more about testing and diagnosis of HIV. Click Here! Prevention Of HIV Infection

There is no vaccine to prevent HIV infection and no cure for HIV has been discovered till now. To help prevent the spread of HIV following are some measures: Spreading awareness among the masses. Safe blood transfusion from authorized and accredited blood banks. Get tested for HIV: Before having sex get yourself tested and talk to your partner about this. Use of condoms: It is a protection against HIV and many Sexually Transmitted Infections. It is very important if condoms are put on before any sexual contact occurs between the vagina, penis, mouth, or anus. Don’t share syringes and needles: While injecting drugs, always use sterile drug injection equipment and water and never share them with others. Limit the number of sexual partners: The partner HIV-positive person has more chances of having STDs increase. Get tested and treated for STDs: Having a Sexually Transmitted Disease increases the risk of getting HIV or spreading it to others. HIV prevention medicine: If you are HIV negative, you can take pre-exposure prophylaxis (PrEP) medicine to reduce the risk of HIV. PrEP is available for people who are at a higher risk of having HIV infection( whose partner is HIV positive). A tablet is usually taken before you have sex and are exposed to HIV infection. Prevention of mother to child transmission of HIV: Pregnant women with HIV take HIV medicines for their health and prevention of HIV from mother to child. Specialist to Visit

In most cases, a general physician is a go-to doctor when it comes to the diagnosis of HIV infection. You can also visit an HIV healthcare provider who helps to track the progress and helps to guide whether HIV treatment is going in the right direction.

Most people with HIV see their health care provider after every six months. Some people seek their doctors more frequently during the first two years of treatment. It also varies from person to person and symptoms. People taking HIV medications regularly and having an undetectable viral load only need to have their lab tests checked twice a year.

Consult India’s best doctors online from the comfort of your home. Consult Now!

Treatment Of HIV Infection

There is no cure for HIV as of now, there are very effective treatments that enable most people with the virus to live a healthy and long life.

A. Antiretroviral therapy (ART) It reduces HIV-related morbidity at all stages of HIV infection and HIV transmission. HIV-positive. It suppresses viral load, maintains the CD4 count, prevents AIDS, and prolongs survival. Healthcare providers play a crucial role in helping patients initiate ART which leads to viral load suppression. Most people take daily HIV treatment to reach an undetectable viral load within six months of starting treatment. These include nasal sprays, inhalers as well as some recreational drugs

There are different classes of ART and some of them are:

1. Entry inhibitors: These work by blocking the entry of the virus into human cells. Some of the common examples include: Maraviroc Enfuvirtide Ibalizumab Fostemsavir
2. Integrase inhibitors: They are a class of antiretroviral drugs that prevent HIV by inserting its genetic code into the HIV-positive, DeoxyriboNucleic Acid (DNA) of an infected individual. It blocks the enzyme integrase of the hosts that HIV requires to make multiple copies of itself. These drugs do not cure HIV infection, they can only decrease the amount of HIV in the body. The most common side effects are nausea, headache, vomiting, fatigue, nasal infection, and throat infection. Examples include: Isentress Raltegravir Dolutegravir Carbotegravir Abamune (abacavir)
3. Protease inhibitors: They are a class of HIV antiviral drugs. These inhibitors break down the structural proteins that are necessary for the assembly and morphogenesis of virus particles. The role of protease is to break down viral particles into smaller fragments required for the assembly of new virus particles. Protease inhibitors block this step and hence the virus cannot replicate. Examples include : Indinavir Ritonavir Atazanavir
4. Fusion inhibitors: It works on host CD4 cells and thus prevents HIV from entering a cell. They bind to the envelope protein of the virus and block the fusion with the host CD4 cells. Enfuvirtide is the commonly used medicine in this category.  
   B. Nucleoside reverse transcriptase inhibitors (NRTIs) They are active inhibitors of reverse transcriptase in retrovirus. The different NRTIs are activated differently but they all have the same mechanism of action. But it has the major side effect of mitochondrial dysfunction which has been confirmed by side effects like cardiomyopathy, bone marrow suppression, and mitochondrial diseases. Examples are: Lamivudine Didanosine Stavudine Zidovudine Emtricitabine Tenofovir C. Non-nucleoside reverse transcriptase inhibitors (NNRTIs) These are a therapeutic class of compounds. They are used in combination with antiretroviral drugs to treat HIV-1 infection. NNRTIs. It blocks HIV-1 infection by preventing reverse transcriptase from completing the reverse transcription of the single-stranded RNA genome into DNA. Examples are: Efavirenz Nevirapine Etravirine D. Multi-drug combination It combines two or more different classes of drugs. It is a combination therapy against multidrug resistance. It has potential benefits such as broad-spectrum, greater potency than drugs used in monotherapy, and reduction in the number of resistant organisms. Common examples are: Dolutegravir + tenofovir + emtricitabine Raltegravir + tenofovir + emtricitabine Home-care For HIV Infection

Living with someone who has HIV is itself a life-changing experience for the person and the family itself. HIV symptoms vary from person to person and hence the care required also varies. However, a few tips can help to take care of someone.

1. Talk and understand the situation Be available to have an open and honest conversation about HIV. Do things together like you used to do before the diagnosis. Make them feel like the same person and make them realize that they matter.
2. Listen Being diagnosed with HIV is life-changing news. Listen to your loved ones and reassure them that it is a manageable health condition.
3. Learn To educate yourself about HIV, from the transmission to treatment. Having an understanding of HIV is a big step in forwarding your support to the family member.
4. Encourage treatment Starting HIV treatment early, adhering to the treatment, staying with the caregiver thus helps to control the viral load and prevent HIV infection from progressing to AIDS.
5. Support medication adherence HIV patients need to adhere to HIV medication. Help them in making a routine and following them.
6. Join HIV support groups Connecting with people facing the same challenges may help the person and boost morale. Few societies in India help people with HIV and encourage them to take advantage to engage with other patients in a safe and supportive environment. Complications Of HIV Infection

If left untreated, HIV may severely hamper a patient’s life and can cause various complications like:

