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HEART BEAT

A Quarterly Issue for the Faculty & Staff of Tabba Heart Institute

ISSUE 34, MAY 2018

INTERVENTIONAL CARDIOLOGY SERVICES



RENDEZVOUS
DR. MOINUDDIN KHAN

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EDITOR'S DESK

Dear Readers,

We are here with yet another exciting and informative issue of the Heartbeat. We continuously strive to keep coming with better and more informative content to let our readers have the fresh perspective of Tabba Heart Institute every time they read our magazine.

This last quarter has been quite significant for THI as we have now completed our new Diagnostics & Consultation facility at DHA, aimed primarily at facilitating the residents of DHA, Clifton and adjoining areas for their consultation and diagnostic needs. The facility inhouse OPD diagnostics, consultation and pharmacy facilities and will be operational from May 02, 2018.

The issue, besides other routine segments, has a very exciting yet informative cross word puzzle for the readers. Successful entries will be given a Tabba branded gift hamper through lucky draw incase more than one correct entries are received.

As the holy month of Ramadan is round the corner, the issue highlights healthy diet options for Sehr and Iftar. Moreover, as the Hypertension day is commemorated across the globe to highlight the significance of high blood pressure and ways for its prevention, there is an article on prevention of high blood pressure as well.

Rendezvous section covers an insightful and lively discussion with Dr. Moinuddin Khan-who recently rejoined THI as consultant cardiologist.

In the end, I welcome the new member of our small but very diligent editorial team Ms. Shireen Qaiser. Shireen recently joined Strategic Marketing & Branding department as the Sr. Officer Publications and brings with her vast experience of working on various corporate newsletter and other publications.

A Humble Editor

Fahad Anwer Chishti

EDITORIAL BOARD MEMBERS

Fahad Anwer Chishti (Editor)

Shireen Qaiser

Zeeshan Butt

Farzana Amir Hashmi

Anila Shahbaz

Mariam Shiekh

Muhammad Danish Manzoor

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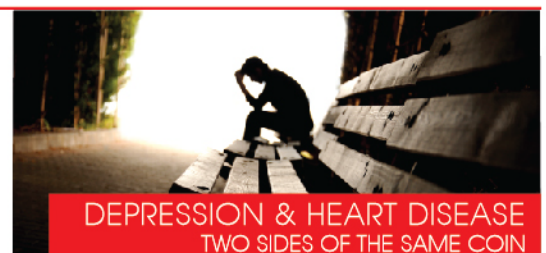
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رمضان اور ذیابیطس

INTERVENTIONAL CARDIOLOGY

Tabba Heart Institute has an internationally trained and globally experienced team of Cardiologists, Surgeons, technicians, dedicated nursing teams and specifically trained paramedical staff. Our focus and prime objective is quality care at affordable cost. Tabba Heart Institute is the only hospital in Pakistan at present that is part of American College of Cardiology database (NCDR and ACTION Registry) and Door to Balloon (D2B) initiative that compares and monitors quality metrics and provides benchmark with the hospitals in the United States of America.

THI's Cath Lab has **3 fully operational procedure suites** equipped with the latest of technology offering a full spectrum of services **24 hours a day 365 days** a year. We are staffed with highly acclaimed & experienced interventionists, invasive cardiologists and cardiac electrophysiologists who perform procedures around the clock. Our procedures are at par with international standards as they are compared to US results through National Cardiac Data Registry (NCDR) to maintain a similar level of expertise and precision. To ensure safety for all, we have **live doctor and patient radiation exposure monitoring** to protect our medical staff and the patient simultaneously.



- Treatment of irregular heartbeat (fast or slow) by implantation of temporary and/or permanent pacemaker or implantable cardioverter defibrillator device.
- Valvular interventions including Mitral and other valve stenosis, closure of atrial and ventricular septal defects.



Our services include:

- Diagnostic coronary & peripheral angiography and Stenting procedures to open the blocked or narrowed arteries.
- Peripheral Angioplasty procedures to treat the narrowed arteries in the body other than the heart like renal (kidneys), carotid (brain), subclavian vein and angioplasty procedure to treat the critical limb ischemia.

The Tabba Heart Institute

has the distinction of being the **first hospital** in Pakistan to be recognized by **American College of Cardiology**

for providing quality care as it is part of a **US National Cardiac Data Registry** for all its Cath Lab procedures.

