

HAPPY NEW YEAR 2023

QUARTERLY NEWSLETTER

DR ARSHAD HEALTH ASSOCIATES

Since-1979

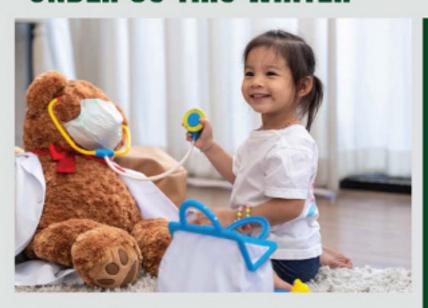
We have been providing highly personalized professional medical services suited to individual needs and tailored solutions according to client requirements for the past four decades. Our patients' peace of mind is our top priority and this approach has helped our patients with extremely good results.







5 WAYS TO PROTECT YOUR UNDER 5S THIS WINTER



As this is the first winter without pandemic restrictions in two years, you and your children may be more susceptible to the usual winter bugs and viruses this year. Winter bugs and viruses are usually mild, but can sometimes become more serious, particularly in younger children or if an infection spreads to a vulnerable family member. Here are the top 5 things you can do to help protect your little ones under the age of five and reduce the risk of infections for your family this season.

1 - CHECK YOUR CHILD IS UP TO DATE WITH THEIR VACCINATIONS

Vaccination is the best defence against severe illness, so to protect your child, contact your doctor to make sure that your child is up to date with all of their vaccines.

2 - TAKE UP ANY ADDITIONAL VACCINATIONS YOUR CHILD IS ELIGIBLE FOR

Polio is an illness caused by a virus that attacks the nervous system – in unvaccinated children and adults it can cause permanent paralysis.

3 - TEACH YOUR CHILD HOW TO WASH THEIR HANDS AND COVER THEIR COUGHS AND SNEEZES

The good hygiene habits that were used to slow the spread of COVID-19 are important defences against a range of other infections, including respiratory infections and stomach bugs, like norovirus.

4 - LEARN ABOUT THE SYMPTOMS OF COMMON INFECTIONS AND WHAT YOU CAN DO IF THEY GET WORSE

There are several common infections that your child might pick up over the winter period. In most cases, these infections will be a mild illness and can be treated at home. However, in some cases they might get worse and require medical help. Some common infections include:

- I. FLU
- II. RESPIRATORY SYNCYTIAL VIRUS (RSV)
- III. SCARLET FEVER
 5 SUPPORT YOUR CHILD'S
 SCHOOL OR NURSERY BY
 KEEPING THEM OFF WHEN
 NEEDED

Depending on the type of infection, it may spread through respiratory droplets, direct contact between people, or via contact with a contaminated surface. This means that if your child is infectious, there is a risk they could pass it to others in their school or nursery, or amongst other members of your family.



GENERAL ADVICE FOR COMMON SYMPTOMS / INFECTIONS WHICH YOU SHOULD BE AWARE OF

Condition	Symptoms	Treatment	Exclusion from setting	Comments
Gastroenteritis	Diarrhoea and / or vomitting	Encourage fluids to prevent dehydration Seek medical attention if not improving.	Children should not return to the setting until they have been symptom free for 48hours	
Scarlet Fever	Fever, sore throat	Antibiotics (medical review required)	Children can return to the setting 24hrs after starting antibiotic treatment.	
Hand, Foot & Mouth	Rash across palms of hands, soles of feet & inside of mouth. Tiredness, Fever	No treatment required but may need medical review to determine diagnosis	There is no requirement for children to stay off school unless the child is generally unwell	
Influenza	Fever, chills, headache, muscle aches, cough, sore throat, runny nose	Fluids, paracetamol if able to take to reduce fever. Seek medical attention if not improving.	It is recommended that your child stay away from school until they are well enough and no longer have a fever.	Please consider having the nasal flu vaccine for children.
COVID 19	Fever, chills, new continuous cough, loss or change in sense of smell or taste. Shortness of breath, general tiredness, muscle aches, headache, sore throat, blocked or runny nose, loss of appetite, diarrhoea, nausea or vomiting	Fluids, paracetamol if able to take to reduce fever. Seek medical attention if not improving.	Your child should try to stay at home and avoid contact with other people if they have symptoms of COVID-19 and they either have a high temperature, do not feel well enough to go to school, college or childcare, or do their normal activities.	Please consider using PCR / Antigen if you have access to these. Please consider having the COVID vaccine if eligible for it.