1. HIV does not directly invade the neurons but it infects the glial cells that support neurons. HIV triggers inflammation that leads to damage to the brain and spinal cord. Some common symptoms of this are: Inability to concentrate Headache Behavioral changes Anxiety and depression Lack of coordination and walking
2. HIV infection can cause the shrinking of the brain that is involved in learning and information processing.
3. Some nervous system complications that occur as a result of HIV infection and drugs are pain, seizures, stroke, vision loss, and coma.
4. In children, HIV infection can cause developmental delays, nerve pain, slow growth, eye problems, and brain lesions.
5. HIV-associated dementia occurs in the most advanced stages of infection that include a decline in cognitive functions, concentration, memory, and slowing of motor functions.
6. Damage to the peripheral nerves causes progressive weakness and loss of sensation in the arms and legs.
7. Cardiomyopathy or chronic disease of the heart muscle can happen during stage IV infection that can result in heart failure.
8. Hepatobiliary diseases (heterogeneous group of diseases of the liver, bile ducts, and/or gallbladder)commonly occur in HIV patients. These include granulomatous hepatitis and AIDS cholangiopathy.
9. Diseases of the kidney and urinary tract: HIV-associated nephropathy is seen in the majority of the patients.
10. AIDS-associated arthropathy: This syndrome is characterized by joint disorders like subacute oligoarticular arthritis developing over a period of 1-6 weeks and lasting up to 6 months.
11. Higher risk of genitourinary infections seen with patients with HIV infection.
12. Immune reconstitution inflammatory syndrome (IRIS): It starts following the initiation of ART, a worsening of pre-existing, untreated, or partially treated opportunistic infections may be noted. Alternative Therapies For HIV Infection

Many people use alternative health treatment in addition to medical treatment. Some alternative therapies include:

1. Physical therapies Physical, and body therapies include activities such as yoga, massage, and aromatherapy. It promotes healing of the body. Yoga: It is a set of exercises that improve fitness, reduce stress, and increase flexibility. Many people, including those with HIV, use yoga to relax and become more relaxed. Massage: It is an excellent way to reduce stress and reduce muscle and back pain, headache, and soreness. Acupuncture: During acupuncture, tiny needles are inserted into certain areas. It is used to treat symptoms like nausea, fatigue and help with neuropathy. Aromatherapy: It is based on the idea that certain smells can change the way you think. People use aromatherapy to deal with stress or fatigue.
2. Relaxation therapies Relaxation therapy such as meditation and visualization can promote overall health and well-being. Meditation: It helps people to relax and calm their minds. Visualization: It helps people to feel more relaxed and less anxious.
3. Herbal medicines Herbal medicines are substances that come from plants, roots, leaves, and flowers and they work like standard medicines. These medicines can only reduce the symptoms, there is no cure as of now. Did you know? 1 December is observed as World AIDS day. According to the World Health Organization (WHO), HIV infection is one of the major public health concerns as it has claimed more than 32 million lives. Although there has been a significant decrease in the number of cases of HIV, there still needs to be an improvement in the treatment and quality of life of HIV-infected people. Here are a few FAQs answered on HIV by experts. Read More! Living With HIV Infection

Taking care of yourself when living with HIV:

Taking antiretroviral treatment (ART) for HIV If you’ve been diagnosed with HIV then start treatment as soon as possible. ART is not a cure for HIV, but it keeps HIV under control, protecting your immune system so that you can stay healthy and live a long life.

Adopt positive healthy living with an appropriate balanced diet HIV infection weakens the immune system, for longevity and productive life positive people need to take special care of their health and well-being. Eating the right amount of food to maintain weight and including a variety of foods from the five food groups: fruits, vegetables, grains, protein foods, and dairy.

Exercising regularly Having a healthy diet and exercising regularly are a must to boost your immunity along with the medication. Till date, there is no cure for HIV infection but taking antiretroviral therapy (ART medicines) and exercising regularly are helping people live a healthy and happy life for almost decades.

Avoid excessive alcohol or drug use Consumption of alcohol can damage the liver. The liver helps in the processing of anti-HIV drugs, so it is recommended to keep your alcohol consumption within the recommended limits. Heavy drinking and taking recreational drugs can also weaken your immune system, making it harder for your body to recover from infections.

Managing stress and getting support Stress-management techniques, such as yoga, meditation, cognitive restructuring, coping skills training, and interpersonal-skills training may reduce anxiety, depression, and social isolation in HIV-infected persons by lowering physical tension and increasing a sense of control and self-efficacy.

HIV and pregnancy Women living with HIV who become pregnant or who acquire the virus during pregnancy are at risk of both maternal and perinatal morbidity and mortality mainly if the virus is poorly controlled. There is a risk of transmission to the fetus during pregnancy labor and postpartum through breastfeeding.

Breastfeeding is a potential source of infection for the baby. Appropriate management reduces the consequences of HIV in pregnancy, ideally starting with preconception counseling and planning pregnancies when the viral load is minimum. During pregnancy, an appropriate combined antiretroviral (cART) medication is mandatory with very close monitoring of the viral load. Planning delivery and in special cases care must be taken to limit vertical transmission in women whose viral load is unknown or not controlled at the time of delivery. Frequently Asked Questions What is the name of the virus that causes AIDS? When to get tested for HIV after exposure? Can a woman living with HIV pass the virus on to her baby? What are the ways that HIV cannot be transmitted? References Key Facts.HIV/AIDS. The World Health Organisation(WHO). Last Updated July 2021. HIV Basis. Centers For Disease Control and Prevention(CDC). Last Updated May 2021. HIV Treatment. National Institute of Health. Last Updated March 2020. HIV/AIDS. National Health Portal, India (NHP).Last Updated May 2015. Symptoms of HIV. HIV.gov. Last updated July 2020. Types of HIV tests.Centers for Disease Control and Preventions(CDC).Last Updated May 2021. HIV treatment and care. Centers for Disease Control and Preventions(CDC). Last Updated August 2020. Sluis-Cremer, Nicolas, and Gilda Tachedjian. “Mechanisms of inhibition of HIV replication by non-nucleoside reverse transcriptase inhibitors.” Virus research vol. 134,1-2 (2008): 147-56. doi:10.1016/j.virusres.2008.01.002.