WELCOME ONBOARD

INSIDER

NAME	DEPARTMENT
Dr. Azizullah Khan Dilloo Consultant Infection Diseases	Infection Control
Dr. Faisal Junejo Consultant Anesthesiologist	Cardiac Anesthesia
Dr. Moinuddin Khan Consultant Cardiologist	Cardiology
Dr. Shahzad Pandi Consultant Cardiologist	Cardiology
Dr. Hassan Khan Consultant Cardiologist	Cardiology
Dr. Madiha Balighuddin Consultant Cardiologist	Cardiology
Dr. Batool Jawaid Consultant Cardiologist	Cardiology
Dr. Syed Mohammad Zohaib Akhter Research Consultant	Clinical Research
Saadia Sattar Research Consultant	Clinical Research
Dr. Sharwan Bhuromal Fellow	Interventional Cardiology
Dr. Junaid Akhter Fellow	Cardiology
Dr. Zuhaib Ahmed Fellow	Cardiology
Dr. Bushra Zafar Senior Medical Officer	Cardiology (ER)
Dr. Syeda Mehwish Faraz Senior Medical Officer	Cardiology (ER)
Shireen Qaiser Senior Officer	Strategic Marketing & Branding
Jaweria Abbas Bio Medical Engineer	Bio Medical Engineering
Fahad Muhammad Ilyas Accounts Officer	Finance & Accounts
Muhammad Altaf Farooq Accounts Officer	Finance & Accounts
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Dr. Alishba Ahmed (R.Ph.) Pharmacist	Pharmacy
Dr. Salah Amjad (R.Ph.) Pharmacist	Pharmacy
Dr. Kiran Ejaz (R.Ph.) Pharmacist	Pharmacy

ACHIEVEMENTS



MR. MOHAMMAD ALI TABBA

(CEO Lucky Cement / DIRECTOR YUNUS BROTHERS & VICE CHAIRMAN AZIZ TABBA FOUNDATION) was conferred the prestigious Pakistan's Civil Award – SITARA E IMTIAZ on the 23rd of March 2018 for his meritorious contributions to the public services sector.

MR. FAISAL ABDUL SATTAR



Our earnest felicitations go to Mr. Faisal Abdul Sattar (CFO), for successfully qualifying internationally recognized exam of Certified Management Accountant (CMA), from Institute of Management Accountants, USA in first attempt.

MR. ABU TURAB HUSSAIN



Mr. Abu Turab Hussain (Assistant Manager Quality Assurance - PS&QAD) has successfully achieved the IOSH certification from the Institution of Occupational Safety and Health (British Safety Council) in December 2017. Under his belt of achievements is also the ISO 9001:2015 Quality Management System Lead Auditor Training (IRCA) certification in October 2017 that makes him a valuable asset for our institution.

OBITUARY

NAME	DESIGNATION & DEPARTMENT	LOST
Javed Khan	OT Technician (OR)	Father
Nadeem Masih	Sr. CSSD Technician (CSSD)	Father
Hafiz Dawood	Sr. Executive (PBSD)	Daughter
Abdul Mujeeb Khalili	Manager (Bio-Medical)	Mother
Khalid Mehboob	Radiation Protection Officer (Nuclear)	Father
Umer Siddiqui	Porter (Nursing Services)	Mother
Samer bin Yamin	RN (Nursing Services)	Mother
Zeeshan Ahmed	CCT (Nursing Services)	Mother

[May Allah (SWT) give the departed souls eternal peace and grant them the highest place in heaven; along with patience and strength to the bereaved families.]

STORK VISITS

NAME	DEPARTMENT	GOT A
Muhammad Jawad	HR	Baby Girl
Humaira Nazeer	NES	Baby Boy
Nawaid Ahmed Siddiqui	Bio-Medical	Baby Boy
Muhammad Ehsan	Laboratory	Baby Girl
Aftab Mehmood	Laboratory	Baby Boy
Adnan Patrus	Nursing Services	Baby Girl
Ahsan Raza	Nursing Services	Baby Boy
Taimoor ul Hassan	Nursing Services	Baby Boy
Muhammad Zubair	Nursing Services	Baby Boy
Rehmat ullah	Nursing Services	Baby Girl
Zubair	Nursing Services	Baby Boy
Jibran	Nursing Services	Baby Girl
Syed Rehan	Operation Room	Baby Boy
Nadeem Gill	Operation Room	Baby Girl

WEDLOCKS

NAME	DESIGNATION	DEPARTMENT
Kamran Saroor	Assistant Manager	PBSD
Mantasha Jameel	Lady Searcher	Safety & Security
Dr. Siham Qureshi	Fellow- CTS	Surgery
Dr. Abdul Mannan	Medical Officer	Anesthesia
Noman Mashkooor	Unit Cashier	PBSD
Ahsan Ahmed	Billing Officer	PBSD
Anum Aijaz	Pharmacist	SCM
Farhan Mujtaba	Sr. Executive	SCM
Syed Shahzad Raza	Sr. Executive	SCM
Imran Sattar	Phlebotomist	Laboratory
Kiran Bashir	Unit Receptionist	Laboratory
Farhan Ali Shah	Unit Receptionist	Laboratory
Adeel Mannan	Unit Receptionist	Nursing Services
Shahzad Ahmed	Porter	Operation Room
Arsalan Ilyas	Anesthesia Tech.	Operation Room
Shafiq Ahmed	RN	Nursing Services
Naeem Uddin	CCT	Nursing Services
Muhammad Farhan	Data Entry Operator	HIMS



TRIBUTE TO A FALLEN ANGEL

NAYYAR JAVED

Head Nurse – Nursing Services

It's really an honor to write few lines about Nayyar Javed. A lady with courage, determination, and pure soul. a name that will be remembered forever by the people, the walls, and the patients of Tabba Heart Institute. A firm and ambitious lady who was always there to advocate on behalf of her patients with no excuses. A beam of light that was always striving to bring happiness, joy, and comfort in the lives of the patients who trusted her. A personality that had all the beautiful shades of joy, support, courage, assertiveness and so on. A soul that must be living a peaceful life eternally but left a huge gap which will be felt whenever we will think of a true leader, a sister, a companion, and a "NURSE". We have always found her deeply involved in her work and patient care. A lady who was truly made for the patients and humanity.