There are a number of actions you as a family can take to prevent getting an infection during these winter months. These include:

- Vaccination for influenza (flu) or COVID 19
- Regularly washing your hands with soap and water or using alcohol hand gel if hands are visibly clean
- Using tissues to catch sneezes or runny noses, disposing of the and then washing your hands
- If anyone starts with symptoms that are not resolving, to seek medical attention



TYPE 2 DIABETES: WHAT TO DO WHEN YOU ARE ILL



Every one has days when they are not well. If you have diabetes, being unwell can effect your blood glucose control so it is important that you know how to manage this. essential will give you information on:

- · How illness affects your blood glucose levels
- Looking after yourself
- · What to eat and drink
- Managing your medication

HOW DOES ILLNESS AFFECT YOUR BLOOD GLUCOSE LEVEL?

When you are ill, especially if you have an infection and high temperature, your body is less responsive to the insulin you produce naturally or may be injecting. Insulin is a harmone which controls your blood glucose. Being unwell therefore usually makes your blood glucose levels rise, even if you are eating less than usual.

It is possible to manage your diabetes effectively during illness and keep your blood glucose levels in or near to target by following the simple advice given in this leaflet.



IF YOU TAKE INSULIN

Monitor and record your blood glucose levels at least four times a day (at mealtimes even if you are not eating your regular meals, and at bedtime)

https://drarshadhealthassociates.com/



WHAT CAN YOU EAT AND DRINK?

Your body uses a lot of energy when you are unwell, even if your are resting. Try to eat normal but if you cannot manage your usual meals, replace these with light and easily digested foods such as soaps milky puddings. See the table below for a list of alternative food options. Each portion is equal to approximately carbohydrate(e.g egg-size potato,a small slice of bread or a tablespoon of cooked rice or pasta.

- Fruit Juice 100 ml
- Milk 200 ml
- Plain Vanilla ice-cream
- Tomato soup
- Low fat yoghurt
- Tea or Malted Milk biscuits









MANAGING YOUR DIABETES MEDICATION

If you take diabetes tablets or a non - insulin injection and feel unwell continue to take your tablets even if you are not eating. However If you are taking metformin or an SGLT2 inhibitor and you are vomiting or have diarrhoea, you should stop this medication immediately as you maybe at risk of dehydration. You will need a check for ketones if you take an SGLT2 inhibitor if you take a tablet which helps your body to produce more insulin, such as gliclazide, you may need to increase the dose or even need insulin injections for a short time while you are ill. You will need meal replacements if you are unable to eat normally. Contact your doctor if you feel like your symptoms are prolonged or getting worse If your are injecting a non- insulin glucose-lowering medication and develop acute abdominal pain, nausea and vomiting ,stop the injections immediately and seek urgent medical attention.

INTERNATIONAL CONFERENCE OF AEROSPACE MEDICINE - PARIS, FRANCE

Our CEO Dr. M Arshad Khan being an Aviation Medicine Specialist and the only member from Pakistan of IAASM (International Academy of Aviation and Space Medicine) and member of Aerospace Medical Association (ASMA), attended the International Conference of Aerospace Medicine held in Paris, France along with our Deputy Medical Director Dr. M. Adil Khan.





















METFORMIN CAN REDUCE B12 LEVELS AND THIS CAN LEAD TO A B12 DEFICIENCY



THE RISK INCREASES WITH:

- · Dose (the higher the dose, the greater the risk).
- Duration of treatment (the longer the treatment, the greater the risk)
- If the patient has other risk factors for B12 deficiency (summarised below).

WHY?

The mechanism is thought to be multifactorial and includes altered intestinal motility, reduced absorption of B12 in ileum and bacterial overgrowth.

HOW GREAT IS THE RISK?

It is thought that I in 10 people on metformin are affected, which is much more common than previous estimates.

WHAT DO WE NEED TO DO?

As yet widespread testing of B12 in everyone on metformin is not recommended (although we think this might be what we end up doing!). Instead, it recommends:

CHECK B12 LEVELS IN THOSE WITH FEATURES SUGGESTIVE OF A B12 DEFICIENCY, THE SYMPTOMS/SIGNS INCLUDE:

- · Having no symptoms at all!
- Macrocytic anaemia, extreme tiredness, pallor and sometimes jaundice.
- · New-onset neuropathy, gait problems.
- Glossitis (classically a smooth, red, inflamed tongue) and/or mouth ulcers.
- Altered mental state confusion, memory problems, depression.