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Hypercalcemia Overview Hypercalcemia is a condition in which the calcium level in the blood is above normal (8.8 mg/dL-10.8 mg/dL). Hypercalcemia is classified into mild hypercalcemia (10.5 to 11.9 mg/dL), moderate hypercalcemia (12.0 to 13.9 mg/dL), and hypercalcemic crisis (14.0 to 16.0 mg/dL).

Calcium plays an important role in nerve function, muscle contraction, activity of enzymes, normal heart rhythms, and clotting of the blood. It is present in the bones as calcium phosphate while a small percentage is found in the cells and extracellular fluids.

Primary hyperparathyroidism and malignancy account for most of the cases of hypercalcemia. Other causes of hypercalcemia can include certain other medical disorders, some medications, and increased consumption of calcium or Vitamin D supplements.

Signs and symptoms of hypercalcemia range from mild to severe depending on the amount of calcium in the blood. Excessive calcium in the blood can weaken the bones, create kidney stones, and interfere with how the heart and brain work. Treatment of hypercalcemia is focused on the cause of elevated calcium. Key Facts Usually seen in All age groups Gender affected Both men and women but more common in women Body part(s) involved Bones Kidneys Heart Muscles Nerves Prevalence Worldwide: 1-2% (2021) Mimicking Conditions Hypermagnesemia Hyperparathyroidism Hyperphosphatemia Necessary health tests/imaging Serum calcium Erythrocyte sedimentation rate (ESR) Immunoglobulin panel Protein electrophoresis Bence Jones proteins Chest X-ray Liver function tests (LFTs) Abdominal ultrasound Imaging of bones Treatment Drugs acting on osteoclasts: Calcitonin & Mithramycin Drugs for cancer related hypercalcemia: Bisphosphonates, Denosumab, Pamidronate & Prednisone Other drugs: Cinacalcet, Diuretics & Ketoconazole Dialysis Surgery: Parathyroidectomy See All Symptoms Of Hypercalcemia

The severity of the symptoms of hypercalcemia does not depend on how high the calcium levels are. They vary from person to person, and older people generally have more symptoms than younger people.

These symptoms develop slowly, irrespective of the cause. Some of the mild to moderate symptoms may include: Loss of appetite Nausea and vomiting Constipation Abdominal pain Polydipsia (excessive thirst) Polyuria (frequent urination) Peptic ulcers Pancreatitis Osteoporosis Osteomalacia Arthritis Pathological fractures Fatigue/tiredness Weakness Muscle pain Confusion and disorientation Headaches Difficulty to concentrate Depression Serious symptoms can include: Seizure Irregular heartbeat Heart attack Loss of consciousness Coma Did you know? The broad signs of hypercalcemia can be categorized as “groans (gastrointestinal symptoms), bones (bone pain), stones (kidney stones), moans (fatigue and malaise), thrones (related to bowel movements) and psychic overtones (psychological problems)”. If you are noticing any of the symptoms, seek advice from our healthcare professionals. Consult Now! Causes Of Hypercalcemia

Calcium is very important in building strong bones and teeth, muscles contraction and nerve signal transmission. Parathyroid glands secrete a hormone when there are decreased levels of calcium in the blood, which triggers: Bones to release calcium into the bloodstream The digestive tract to absorb more and more calcium Kidneys to excrete less calcium and activate Vitamin D (which plays a vital role in the absorption of calcium).

Common conditions associated with hypercalcemia can be divided into two major categories- parathyroid hormone (PTH) causes and non-parathyroid hormone causes. They are as follows:

Parathyroid hormone causes of hypercalcemia Hyperparathyroidism: It is a condition caused due to an overactive parathyroid gland and is the most common cause of hypercalcemia. It can be a result of a noncancerous (benign) tumor or enlargement of one or more of the four parathyroid glands. Hereditary factors: A rare genetic disorder known as familial hypocalciuric hypercalcemia causes an increase of calcium in the blood because of defects in calcium receptors in the body. Endocrine causes: Theses include diseases such as thyrotoxicosis (stimulation of cells osteoclasts by thyroid hormone), hypoadrenalism (decreased functioning of the adrenal glands located just above the kidneys, also known as Addison’s disease) and pheochromocytomas (hormone-secreting tumor that can occur in the adrenal glands). Medications: Certain drugs such as thiazide diuretics (used to treat high blood pressure) and lithium (used to treat bipolar disorder) can increase the release of the parathyroid hormone leading to hypercalcemia. Cancer: Lung cancer, breast cancer, kidney cancer, some blood cancers like multiple myeloma, and the spread of cancer (metastasis) to the bones can increase the risk of hypercalcemia. Non-parathyroid hormone causes of hypercalcemia Supplements: Excessive intake of calcium or Vitamin D supplements over a period of time can raise calcium levels in the blood above the normal range. Immobility: Hypercalcemia can develop in people who have a condition that causes them to spend a lot of time sitting or lying down. This is due to the release of calcium into the blood from the bones that don’t bear weight. Severe dehydration: Less fluid in blood can cause a rise in calcium concentrations leading to mild or transient hypercalcemia. However, the severity of hypercalcemia depends on the kidney function. In people with long term kidney disorders, the effect of dehydration is greater. Other diseases: Tuberculosis and sarcoidosis, are lung diseases that can elevate levels of Vitamin D in the blood, which stimulates the digestive tract to absorb more calcium. Paget’s disease has also been linked to an increase in levels of calcium. The normal functioning of the body depends on the hormones to be released in the right quantity. If the parathyroid glands make too much or too little hormone, it disrupts this balance. Read more about hyperparathyroidism. Click Here!

Risk Factors For Hypercalcemia

Any risk factor that puts an individual at a risk for developing hyperparathyroidism or having overactive thyroid glands is also at the risk of developing hypercalcemia.

Common risk factors of hypercalcemia include: Women in the postmenopausal age. Older individuals in their 50s or 60s. Family history of hyperparathyroidism. Past history of familial syndromes such as multiple endocrine neoplasia (diseases affecting the hormone-producing, endocrine system) type 1, type 2A or type 4, familial hypocalciuric hypercalcemia (an inherited disorder that causes abnormally high levels of calcium in the blood and low to moderate levels of calcium in the urine), hyperparathyroid-jaw tumor syndrome (a condition characterized by overactivity of the parathyroid glands). Less common risk factors of hypercalcemia include: Any past or current history of lithium use. Radiation exposure to head and neck region. Note: Hypercalcemia generally presents with mild or no symptoms in many cases and may go unnoticed. With timely preventive health check-ups, one can spot and address risk factors for certain diseases that might crop up with old age. Learn more about the need for preventive health checkups for the elderly. Tap To Read! Diagnosis Of Hypercalcemia

Hypercalcemia can cause a very few signs or symptoms, and the individuals may not know that they have the disorder until routine blood tests like serum calcium can help determine if the individual has hypercalcemia.