We had never thought that one day we will be writing about Nayyar Javed and her dismissal from this world. A painful experience, yet a beautiful soul that brings smile whenever we think of the memories we shared together. She was an exceptional leader, a true friend, and a hardworking soul that never thought about her own comfort and desires.

Nayyar will always remain alive in our memories. Nayyar, you will be missed always.

"SURELY, ALLAH TAKES WHAT IS HIS, AND WHAT HE GIVES IS HIS, AND TO ALL THINGS HE HAS APPOINTED A TIME".

We pray to Allah to heavenly abode her soul in Jannah.

Staff of Nursing Services

19th CME - MANAGEMENT & PREVENTION OF ASTHMA AND COPD



Our Pulmonologist and Dietician briefed about the preventive measures of Asthma and COPD through diet & medicine.

30th ALLIED HEALTH SCIENCES BS DEGREE PROGRAM



THI opened its arms to the 1st batch of this degree. This program aims to produce highly skilled professionals in three disciplines: Cardiovascular, OT and Perfusion Sciences.

20th KCCI CORPORATE HEALTH AWARENESS SESSION



Dr. Bashir Hanif (M.D.) THI was the guest speaker at KCCI where he briefed the members about the growing rate of heart diseases and ways for its prevention.

16th CME - DIET FOR WOMEN EARLY INTERVENTION



To commemorate International Women's Day our CME committee held an all women session regarding healthy diet. Exciting giveaways were given to various participants during their live interactive session.

27th CONFERRING NEW TREATMENT OPTIONS, TRENDS & TECHNOLOGY



A full day cardiology review course was hosted at Abdul Razzaq Auditorium which was open to the medical fraternity, chaired by Dr. Bashir Hanif.

16th B-BRAUN CORPORATE HEALTH SCREENING



Health Check Day was commemorated by B-Braun in collaboration with Tabba Heart Institute.

26th HEALTH SCREENING AT ARY



A Health session was conducted at ARY Digital where our medical team screened, examined and tested their employees.

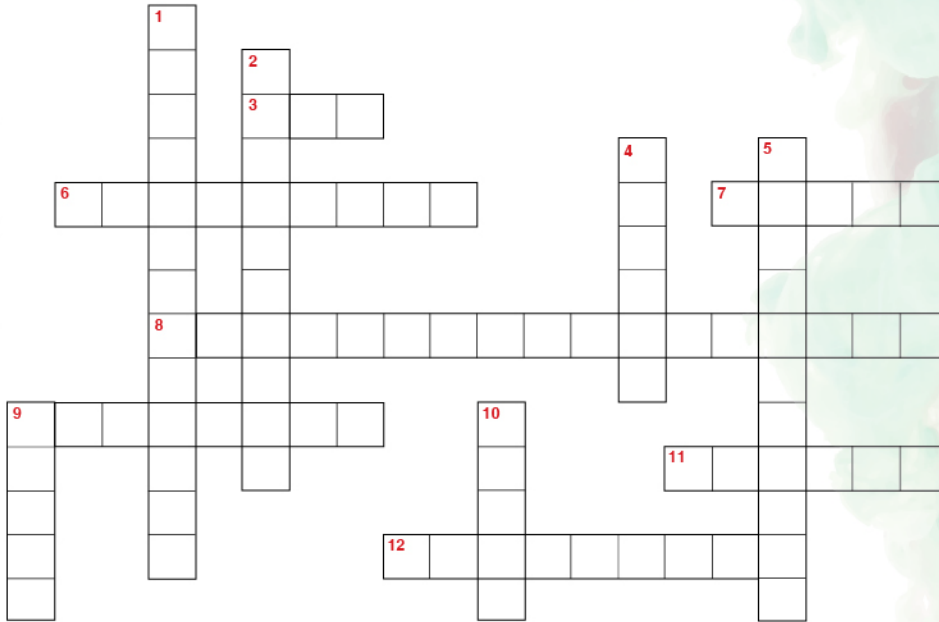
30th ECG INTERPRETATION



A workshop was conducted for the medical fraternity based on the recent guidelines for ECG Diagnosis and Interpretation.

Jan
Jan
Jan
Feb
Feb
Feb
March
March

HEALTHY HEART CROSSWORD



This crossword is open for all participants through our social media account please send across answers through our inbox by latest 30th May 2018.

DOWN

- 1 Carry oxygen in the blood.
- 2 What red blood cells have that HOLDS the oxygen.
- 4 The part of the air that EVERY cell in your body needs.
- 5 The tiny blood vessels where the actual EXCHANGE of oxygen take place between blood and cells.
- 9 The main Artery of your body that takes oxygenated blood away from your heart to your body. It's the size of a hose!
- 10 The blood vessels that take blood to the heart.