THREE POINTS TO NOTE:

- The body often holds a lot of B12 in storage in the liver. It is therefore likely that the deficiency will occur slowly over time, not suddenly, so checking a few weeks after starting metformin is NOT going to tell you if this person has developed a metformininduced B12 deficiency
- B12 deficiency can occur with no symptoms at all, but as is not yet recommended widespread B12 testing in everyone taking metformin.
- The B12 test is not very accurate although the sensitivity is 95% (so most with B12 deficiency will be picked up by the test), the specificity is only 50%, which means half of those with a 'low' B12 level do not actually have low B12! (British Journal of Haematology 2014;166:496)

WHAT IS THE TREATMENT?

- Vitamin B12 deficiency anaemia is usually treated with injections of vitamin B12.
- · There are 2 types of vitamin B12 injections:
- hydroxocobalamin
- cyanocobalamin
- Hydroxocobalamin is usually the recommended option as it stays in the body for longer.

GOOD SOURCES OF VITAMIN B12 INCLUDE:

- meat
- salmon and cod
- milk and other dairy products
- eggs





THE ANNUAL CONFERENCE OF TRAVEL MEDICINE -AT ROYAL COLLEGE OF PHSICIANS AND SURGEONS OF GLASGOW

Travel medicine annual conference and AGM was held at the Royal College of Physicians and Surgeons Glasgow in October 2022. Our Deputy Medical Director being a Fellow of the College attended the event along with Royal College President Mr Mike McKirdy, CEO Mr Steve Graham, Dean Dr Sam Allen and many others. Seen in the picture are our Deputy Medical Director Dr M Adil U Khan, Royal College President Mr McKirdy and Dr Sohail Fazal from Aramco-John Hopkins, Saudi Arabia. This event was also attended by Prof Sir Chris Whitty, Chief Medical Officer for England, and UK Government's Chief Medical Advisor.















A BRUNCH WAS GIVEN BY OUR CEO DR. M ARSHAD KHAN IN EARLY DECEMBER 2022, ATTENDED BY VARIOUS DIPLOMATS AND PAKISTANI COMMUNITY







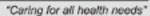




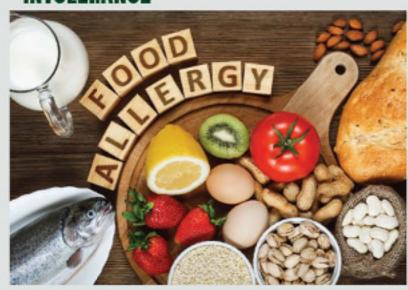








MAKING SENSE OF FOOD ALLERGY AND INTOLERANCE



If you have an allergy or intolerance, choosing suitable foods doesn't have to be hard work.

If you suspect you have a food allergy or intolerance, it is important you are diagnosed correctly by a doctor and referred to a registered dietitian for expert advice on how to mange your diet to meet all your nutritional needs.

WHAT IS FOOD ALLERGY?

Food allergies involve the body's immune system. The body reacts to certain allergens in food by producing antibodies, which can cause immediate and severe symptoms such as swollen lips or eyes, vomiting, skin hives and, in the most extreme cases, difficulty breathing and a severe fall in blood pressure (anaphylactic shock). Foods that may cause an allergic reaction include nuts, peanuts, fish, shellfish, eggs, milk, wheat and soya.

PREPARING FOOD FOR SOMEONE WITH A FOOD ALLERGY

- To ensure you avoid contamination between foods, store products such as nuts, peanuts, flour and milk separately in closed containers.
- Wash hands thoroughly and avoid touching other foods until you have finished preparing.
- Wash cooking equipment thoroughly with hot water and soap, including work tops, chopping boards, bowls,, pans, tins and utensils.
- Do not re-use oil that food has previously been cooked in.

WHAT IS A FOOD INTOLERANCE?

This does not normally involve the immune system, and symptoms may not be as immediate or severe as in food allergies. Symptoms may include headache, fatigue and digestive problems. An example is lactose intolerance, in which sufferers cannot digest the sugar in milk. Food intolerance is harder to diagnose than an allergy. The only reliable way to diagnose it is to cut out the suspected food from the diet to see if symptoms get better. If symptoms improve, the food should be reintroduced and monitored for signs of the symptoms returning. This process should only take place under the supervision of registered dietitian.



TIPS FOR SHOPPING, STORAGE AND FOOD PREPARATION AT HOME

If you have diagnosed allergy or intolerance, it's essential you take care to avoid cross-contamination with the allergen.