Blood tests can also show whether your parathyroid hormone level is high, indicating that you have hyperparathyroidism. If hyperparathyroidism has been excluded, then further tests will be required to determine whether the cause of hypercalcemia is associated with malignancy. In these cases, parathyroid hormone (PTH) levels will be undetectable and further tests are conducted. They include: Erythrocyte sedimentation rate (ESR): This test indicates the presence of inflammation in the body but does not locate the cause. Immunoglobulin panel: This test measures the levels of certain immunoglobulins or antibodies in the blood. Protein electrophoresis: This test is done to identify some unique kind of protein in the body that is present in certain kinds of cancer. Bence Jones proteins: This test measures the levels of the Bence Jones protein in the urine which is specifically produced by plasma cells that provide immunity to the body. Chest X-ray: An imaging test that uses X-rays to look at the structures and organs in the chest and detect certain lung and heart problems. Liver function tests (LFTs): Group of blood tests commonly performed to evaluate the function of the liver. Abdominal ultrasound: This test is used to create images of organs in the abdomen including liver, gallbladder, spleen, pancreas, and kidneys. Imaging of bones: It is a specialized radiology procedure used to examine the various bones of the skeleton Genetic testing is gaining importance lately and is becoming a routine part of the investigation of a case of hypercalcemia where a family history is appropriate. Prevention Of Hypercalcemia

Not all hypercalcemia can be prevented, but avoiding excess intake of calcium pills and calcium-based antacid tablets are recommended. Talk to the doctor if there is any family history of high calcium, kidney stones, or parathyroid conditions. Avoid taking dietary supplements, vitamins, or minerals without first discussing them with the doctor.

Also, changes in the calcium level in the blood can be linked to cancer. So the best way to control calcium is to treat cancer itself. Did you know? Cancer is not just one disease but many diseases. There are more than 100 different types of cancer. Click To Read More! Specialist To Visit

The primary cause of hypercalcemia is abnormal functioning of the parathyroid glands or any kind of malignancies. Hypercalcemia can also weaken the bones, create kidney stones and interfere with the functioning of the heart and brain. The doctors to visit are: Endocrinologist Nephrologist Oncologist An endocrinologist treats metabolic and hormone disorders. A nephrologist focuses on kidney diseases whereas an oncologist specializes in treatment of cancer.

If you are noticing any of the symptoms, seek advice from our world-class medical professionals. Consult Now!

Treatment Of Hypercalcemia

In the case of mild to moderate hypercalcemia, monitoring the bones and kidneys over time to be sure they are healthy is the best option. In severe cases of hypercalcemia medications or treatment of the underlying disease, including surgery might be required.

A. Medications The most recommended medications include:

1. Drugs acting on osteoclasts Calcitonin: The hormone controls the levels of calcium in the blood. It is a calcitonin receptor agonist that acts by suppressing the activity of osteoclasts (bone destroying cells). Mithramycin: This drug can block the function of osteoclasts and is often administered to patients with malignancy-associated hypercalcemia (MAH). This drug can cause severe toxicity in kidneys, liver, and bone marrow.
2. Drugs used in cancer related hypercalcemia Bisphosphonates: It can lower calcium levels and is used to treat hypercalcemia due to cancer. Denosumab: This drug is used in the treatment of cancer-caused hypercalcemia in patients who don’t respond well to bisphosphonates. Pamidronate: This can be given intravenously in patients with malignancies. This agent often will normalize the serum calcium level. This treatment has a rapid onset but short duration of effect and patients can develop tolerance to the calcium-lowering effect. Prednisone: Short-term use of steroid pills such as prednisone is usually helpful in hypercalcemia caused by high levels of Vitamin D, myeloma, and lymphoma.
3. Other drugs Cinacalcet: This drug has been approved for managing hypercalcemia and acts by controlling overactive parathyroid glands. IV fluids and diuretics: These might be required in case of emergency to lower the calcium level so as to prevent heart rhythm problems or damage to the nervous system. Ketoconazole: This is an antifungal drug, used in hypervitaminosis D (excessive Vitamin D in the body) to prevent toxicity and overproduction of calcium. B. Dialysis In severe cases of resistant, life-threatening hypercalcemia, hemodialysis (a treatment to filter wastes and water from blood) is effective in lowering serum calcium levels.

C. Surgery In hyperparathyroidism leading to hypercalcemia, urgent parathyroidectomy (removal of affected parathyroid gland) is potentially curative. In most cases, only one of the four parathyroid glands is affected. A special test is used to scan and pinpoint the gland or glands that aren’t working properly. This procedure uses an injection of a small dose of radioactive material into the glands. Home-care For Hypercalcemia

Mild hypercalcemia may not require any treatment. However, if the condition is more serious or severe, the doctor may prescribe medications to lower the levels of calcium along with treating the underlying cause.

Certain lifestyle modifications can help keep calcium levels balanced and bones healthy. They are:

1. Stay hydrated Drinking water can lower blood calcium levels and prevent kidney stones. Make sure to keep a bottle of water nearby at night.
2. Quit smoking Smoking can increase the risk of bone loss and cancer. In addition to improving general health, quitting smoking will reduce the risk of cancer and other health problems. Tobacco is injurious to the health. Say no to tobacco. Try our smoking cessation product range. Explore Now!
3. Exercise regularly Staying active is the key to promoting good health. Resistance training can help improve bone strength and health.
4. Follow proper medical advice To decrease the risk of consuming too much Vitamin D or calcium supplements and developing hypercalcemia. Use antacids that have magnesium and avoid antacids that have a lot of calcium in them. Talk to the doctor about what medicines and herbs are safe in case of hypercalcemia.
5. Have a balanced diet Decrease the number of dairy foods like cheese, milk, yogurt, and ice cream. Avoid food items like okra, spinach, soya, and bread that have high levels of calcium in them. Read the labels of food carefully and skip items that have high calcium. substances to ensure the quantity. Every person is different and so are the nutritional requirements. There are some dietary guidelines that one should follow for a proper balanced diet. Understand how to reap benefits from your diet. Click To Know!