ACROSS

- 3 A test that measures the electrical impulses from your heart.
- 6 The medical word for "lungs".
- 7 The "doors" that open and close in the heart, allowing blood to flow in and out of the atriums and ventricles.
- 8 Blood that does NOT have oxygen in it.
- 9 The blood vessels that take blood AWAY from the heart.
- 11 One of the two "upstairs" chambers of the heart.
- 12 One of the two "downstairs" chambers of the heart.

DEBUNKING MYTH GREEN TEA FOR WEIGHT LOSS

Green tea is considered beneficial for shedding weight. Although, it helps in slightly speeding up your metabolism, but weight loss largely depends on calories intake (consumption) and output (burning) through wise food selection & regular exercise.



TIME FOR A QUIZ

ENTERTAINMENT

1- What is the most common cause of sudden cardiac death (SCD)?

- a Cocaine abuse
- b Cardiomyopathy
- c Ventricular arrhythmia

2- What is the most common cause of right sided heart failure?

- a Left sided heart failure
- b Chronic lung disease (Cor Pulmonale)
- c Hypothyroidism

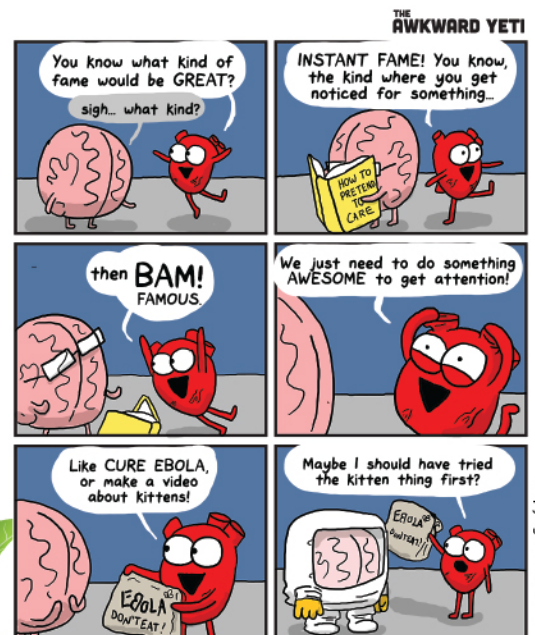
3- The Heart weighs:

- a 2 Pounds
- b Under a Pound
- c 3 Pounds
- d 1 Pounds

4- What is the heart's function (job)?

- a To help you breath
- b To feed all the cells in your body
- c Neither answer above

Win an exciting gift hamper on answering the correct answers of the above quiz! Please fill in the form attached.



Copyrights: Nick Saluk

HEART & BRAIN

TIME FOR A QUIZ

Name: _____

CNIC/MR Number: _____

Contact Number: _____

Email Address: _____

Information:

- Participants are requested to fill in their contact details in the above form.
- This contest is open to all.
- Participants need to clearly mention answers in the comment box mentioned below.
- This card must be deposited in the complaint/suggestion boxes inside THI premises.
- Winners will receive their gift hamper by the 30th of May 2018 after lucky draw.

COMMENT BOX:

1. 2. 3. 4.

TIME FOR A QUIZ

نام:
سی این آئی سی / ایم آر نمبر:
رابطہ نمبر:
ای میل ایڈریس:

ضروری ہدایات:

- مقابلے میں شامل ہونے والے افراد سے گزارش کی جاتی ہے کہ اپنے مکمل کوائف اوپر دیئے گئے فارم میں پُر کریں۔
- اس مقابلے میں تمام افراد شامل ہو سکتے ہیں۔
- مقابلے میں حصہ لینے والے اپنے کوائف اور جوابات نیچے دیئے گئے خانوں میں واضح طور پر درج کریں۔
- اپنی معلومات اور جوابات درج کرنے کے بعد اس کارڈ کو ہسپتال کے احاطے میں موجود شکایت / مشورہ کیلئے مختص کئے گئے ڈبے میں ڈال دیں۔
- کئی ڈرا کے ذریعے جیتنے والے خوش نصیبوں کو 30 مئی 2018 کو انعامات دیئے جائیں گے۔

COMMENT BOX:

1. 2. 3. 4.

DR. MOINUDDIN KHAN

LEADING THE REVOLUTION IN INTERVENTIONAL CARDIOLOGY

QUALIFICATION & EXPERIENCE:

Consultant Interventional Cardiologist
MD (USA) – ECFMG Certification
MBBS – Dow Medical College, Karachi
FCPS (Medicine)
FCPS (Adult Cardiology)
Interventional Cardiology training from THI

Is there a person or experience that has guided your career? What exactly was the source of inspiration behind choosing cardiology?

My driving force to be a cardiologist is my elder cousin Dr. Asim Ahmed who is an accomplished cardiologist working for a tertiary care hospital in Pakistan. However, my source of inspiration behind being a cardiologist would be my father who passed away due to heart failure during my MBBS back in 2004. He was what motivated me to become who I am today.

What is your next professional endeavor?

My focus right now is to use Tabba Heart Hospital as a platform to improve professionally and work on various complex procedures by attaining knowledge and experience in new procedures such as CTOs (Chronic Total Occlusion) that were not possible in my previous employment. I firmly believe that Tabba has and will provide the scope and potential to do all these cases that is barely available elsewhere.

What are the five thumb rules for a layman to take care of his heart and maintain overall health?