Shopping for food when you buy or cook food for someone with a food allergy, you will need to:

- Check the ingredients to ensure the product does not contain the allergen that the person is allergic to
- Check for other allergy advice on the label

ENI PAKISTAN LIMITED - 20TH CONTRACTORS' SENIOR MANAGEMENT HSE WORKSHOP - 2022



Our esteemed client Eni Pakistan Limited organized the 20th Contractor's Senior Management HSE Workshop on 14th of December, 2022 in Karachi. The theme of this years' workshop was "Importance of Road Safety in E&P Operations".

Our Legal and Outreach Director Mr. Ahmed Khan and Occupational Health Physician Dr. Abdul Ghafoor attended the workshop.





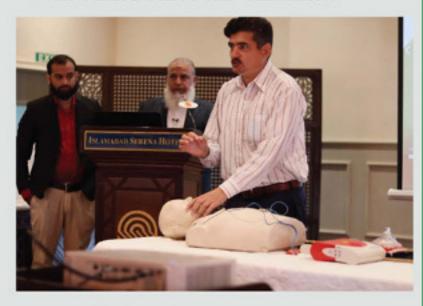


Certificate of Participation





CORPORATE FIRST AID TRAINING



We provide First Aid Trainings to help participants gain skills and knowledge required to recognise and respond to life-threatening emergencies in line with the national healthcare Guidelines.

ADVANCED FIRST AID

- Introduction to First Aid
- The Human body Structure and Functions
- Disorders and Consciousness
- · Wounds and Bleeding
- Circulatory System Disorders
- Bone, Joint and Muscle Injuries
- Dressings, Bandages, Splints
- Respiratory emergencies
- · Burn and electrical injuries
- Heat and cold exposure
- Poisoning: Poisonous stings and bites
- AED: Automated External Defibrillator
- · Emergency evacuation and transportation
- · General and health education
- Health education particularly about communicable diseases
- Social and environmental issue
- Heat Stroke and Heat exhaustion
- Respiratory Emergencies
- Circulatory Emergencies
- Cardio-Pulmonary Resuscitation (CPR)

PRINCIPLES OF FIRST AID

- · Preserve Life
- Prevent Deterioration
- Promote Recovery
- Taking immediate action
- Calming down the situation
- Calling for medical assistance
- Apply the relevant treatment



FIRST AID AND TRAUMA LIFE SUPPORT INCLUDE;

- Introduction
- Introduction to First Aid
- · Wounds and bleeding
- Bone, Joint and Muscle Injuries
- Dressing, bandages, splints and their applications
- Burns and Electrical Injuries
- · Evacuation and Transportation





HIGHLIGHTS FROM OUR CORPORATE FIRSTAID TRAINING - NOVEMBER 2022





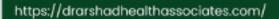














SCARLET FEVER



Scarlet fever is a bacterial illness that causes a distinctive pink-red rash. It is usually mild.

The characteristic symptom of scarlet fever is a widespread, fine pink-red rash that feels like sandpaper to touch. It may start in one area, but soon spreads to many parts of the body, such as the ears, neck and chest. The rash may be itchy.

Other symptoms include a high temperature, a flushed face and a red, swollen tonque.

Symptoms of scarlet fever usually develop two to five days after infection, although you will be contagious before showing signs of the illness.

Read more about the symptoms of scarlet fever.

Scarlet fever is also known as scarlatina, although this often refers to a milder form of the disease.

It usually follows a sore throat or a skin infection (impetigo) caused by particular strains of streptococcus bacteria.

WHEN TO SEEK MEDICAL ADVICE

See your doctor as soon as possible if you suspect you or your child has scarlet fever.

Your doctor can usually diagnose scarlet fever by looking at the characteristic rash and other symptoms, although a sample of saliva will need to be taken from the back of the throat (throat swab) and tested in a laboratory to confirm the diagnosis.

There's no evidence that catching scarlet fever when pregnant will put your baby at risk. However, heavily pregnant women should tell healthcare staff if they have been in contact with someone who has scarlet fever.

SAMA Lab & Diagnostics

HOW IT SPREADS

Scarlet fever is extremely contagious and can be caught by:

- breathing in bacteria in airborne droplets from an infected person's coughs and sneezes
- touching the skin of a person with a streptococcal skin infection
- sharing contaminated towels, baths, clothes or bed linen

It can also be caught from carriers people who have the bacteria in their throat or on their skin but do not show any symptoms.

PREVENTING IT FROM SPREADING

If your child has scarlet fever, do not let them go to school and keep them away from other people until they have been on a course of antibiotics for at least 24 hours.

All tissues and cloths that someone with scarlet fever has coughed or sneezed into should be washed or disposed of immediately. Wash your hands thoroughly with soap and water if you have touched any of these.