If the doctor has prescribed medications to keep the calcium levels in control, take them the right way and the right quantity. Call the doctor if there are any side effects. Complications Of Hypercalcemia

Hypercalcemia complications can range from manageable to being fatal. They include: Osteoporosis: It is also known as bone-thinning disease as the bones continue to release calcium into the blood. This may lead to bone fractures, spinal column curvature, and loss of height. Kidney stones: This may be due to the formation of crystals in the kidneys due to excessive calcium in the blood. These crystals can combine over time to form kidney stones. Passing a stone during urination can be extremely painful. Kidney failure: This complication occurs in severe hypercalcemia and it can damage the kidneys, limiting their ability to cleanse the blood and eliminate fluid. Arrhythmia: Hypercalcemia can lead to irregular heartbeat as increased calcium levels may affect the electrical impulses that regulate the heartbeat. Nervous system problems: Hypercalcemia can lead to confusion, dementia, and coma, in severe cases. Some of the other complications of hypercalcemia include: Depression Bone pain Constipation Pancreatitis Gastric ulcers Paresthesias Syncope Alternative Therapies For Hypercalcemia

Mild to moderate symptoms of hypercalcemia can be managed by certain lifestyle modifications and prescribed medications. However, there is a lot of research going on to reduce calcium levels through alternate medicine as well. Some of it includes:

1. Herbal therapy Herbs are sometimes used to counter the bone loss that can occur from hyperparathyroidism, though scientific studies around it are lacking. They are generally available as standardized dried extracts like pills, capsules, tablets, teas, or tinctures/liquid extracts like alcohol extraction

Talk to the doctor before taking any herbs, in case of hypercalcemia due to hyperparathyroidism. The herbs that have shown positive results in lowering the calcium levels are: Chaste tree (Vitex agnus castus) Dandelion (Taraxacum officinale) Fructus ligustri lucidi (FLL) 2. Physical therapy A sedentary lifestyle can cause the longer bones to absorb its calcium leading to hypercalcemia. Being active and physical therapy have proven to be effective in these cases. The common uses of this therapy include: Weight bearing help prevent osteoporosis and immobility Prevention of fractures Increased strength and range of motion (ROM) Living With Hypercalcemia

The severity of hypercalcemia depends on the cause. When hypercalcemia is due to hyperparathyroidism, symptoms tend to be mild but are prolonged. However, hypercalcemia due to malignancy can have severe symptoms and poor quality of life due to aggressive treatment modalities.

The mild symptoms of hypercalcemia can be managed by following certain simple lifestyle changes like: Stop taking calcium supplements Avoid medications containing calcium carbonate, which are generally used to treat acid reflux Stay active to keep the digestive system moving Avoid long periods of inactivity and a sedentary lifestyle Drink a lot of liquids and stay hydrated as hydration aids the body in breaking down food Abstain from consuming large quantities of calcium-rich foods Do not deprive the body of calcium-rich foods completely as they are required for other functional nutrients Talk to your doctor before making any drastic changes and come up with a plan that best suits your needs Quit smoking Did you know? Smoking tobacco is one of the leading and preventable causes of premature casualties around the globe. Read more about tips on how to quit smoking, and deal with challenges of quitting. Read Now! Frequently Asked Questions When to consult a doctor? Can corticosteroids cause hypercalcemia? When and what is the right choice to take calcium supplements? Can one have too much calcium? How can hypercalcemia cause peptic ulcers? What is the outlook after one is diagnosed with hypercalcemia? References Sadiq NM, Naganathan S, Badireddy M. Hypercalcemia. [Updated 2021 Sep 11]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan. C. Michael Gibson (ed.), Anmol Pitliya (ed.). Hypercalcemia risk factors. 2018 Jul. Turner JJO. Hypercalcaemia - presentation and management . Clin Med (Lond). 2017;17(3):270-273. Hypercalcemia (High Calcium Level in the Blood) and Cancer. Prevention Guidelines. Johns Hopkins Medicine. 2021 Jan. Zhang Y, Dong XL, Leung PC, Che CT, Wong MS. Fructus ligustri lucidi extract improves calcium balance and modulates the calciotropic hormone level and vitamin D-dependent gene expression in aged ovariectomized rats. Menopause. 2008. Lietman SA, Germain-Lee EL, Levine MA. Hypercalcemia in children and adolescents. Curr Opin Pediatr. 2010.

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Hyperpigmentation Also known as Discolouration and Pigmentation Overview Hyperpigmentation is a condition in which some patches of skin take a darker colour than the rest of the surrounding skin. It is a harmless condition which is caused due to excessive melanin, a brown pigment that is produced in the body and is responsible for normal skin tone.

Hyperpigmentation can affect any person across all races. There are different types of hyperpigmentation including melasma, post-inflammatory hyperpigmentation, and age spots. Excessive exposure to sunlight, inflammation, hormonal disturbances, reaction to certain drugs and some medical conditions are known to cause hyperpigmentation.

Though the condition is harmless, some people may prefer to treat it. This can be done by avoiding exposure to the sun, using topical creams that contain retinoids, hydroquinone, azelaic acid, and kojic acid, or undergoing cosmetic procedures such as laser therapy and chemical peels. Key Facts Usually seen in Adults Gender affected Both men and women Body part(s) involved Skin Face Hands Legs Chest Necessary health tests/imaging Physical examination Complete medical history Wood lamps Treatment Topical creams: Kojic acid, Azelaic acid, Hydroquinone, Retinoids and Vitamin C Chemical peels Laser therapy Microdermabrasion Specialists to consult General physician Dermatologist Symptoms Of Hyperpigmentation

The main symptom of hyperpigmentation is the development of darkened areas on the skin. These can occur in patches, vary in size and can develop anywhere on the body. The symptoms of the condition vary depending upon the type. The most common types of hyperpigmentation are:

1. Sunspots Sunspots, solar lentigines or age spots are seen quite commonly. They are also called liver spots but are not related to any liver disorder. They are caused due to excessive exposure to the sun over time.