According to a famous cardiologist from United Kingdom "the key to a healthier lifestyle is through a simplistic approach". I firmly believe in three basic rules to attain that lifestyle quotient and they are eat smart, walk more and sleep atleast eight hours. Abstaining from junk food and adding vegetables and fruits in your diet will do wonders to the heart.

What in your opinion should be the cutoff date for cardiac screening?

Well it depends; you see if the patient has a family history of premature heart attacks in his/her first degree relatives then one should start screening at atleast 30 years of age. According to international guidelines, first cholesterol level should be screened at the age of 18 years! Patients who suffer hereditary disorders such as FH (familial hypercholesterolemia) should get themselves checked even earlier. Cardiac Screening should be mandatory and conducted early for people who smoke, suffer from obesity and diabetes.

It's still a grave shock to hear that some apparently healthy or young person gets a cardiac arrest. How do we understand it in perspective?

I believe cardiac disease and death is a double edged

One of the main driving forces in human history necessarily must be the drive and inspiration to conquer the impossible. While the standard of cardiac hospitals is stereotyped as sterile and drab, Tabba Heart Institute provides an atmosphere that is warm and inviting. Where the ambience is such our doctors will be the mirror image. Dr. Moinuddin Khan is Consultant Interventional Cardiologist at Tabba Heart Institute; a native Karachiite, an avid fan of astronomy, a lecturer and medical trainer. Overall Dr. Khan is a kind and caring cardiologist who is truly concerned about his patients & is known for his compassionate care.

sword, whichever way you fall you and your loved ones suffer. We say prevention is better than cure, if this statement is taken as a requisite we need to self assess ourselves and take measures to have a change in lifestyle preventing us from having this dire fate.



What is a common health-related mistake that you frequently see in our population?

Poor or lack of physical activity is the prime cause of health depreciation. People nowadays do not want to walk or exercise even if it is for their own good! The main cause would be our busy lifestyle or poor living habits which has caused deterioration on a whole and the fact that obesity is not addressed in the earlier stages of life. Patients usually come to us at an advanced age of 60 years and above with already developed osteoarthritis, with difficulty in walking due to weak knees and bones. That is a major hindrance since they are already past the point of no return. Helping them heal is strenuous and time consuming with differentiated results.

Does walking while doing daily chores at home or climbing the stairs in the house, work as a substitute for exercise that we cannot do due to hectic schedule?

Absolutely not! I always advise my patients to exercise with the same conviction they have for offering prayers.

It requires intention to exercise and the rest is easy. I usually suggest 30 minutes of brisk walking however if there is joints limitation then one should walk on a normal pace but it is important to walk atleast! At the end of the day something is better than nothing.

Tell us about your own lifestyle and family, in detail?

I have been blessed with a beautiful God fearing wife and have been graced by Allah with three daughters who are the light of my life. My eldest is 12 years of age and is already as inquisitive as me while the youngest is 2 and half years old. Like clockwork I wake up at 6 a.m. and walk for thirty minutes before coming to work. I try to sleep on time however that is not possible due to my bubbly daughters who demand attention even after a long day at work which is equally given with zeal. I am not fond of eating food from outside and believe in the simplistic approach to life. I try to maintain a healthy existence by leading a vegetarian lifestyle, avoiding carnivorous delights and smoking.

Can you recount one amazing story of a rare case that has personally changed you or affected you in some way?

During my house job there was a young boy by the name of Mustafa who had an accident with a truck. An accident so severe, that it required immediate amputation of his leg. That child held onto my hand so tightly while his leg was being amputated he did not look anywhere but at me in shock, did not shed a single tear but looked more like a fawn in front of a car. At that time I realized that it's not just professional help a person requires but emotional as well to fully recover. Even after 20 years it has left it's mark on me and brought me closer to my patients as a physician.



Health professionals can have their limitations too. How sensitively do the others react to their problems, in your opinion?

Unfortunately doctors are not seen as human beings but rather machines at times. We try our level best to heal patients however when things take a wrong turn the reaction from their families and friends is so severe and unnatural that they do not realize we are here to heal not to take lives. I always consult patients to go to facilities with trained doctors and amenities that can provide them the best of care. There is a very apt saying that if there is "intent to harm" even water given is dangerous. Doctors' intent is to heal not to destroy lives,



we are bound by the Hippocratic Oath to serve, heal and protect patients.

How does your family cope with your professional commitments?

Like I said earlier I have been blessed with an amazingly understanding family. My wife and children have seen me go to hospitals on odd days and times while others were enjoying their holidays; they have learnt and accepted this fact that their husband/ father has important work which is saving lives. At times problems arise when I have promised to take them out and at that moment I am required at work but we always manage to work around it with little bribes such as gifts and surprise outings so I easily compensate for that.

Don't you believe that working in Pakistan under law and order crises puts you at a potential risk? Why do you still prefer to work here than working abroad?

Being a patriot I believe in giving back to my country what it has bestowed upon me. I have done M.R.C.P. and had the opportunity to go to UK, I did my M.L.E. with a very good score but I couldn't go abroad because of my mother. With respect to the law and order situation in our country, it is definitely difficult. During my fellowship, I had to come to work at odd hours where as my family would silently suffer for my wellbeing. However, duty calls and saving lives is what has driven me throughout my professional career.