Avoid sharing contaminated eating utensils, cups and glasses, clothes, baths, bed linen or towels.

HOW IT IS TREATED

Scarlet fever used to be a very serious disease, but most cases today are mild. This is because scarlet fever can easily be treated with antibiotic tablets. These must be taken for 10 days, even though most people recover after four to five days.

With proper treatment, further problems are very unlikely. However, there is a small risk of the infection spreading to other parts of the body, such as the ear, sinuses and lungs, it should be reviewed by a doctor and to start antibiotics promptly.

GLOBAL RISK OF MEASLES



Since the start of the COVID-19 pandemic there has been a significant drop in the number of children being vaccinated against measles, mumps and rubella and other childhood diseases. In some countries, routine immunisation programmes, including vaccination against measles, mumps, and rubella may be affected, as priorities for health services globally were diverted to the control and management of COVID-19

Measles occurs regularly (endemic) in many countries/regions worldwide. Large measles outbreaks continue to be reported globally, summaries of measles cases and population incidence can be found here:

World Health Organization: Provisional monthly measles and rubella data

ROUTINE IMMUNISATION SCHEDULE

WHEN	AGE	VAC	CCINES
At Birth	At Birth	BCG	OPV-0 Hep-B
2nd Visit	6 weeks	OPV-I Pneumococcal-I	Rotavirus-I Pentavalent-I
3rd Visit	10 weeks	OPV-II Pneumococcal-II	Rotavirus-E Pentavalent-E
4th Visit	14 weeks	OPV-III Pneumococcal-III	IPV - I Pentavalent-II
5th Visi≹	9 months	MR-I IPI Typhoid	
6th Visit	15 months	MR-II	=

ADVICE FOR TRAVELLERS

Measles is a highly contagious viral illness that can be very unpleasant and sometimes leads to serious complications. Measles, mumps and rubella (MMR) vaccine is available to all adults and children who are not up to date with their two doses. If you are not sure if you are protected, you should check with your doctor practice.

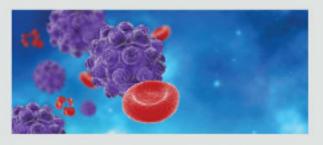
Before you travel, make sure you are up to date with all currently recommended in your country vaccines. You should also check for any current country recommendations relating to measles vaccination that may be in place. See our general advice for travellers news item for further details.

The first MMR is usually given to infants at around 12 months of age, with a second dose given before school, to ensure best protection. In some circumstances, such as travel to a country where measles is common or during an outbreak, MMR can be given to babies from six months of age. Ask your health professional for advice on the best option for your children before you travel.

Two doses of MMR in a lifetime are needed for a person to be considered fully protected

ADVICE FOR HEALTH PROFESSIONALS

Guidance on measles vaccination is available in Immunisation against infectious disease. Advice on immunisation against measles is also available for those whose immunisation status is uncertain.





OUR SERVICES

- Outpatient clinic General & Specialists
- Clinical Laboratory
- Covid PCR Laboratory
- Travel Clinic
- Vaccinations
- Physiotherapy
- Pharmacy
- Hospitalization Arranging & Monitoring
- Corporate Medical Services
- Occupational Health Services
- Immigration / Visa Medicals
- DNA Sampling

- Age Determination Tests
- Ambulance Services Air & Medevacs
- Medical coverage for events
- First Aid Training / First Aid Boxes
- Health Audits
- Medical Services Consultancies
- · Doctor / Paramedic Escorts
- · Remote Site / Field Medical Services
- · Repatriation of Mortal Remains
- Only OGUK approved facility in Pakistan
- · 24 hours Call Services

OUR HEALTH CARE FACILITIES

DR ARSHAD HEALTH ASSOCIATES - ISLAMABAD

No. 20, Street No. 01, F-6/3, Islamabad Phone: 051-2829666 | Fax: 051-2270066

DIPLOMATIC FAMILY CLINIC, ISLAMABAD

No. 5-6, 4-B Diplomatic Residencia, Diplomatic Enclave, G-5, Islamabad. Phone: 051-2878999 | Mobile: 0309 7774666

DAHA LAB & DIAGNOSTICS, ISLAMABAD

No. 24, Street No. 22, I & T Center; G-8/4, Islamabad - Pakistan* Phone: 051-2260046

DAHA LAB & DIAGNOSTICS, KARACHI

No. 806, 8th Floor, Kashif Center, Shahrah-e-Faisal, Karachi. Phone: 021-35630127

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