Sunspots appear as brown, black or tan spots and are spread across the face, back of the hands and skin that has been exposed to the sun for a long time.

1. Melasma Melasma also known as chloasma is characterised by the presentation of hyperpigmented brown to greyish brown patches on the face including the cheeks, upper lip and forehead, as well as the forearms. It sometimes affects arms, neck, tummy, back or any part of skin that is exposed to sunlight.

Melasma is also called the ‘mask of pregnancy’ because it primarily affects pregnant women. It is also seen in women taking oral contraceptives. Non-pregnant women and dark-skinned men can also get affected. It is more prevalent and lasts longer in people with dark skin.

1. Post-inflammatory hyperpigmentation (PIH) It is caused due to an injury or inflammation of the skin. It presents as patches or spots of darkened skin. It usually occurs after an inflammatory skin condition such as the presence of acne or eczema. It usually occurs on the face or neck. Causes Of Hyperpigmentation

The most common cause of hyperpigmentation is excessive production of melanin pigment. There are different conditions or factors that can alter the production of melanin in the body that lead to hyperpigmentation such as:

1. Excessive exposure of the sun Prolonged exposure towards the sun can cause the body to produce more melanin to protect the skin from the harmful rays of the sun. This results in patches or dark spots that are also known as sun spots or age spots. They are usually seen during middle age and increase in number with age.

There is a direct correlation between skin pigmentation seen in people with the geographical distribution of ultraviolet radiation. Dark-skinned people are mostly present in areas that receive higher amounts of UVB radiation and light-skinned people inhabit areas that are further away from the tropics.

1. Skin inflammation People can experience the darkening of the skin after inflammation of that area. This includes inflammation caused due to acne, psoriasis, lichen planus, atopic dermatitis, and allergic contact. Post-inflammatory hyperpigmentation is more severe in cases of recurrent inflammation as compared to short-term acute inflammation. The resulting hyperpigmentation can last for months to years and can hamper a person’s quality of life.
2. Melasma Also known as ‘chloasma’ or the “mask of pregnancy,” occurs in pregnant women. It is a common skin problem that causes dark discoloured patchy hyperpigmentation. It typically occurs on the face and is symmetrical, with matching marks on both sides of the face.

Melasma is seen mainly in women across all age groups and races. Men can also get affected by melasma. It is more prevalent and lasts longer in people with dark skin.

The exact cause behind melasma hasn’t been determined yet but some factors are directly linked with the same. This includes an increase in estrogen levels during pregnancy or due to the usage of oral contraceptive pills. Melasma usually resolves on its own after pregnancy or when a woman stops taking birth control pills.

Some people may also have a genetic predisposition towards melasma or may suffer from conditions such as thyroid or liver disorders. UV exposure exacerbates the development of melasma.

Melasma can appear on the skin at any point in time, and your day-to-day skin care routine may not be enough to combat its appearance.

Read this to learn about how to get rid of melasma. Read Here!

1. Reaction to certain drugs Using medications such as tricyclic antidepressants and antimalarial drugs can cause hyperpigmentation. This can result in patches of skin to make a greyish hue. Sometimes, the chemicals present in topical treatment can cause hyperpigmentation too.
2. Addison’s disease Addison’s disease is a medical condition that affects a person’s adrenal glands. The adrenal glands are located above the kidneys and produce hormones that influence every tissue and organ of the body. Addison’s disease is an autoimmune disorder in which the immune system starts to attack the adrenal glands themselves. This can also result in hyperpigmentation of elbows, knees, folds of skin, lips, knuckles, and toes. Some other symptoms of Addison’s disease include fatigue, muscle weakness, nausea, and vomiting.
3. Hemochromatosis This is a medical condition that is inheritable and causes the body to retain too much iron. It can result in hyperpigmentation of the skin in which the skin starts to look more tanner or darker than usual. Other symptoms of the condition include stomach pain, joint pain, fatigue, and weight loss.
4. Acanthosis nigricans Hyperpigmentation of intertriginous areas like the nape of the neck, and armpits is associated with insulin resistance leading to diabetes and metabolic syndrome (cluster of conditions that occur together, increasing your risk of heart disease, stroke and type 2 diabetes).
5. Linea nigra It is the presence of a hyperpigmented line found on the abdomen during pregnancy.
6. Peutz–Jeghers syndrome This is an autosomal dominant (passed through the families) disorder characterised by hyperpigmented macules on the lips and oral mucosa and gastrointestinal polyps.
7. Smoker’s melanosis This can be seen with the naked eye as a brown to black pigmentation of the oral tissue i.e. the gums, cheeks or palate as well as in the larynx. It is most often seen in the lower gums of tobacco users.
8. Mercury poisoning This particularly causes darkening of the outer layer of the skin, resulting from the topical application of mercurial ointments for skin-whitening.
9. Porphyria It is a group of liver disorders in which substances called porphyrins build up in the body, negatively affecting the skin. This causes local skin damage and resultant hyperpigmentation in the long run.
10. Metabolic causes These include vitamin deficiencies such as Vitamin B12 and folic acid.
11. Cancer Although not as common, in many cases of malignancy, especially related to melanoma, diffuse hyperpigmentation is seen. This is more common in patients with metastatic disease and/or those patients who present with melanoma of an unknown origin. Risk Factors For Hyperpigmentation

Some common risk factors of hyperpigmentation include: Prolonged exposure towards the sun Darker skin tone that is more prone to changes in the pigmentation Use of oral contraceptives or pregnancy seen in the cases of melasma Certain medications that can increase the skin’s sensitivity towards sunlight Trauma that wounds the skin such as a burn injury Inflammation plays an important role in hyperpigmentation post-acne Sun exposure is the most common cause for hyperpigmentation. Protect your skin by choosing the right sunscreen. Read more about tips to choose the right sunscreen. Click Here! Diagnosis Of Hyperpigmentation

Hyperpigmentation can be caused due to multiple factors and can be diagnosed. Some of the diagnostic tests include:

1. Physical examination A skin specialist known as a dermatologist can determine the cause behind your hyperpigmentation. They can perform a physical exam or biopsy in which a small sample of skin is taken and sent to a lab for further investigations. Melasma can usually be identified by a doctor by just looking at the skin.
2. Complete medical history Hyperpigmentation can be caused by certain medications and also some health conditions. A detailed medical history can help in confirming the diagnosis.
3. Woods lamp The woods lamp is an examination in which ultraviolet light is used to show fluorescence. This device is used by a dermatologist to diagnose the different pigmentations of the skin. The exam will be conducted in a darkened room that will allow wood light to lighten the affected area for some seconds. The doctor will look for changes in colour or fluorescence. Normal skin will not show fluorescence whereas the presence of fungal, bacterial infections, or pigment disorder will. Celebs affected Drew Barrymore Drew Barrymore, famous American actress has spoken about dealing with melasma. Molly Sims Molly Sims is a model and mother who has talked about her experience with melasma several times. Prevention Of Hyperpigmentation

There is no sure short way to prevent hyperpigmentation. However, there are some ways through which you can reduce your risk of developing hyperpigmentation. They are: Apply sunscreen as it protect your skin against the harmful rays of the sun. The most recommended SPF level is 50. Cover your face with hats or caps, if you are going out in the sun. Avoid going out when the sun is at its strongest, especially in the afternoon. Add Vitamin C to your beauty regime. Limit scratching or touching your skin frequently. Why should you apply a sunscreen? Ultraviolet radiation emanating from the sun is the primary cause of sunburn, eye damage and skin damage. Learn more about the basics of sunscreen. Tap To Read! Specialist To Visit

Hyperpigmentation is harmless but it can have an effect on your mental well being as well as physical wellness, if associated with another underlying condition. Doctors that can help you in reducing your hyperpigmentation or diagnosing any other health condition are: Dermatologist General physician If you are noticing any of the symptoms, seek advice from our world-class medical professionals. Consult Now!

Treatment Of Hyperpigmentation

There are various treatment modalities available to reduce and treat hyperpigmentation. They include:

1. Topical creams Many people opt to use over-the-counter topical creams that contain ingredients that can lighten the skin. This includes creams that contain kojic acid, azelaic acid, hydroquinone, retinoids, and Vitamin C.

Topical prescription creams with hydroquinone can lighten the skin. Hydroquinone remains a workhorse of melasma and hyperpigmentation management and is often considered the topical “gold standard”. However, it is not advisable to use topical hydroquinone for a long time since it can cause the skin to darken further called ochronosis. Always consult a dermatologist before using a cream containing hydroquinone to get the right guidance on how you can use the cream.

Creams containing retinoids or kojic acid can take a couple of months to show their effect.

1. Chemical peels An effective way of treating hyperpigmentation is chemical peels. This technique involves applying a chemical solution to the skin that leads to the area’s exfoliation and peeling. The skin that regenerates in that area is smoother and less wrinkled.

Usually, chemicals such as glycolic acid, salicylic acid, and trichloroacetic acid are used for chemical peels. If you are using a topical retinoid, talk to your doctor before using an over-the-counter peel. You may need to stop retinoid use for seven days before the peel. Superficial chemical peels use alpha-hydroxy acid or other mild acids that only penetrate the outer layer of the skin and improve mild skin discoloration.

Medium strength chemical peels use glycolic or trichloroacetic acid that can penetrate the outer and middle layers of the skin. This treatment reduces age spots and moderate skin discoloration. Deep chemical peels use trichloroacetic acid or phenol. The chemical penetrates the deeper layer of the skin and can help in reducing shallow scars and age spots.

1. Dermabrasion This medical procedure uses a wire brush or diamond wheel that can level the superficial layer of the skin. The areas that are treated with dermabrasion heal and allow new skin to regenerate. Dermabrasion foremost injures the skin and patients who opt for the procedure should be prepared for how they will look right after the treatment and during the time the skin regenerates. The patient needs to talk to their doctor and have realistic expectations from the treatment. The result of dermabrasion can take up to several weeks or months to become evident.
2. Laser resurfacing Laser resurfacing is a popular medical procedure that uses a laser device to improve the way the skin appears to be. It is also used to treat minor flaws and remove layers of skin. Carbon dioxide or CO2 laser is the most commonly used laser that can treat minor wrinkles, scars, and other conditions. Erbium laser is used to improve superficial and deep lines on the face, hand, and chest. It causes fewer side effects than the CO2 laser. Laser toning using YAG laser and intense pulse light can be used to treat hyperpigmentation such as melasma and post-inflammatory hyperpigmentation. Did you know? Along with all the chemicals and various skin lightening techniques, there are a lot of options for fruit peels as well. Read more about it. Click Here! Home-care For Hyperpigmentation

Hyperpigmentation is not a serious condition, but it can take a toll on your mind because of the appearance. Here are a few tips that can help you with it. They are: Always follow the instructions given by your dermatologist. If you have been advised to apply a topical cream or use a particular face wash, do so religiously and be patient for the results to become evident. Apply sunscreen while going out including on cloudy days. In case you have acne or other forms of facial injury, do not poke or touch that area. Scratching or picking at that area will increase the inflammation of that region which will lead to darkening of the skin. Use over-the-counter products that contain spot eradicating ingredients such as arbutin and niacinamide. It is important to carefully read the information leaflet of the medicine since applying too much of any product can lead to irritation of the skin. You can try natural ingredients like aloe vera, green tea extract, and sandalwood to lighten the skin. Are dark spots worrying you? Don’t worry, having dark spots on the face isn’t a big deal. It is absolutely normal and you do not have to break your head if you have them. Read more about the ways to tackle it. Click Here! Complications Of Hyperpigmentation

Hyperpigmentation is the harmless darkening of skin and doesn’t cause any particular complication. In case your hyperpigmentation doesn’t improve within a few months, consult a doctor to rule out any underlying medical conditions. Alternative Therapies For Hyperpigmentation

Home remedies Hyperpigmentation can be lightened with ingredients found at home. Natural facepacks can work wonders. However, it is always better to consult with your dermatologist before using these home remedies.