How would you like to influence others since you are an inspiration and a mentor for many? Any message for our readers?

First and foremost, I want to influence my girls to be compassionate human beings, to be bold and sound of knowledge. I initially wanted to pursue astronomy but at that time there were no mediums to pursue it and hence my entry in cardiology field. Looking at my past I want my daughters to dream big and pursue it whole heartedly. Coming towards my trainees I had in LNH and now here, I would like to influence them to become honest compassionate physicians and that can only be learnt through example. My message to my readers is acquire a healthy life and live with a good quality of lifestyle for as long as they live. Believe in your dreams and set forth into that journey to achieve it.

HEART TALES: HYPERTENSION

By : Dr. Madiha Balighuddin (Consultant Cardiologist)

Few diseases are known for their particular origin and few are known to be global threat to mankind health. Hypertension or high blood pressure comes under the second category of global threat. High blood pressure has been associated to multiple cardiovascular and renal outcomes, including ischemic heart diseases, cerebrovascular diseases, and chronic kidney diseases.

The global obesity epidemic may further increase hypertension risk in some populations. The high and increasing worldwide burden of hypertension is a major global health challenge because over the past two decades not only has it increased hospitalization, number of dialysis, stroke and heart attacks but has also increased morbidity. The proportions of awareness, treatment, and control of hypertension are much lower in low- and middle-income countries than in high-income countries. The burden of high blood pressure remains high despite the availability of preventive interventions and low-cost, effective antihypertensive medications. Collaborative efforts from national and international stakeholders are urgently needed to combat the emerging hypertension burden in low- and middle-income countries. Implementation of innovative, cost-effective, and sustainable programs for hypertension prevention and control should be a public health priority for these countries.

Hypertension occurs when there is persistent raised pressure in a closed chamber for a prolonged period. This is hazardous for our cardiovascular system which comprises of our heart and blood vessels, increase in pressure thus results in high blood pressure or hypertension. Hypertension is known to be a slowly progressing disease which if not controlled can lead to stroke, heart attack, kidney failure, blindness or even death.

Signs and Causes:

Signs of hypertension range from severe headaches, blurring of vision, chest pain, difficulty in breathing, irregular heartbeats and blood in urine. The causes of this disease vary from hereditary causes or side effects from drugs, diet rich in oil and salt or an idle lifestyle are all root causes of hypertension. One should constantly evaluate themselves for hypertension through regular checkups since most people are unaware about it about the hazardous effect of high blood pressure.

Measurement of Blood Pressure:

Blood pressure should be taken in cool and calm environment without any emotional and physical stress influence. One should stop taking caffeine and tobacco atleast half an hour prior to taking blood pressure reading. It is important to note that the BP cuff should cover 2/3rd of the arm and the apparatus is properly calibrated. A myth to be debunked is the electronic vs. manual apparatus which is assumed that the manual one is more accurate; however both apparatus are equally efficacious if they are calibrated according to standardization.

Blood Pressure Categorization:

The above mentioned chart guides us regarding the certain cut offs of blood pressures. Doctors recommend that blood pressure should be taken before the morning dose of drugs that have been prescribed and before dinner atleast three times a month. Maintaining a diary of the readings acts as a helpful guide for your doctor to adjust medication accordingly. BP is however not a fixed parameter; it can vary according to age, gender, body weight, height, environment, day and night variations, emotional and physical stresses.

Who are susceptible to hypertension?

People who have a family history of high blood pressure, heart diseases and diabetes are more prone to hypertension. It's most commonly found in people older than 55 who are overweight, inactive, heavy alcohol drinkers and smokers. If you eat foods that have a high salt content or use medications like NSAIDS (i.e. ibuprofen, aspirin), decongestants and illicit drugs such as cocaine, then you are more prone towards having Hypertension.

BLOOD PRESSURE CATEGORIES

BLOOD PRESSURE CATEGORY	SYSTOLIC mm Hg (upper number)	SYSTOLIC mm Hg (lower number)
Normal	LESS Than 120	LESS Than 80
Elevated	120 - 129	LESS Than 80
HIGH BLOOD PRESSURE (Hypertension) STAGE 1	130 - 139	80 - 89
HIGH BLOOD PRESSURE (Hypertension) STAGE 2	140 or Higher	90 or Higher
HYPERTENSIVE CRISES (Consult your doctor)	Higher than 180	Higher than 120

Prevention and Management:

They say prevention is better than cure, we can prevent ourselves from suffering hypertension by changing our lifestyle subtly. The following are some easy ways to control and prevent this disease:

Shed some pounds: If you are overweight, you can start by shedding as little as 10 pounds to lower your BP, monitor your BP regularly to stay in your target range.

Watch what you eat: Avoid foods high in total and saturated fats. Increase fruit and vegetable intake, by loading up whole grains and staying away from processed foods. Easing up on caffeine may also decrease chances of increase in blood pressure. You can also follow the DASH program which is effective in managing and lowering blood pressure.

Get Moving!: Exercise is the soul mate to eating right. Official recommendations call for atleast half an hour of exercise regularly. BP drops of 4 to 9 points just by exercising.