1. Aloe vera Aloe vera is a plant that contains aloesin, a compound that can lighten hyperpigmentation. The compound works by reducing the production of melanin in the skin. Applying aloe vera has been found to relieve melasma in pregnant women. You can use natural aloe vera or aloe vera gels that are available in the market.
2. Licorice (Mulethi) This extract may reportedly lighten hyperpigmentation. Licorice extract has antioxidants and anti-inflammatory agents that can cause skin lightening.
3. Green tea Green tea contains antioxidants and anti-inflammatory properties that can improve hyperpigmentation.
4. Turmeric (Haldi) Regular application of turmeric which is rich in antioxidants helps in lightening the dark patches. It also reduces the occurrence of pimples that can later lead to hyperpigmentation.
5. Potato (Aloo) Potatoes contain an enzyme called catecholase which is known to lighten skin pigmentation, dark spots and blemishes.
6. Tomato (Tamatar) Tomato paste rich in lycopene that protects the skin against short-term and long-term effects of sun damage.
7. Milk (Dudh) Milk, buttermilk, and even sour milk have lactic acid that helps to lighten skin discoloration.
8. Sandalwood (Chandan) This is an age-old remedy used by all the elderly people to get the glow. Sandalwood helps to lighten hyperpigmentation spots as it contains natural skin-lightening agents. Can hyperpigmentation be cured naturally? There are some effective natural remedies that can help in reducing the appearance of dark spots over time. Read more about some of these useful home remedies to reduce hyperpigmentation. Click Here! Living With Hyperpigmentation

Hyperpigmentation of skin is harmless, however, it can affect a person’s mental health and make them conscious of how they look. This can affect a person’s quality of life and dishearten them. However, there are some effective ways of managing hyperpigmentation. Avoid going out in direct sunlight and if you do so always apply a sunscreen that contains SPF 30 or above. Remember to reapply sunscreen every two hours. Wear hats or caps that will protect you from harsh UV rays. Use gentle, fragrance-free products that do not contain any ingredients that can exacerbate inflammation or irritation of the skin. Avoid waxing areas that have melasma as that can cause skin inflammation. Increase intake of foods rich in Vitamin A & antioxidants. Vegetables like spinach, carrots, lettuce, broccoli, red bell peppers & sweet potato to help reduce and prevent pigmentation. Consume lots of citrus fruits. Vitamin C has antioxidant properties that helps in reducing damage caused by harmful UV rays and prevents dark spots. Deficiency of Vitamin B12 is a common cause for skin pigmentation. Meeting your daily requirement can help in managing pigmentation. Drink plenty of water to keep your skin supple and to get rid of toxins. You should be drinking at least 2-3 litres of fluids in summer. Always consult a dermatologist for correct diagnosis of any underlying cause and proper treatment of hyperpigmentation. Did you know? Reasons for pigmentation may range from hereditary factors to hormonal imbalance and excessive sun exposure. Learn more about natural ways of dealing with it. Read More! Frequently Asked Questions What medications can cause hyperpigmentation? Does hyperpigmentation resolve on its own? Is Vitamin C better than retinol for hyperpigmentation? How does Vitamin C work for the skin? Is hyperpigmentation a sign of a medical condition? What is intense pulse light therapy (IPL)? Is microdermabrasion safe? References Dermatologist shines a light on natural ingredients used in new topical treatments for hyperpigmentation. (2014, March 21). Eichenfield, D. Z., & Cohen, P. R. (2016, February). Amitriptyline-induced cutaneous hyperpigmentation: Case report and review of psychotropic drug-associated mucocutaneous hyperpigmentation. Dermatology Online Journal, 22(2), 6. Melasma: Diagnosis and Treatment, American Academy Of Dermatology Association, Updated on: 15/02/22 Nouveau S, Agrawal D, Kohli M, Bernerd F, Misra N, Nayak CS. Skin hyperpigmentation in Indian population: Insights and best practice. Indian journal of dermatology. 2016 Sep;61(5):487. Desai SR. Hyperpigmentation therapy: a review. The Journal of clinical and aesthetic dermatology. 2014 Aug;7(8):13.

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Hypertension (high blood pressure) Also known as High Blood Pressure and High BP Overview Hypertension or high blood pressure is one of the common disorders affecting 1.13 billion people worldwide, as per 2021 WHO report. There are numerous factors that put you at risk of hypertension which include sedentary lifestyle, increased age, stress, family history, cigarette smoking, being overweight, high salt diet, etc. Moreover, certain diseases can also lead to high blood pressure such as diabetes, chronic kidney disease, and hypercholesterolemia.

The condition causes thickening of your blood vessel walls which leads to increased blood flow with high pressure. This in turn can lead to microscopic injuries to various organs of the body. Most patients have no obvious symptoms and hence, do not even know that they have hypertension. As a result, a large number of hypertension cases go undetected. However, patients can experience symptoms such as severe headache, fatigue, dizziness, chest pain, difficulty in breathing, etc.

Once diagnosed with hypertension, you need to take proper measures to keep your blood pressure under control. These steps mostly focus on strict diet control, routine exercise/workouts, weight control, active lifestyle and stress management. In some cases, use of medications along with lifestyle measures are required. If ignored, uncontrolled high blood pressure can lead to complications like heart diseases, stroke, kidney diseases and eye damage. Key Facts Usually seen in Adults above 40 years of age Gender affected Both men and women but more common in men Body part(s) involved Heart Blood vessels Prevalence Worldwide: 1.13 billion (2021) India: 208 million (2017) Mimicking Conditions Secondary Hypertension Hyperaldosteronism Coarctation of the aorta Renal artery stenosis Chronic kidney disease Aortic valve disease Treatment Thiazides diurectics: Hydrochlorothiazide & Chlorthalidone  
Loop diuretics: Furosemide & Torsemide Potassium-sparing diuretics: Triamterene & Amiloride Calcium channel blockers: Amlodipine & Nifedipine ACE inhibitors: Captopril & Enalapril Angiotensin II receptor blockers (ARBs): Telmisartan & Losartan Beta-blockers: Atenolol & Metoprolol Vasodilators: Hydralazine & Minoxidil Aldosterone antagonist: Spironolactone Alpha blockers: Doxazosin & Prazosin Specialists to consult Cardiologist Nephrologist Cardiac surgeon Ophthalmologist Neurologist See All Symptoms Of Hypertension