Ease up on Salt: Salt is the prime offender in raising BP. It is recommended to have a salt intake of less than 1500 milligrams per day. You can cut down on salt intake by having home cooked food instead of takeouts which is high in salt. Eating more potassium (i.e. bananas, raisins, tuna, milk) help ejecting sodium out of your body.

Relax: Lowering stress levels help keep your bp regulated. Try mind body exercises such as yoga or soaking up the sun which boost up endorphins and lower your blood pressure.

DEPRESSION AND HEART DISEASE TWO SIDES OF THE SAME COIN

By - Dr. Erum Kausar (Clinical Psychologist)

According to the American Psychiatric Association, depression is a common and serious medical illness that negatively impacts feelings, thoughts and behavior. However this is treatable. Depression causes loss of interest in activities leading to happiness and increase in emotional turmoil whereby hindering functionality at home and work.

Some of the general symptoms ranging from mild to severe associated with depression are:

- *Low mood with feeling of sadness.*
- *Lost of interest in activities once enjoyed.*
- *Changes in appetites (loss of weight) .*
- *Disruptive sleep patterns.*
- *Guilt trips and feeling of being worthless.*
- *Difficulty in thought processing, concentration and decision making.*
- *Suicidal tendencies.*

To diagnose depression it is a requisite to have atleast two weeks of these symptoms, many medical conditions such as cardiac conditions, renal issues, vitamin deficiency, diabetes etc can mimic symptoms of depression so it is crucial to rule out these causes.

Risk Factors of Depression:

Depression is a "silent killer" that can affect anyone even those who appear to lead an ideal happy lifestyle. Some of the factors that are associated with depression are chemical imbalance in brain, hereditary causes, low esteem and stress prone people and continuous exposure to violence, neglect, abuse and poverty cause inclination towards depression.



Treatment of Depression:

Treatment for depression is highly effective since 80-90% patients respond positively to it. Before a diagnosis or treatment, a health professional should conduct



diagnostic evaluation, interview and physical examination, in some cases blood tests are required to rule out effect of medical conditions for e.g. thyroid problems. This evaluation identifies specific symptoms medical and family history, cultural factors and environmental factors to arrive at a proper diagnosis and plan a course of action. There are various ways to treat depression and they are through:

Medication: Since brain chemistry contributes to depression and may factor into their treatment, doctors recommend antidepressants to help modify it. After usage of anti depressants improvement are seen within the first two weeks and full results are seen within 2 to 3 months. If a patient feels little or no improvement the psychiatrist alters the dosage or substitutes it with another equivalent. In some cases psychotropic medications are helpful but the broader aspect is that it is vital for the physician to know about the medication's success and its side effects from the patient's experience. Long term maintenance treatment is also suggested to decrease risk of future episodes for people who are at high risk or depression.

Psychotherapy or "talk therapy," is sometimes used alone for treatment of mild depression; for moderate to severe depression, psychotherapy is often used in along with antidepressant medications. Cognitive behavioral therapy (CBT) has been found to be effective in treating depression. It helps in recognizing distorted thinking and effectively change behaviors and thinking through evaluation. Depending on severity of cases, treatment can take up to 10 to 15 sessions for significant improvement.

Electroconvulsive Therapy (ECT) is a medical treatment most commonly used for patients with severe major depression or bipolar disorder who have not responded to other treatments. Under the management of a team of medical professionals, it involves brief electrical stimulation of the brain while under anesthesia, a patient would typically receive ECT two to three times a week for a total of six to twelve treatments.

رمضان اور ذیابیطس



• رمضان سال کا سب سے بابرکت مہینہ ہے اور ہر مسلمان مرد اور عورت کی اولین خواہش ہوتی ہے کہ وہ اس مہینے کی فضیلت سے فیضیاب ہو سکیں۔

• ذیابیطس کے حامل افراد کے لئے روزہ رکھنے یا نہ رکھنے کا انحصار ان کے موجودہ کنٹرول، علاج اور معالج سے مشورہ پر منحصر ہے۔

• روزہ رکھنے کے لئے اپنی غذا میں احتیاطی تدابیر کو مد نظر رکھیں۔

• روزہ کے دوران خون میں شوگر کی سطح بہت کم بھی ہو سکتی ہے۔ ضرورت اس بات کی ہے کہ آپ خون میں شوگر کی سطح کم یا زیادہ ہونے کی وجوہات اور علامات کو جانیں۔

• اگر خون میں شوگر کی سطح کم ہو جائے تو یہ علامات ہو سکتی ہیں:

زیادہ تھکاوٹ | دل کی دھڑکن تیز ہونا | سردی لگنا | پسینہ آنا

سرور ہونا | دھندلا دکھائی دینا | چکر آنا | اچانک ہموک کا لگنا

خون میں شوگر کی مقدار 60ml سے کم ہونا پریشانی کا باعث بن سکتی ہے۔

خون میں شوگر کی سطح کا زیادہ ہونا:

روزہ کی حالت میں کھانے پینے کے اوقات تبدیل ہو جاتے ہیں اور افطار کے وقت نشاستہ اور میٹھی چیزوں کا استعمال جسم میں شوگر کی سطح بڑھنے کا باعث بن سکتا ہے۔ اگر جسم میں شوگر کی سطح 200mg/dl یا اس سے زیادہ ہے تو اس کا مطلب ہے مریض شوگر کی زیادتی کا شکار ہے جس کی علامات یہ ہو سکتی ہیں:

تھکن محسوس کرنا | پیشاب زیادہ آنا | پیاس کا زیادہ لگنا | دھندلا دکھائی دینا وغیرہ

مندرجہ ذیل ہدایات پر عمل کر کے آپ خون میں شوگر کی سطح متوازن رکھنے میں کامیاب ہو سکتے ہیں۔

• ذیابیطس کے مریضوں کے لئے ممکن ہے کہ وہ رمضان کے روزے رکھیں لیکن اسکے لئے ضروری ہے کہ وہ مناسب منصوبہ بندی کریں۔

• اپنے خون میں شوگر کی سطح بڑھنے یا کم ہونے کی علامات پر توجہ دیں اور اگر کوئی بھی علامت محسوس کریں تو فوراً چیک کریں۔ خون میں شوگر کی سطح کو چیک کرنے سے روزہ نہیں ٹوٹتا *۔

• اگر خون میں شوگر کی سطح 70mg/dl سے کم ہو تو فوراً روزہ کھول لیں اور دو چائے کے چمچے چینی آدھے گلاس پانی میں گھول کر پی لیں۔

• ایسے مریض جو علاج کیلئے انسولین استعمال کرتے ہیں ان لوگوں کو روزے کے دوران خون میں شوگر کی سطح کم ہونے کا امکان زیادہ ہوتا ہے۔ اس خطرے کو انسولین کی قسم میں تبدیلی اور استعمال کے اوقات اور مقدار کو تبدیل کر کے کمزور حد تک قابو پایا جاسکتا ہے لیکن اس کے لئے اپنے معالج سے مشورہ ضرور کریں۔

• رمضان میں ذیابیطس کی دواؤں کی مقدار اور اوقات کا تعین ڈاکٹر کرتا ہے اپنی مرضی سے تبدیل نہ کریں۔ عموماً صبح کی خوراک افطار کے وقت اور شام کی خوراک سحری کے وقت استعمال کی جاتی ہے۔ انسولین اور دوا کی مقدار اوقات کے حساب سے کم و بیش کی جاتی ہے۔

• سحری کا کھانا بہت پہلے یا آدھی رات کو نہ کھائیں بلکہ سحری کا ٹائم ختم ہونے سے تھوڑا پہلے کھائیں

• افطار کے بعد زیادہ سے زیادہ پانی کا استعمال کریں اور شکر کے بغیر مشروبات پیئیں۔ چینی کے بجائے مصنوعی مٹھاس والی گولیوں کا استعمال کر سکتے ہیں۔ لیموں کی سسکنجین یا بغیر بالائی کے دودھ کا استعمال بھی بہتر ہے۔

• رمضان میں رات کا کھانا وقت پر کھانا بہت ضروری ہے تراویح سے پہلے رات کا کھانا کھالینا چاہئے اور سونے سے پہلے چکنائی کے بغیر دودھ لینا چاہئے۔

• روزے کے دوران جسمانی مشقت سے اجتناب کریں۔ تراویح پڑھنا ورزش کی ایک بہترین صورت ہے اور روزانہ چہل قدمی کے متبادل ہے۔ اگر پھر بھی ورزش کرنا چاہیں تو افطار کے دو گھنٹے بعد معالج کے بتائے گئے طریقے کے مطابق ورزش کر سکتے ہیں۔

• دن کے ابتدائی حصے میں خون کی سطح 70mg سے کم رہے تو فوری معالج سے رجوع کریں یا روزہ کھول لیں۔

• اگر روزہ کھولنے میں ایک سے ڈیڑھ گھنٹہ باقی ہے اور خون میں شوگر 70 mg/dl ہو جائے تو ہر مشقت سے پرہیز کریں اور آرام کریں اور ساتھ ہی ساتھ ہر آدھے گھنٹے بعد شوگر چیک کریں۔

• سحری سے افطار تک خون میں شوگر کی مقدار 100 mg/dl سے کم اور 200 mg/dl سے زیادہ نہ ہو یعنی روزے کے دوران شوگر کی مقدار 100-200mg/dl تک رہنا چاہئے۔

رمضان سے پہلے معالج سے مشورہ انتہائی ضروری ہے خاص طور پر

اگر آپ کی شوگر کنٹرول میں نہیں رہتی۔

اگر گزشتہ تین مہینوں میں آپ کی شوگر بہت کم یا زیادہ رہی ہو۔

حاملہ خواتین۔

وہ لوگ جن کے گردے، آنکھیں یا اعصاب ذیابیطس سے متاثر ہو چکے ہوں۔

معمر افراد جن کی صحت متاثر ہو۔

وہ مریض جو گزشتہ دنوں میں شدید بیماری کا شکار رہ چکے ہوں۔

ذیابیطس قسم اول کے مریض۔

وہ لوگ جو گردوں کے علاج کیلئے Dialysis کروارہے ہوں۔

مندرجہ بالا معلومات ذیابیطس کے ان مریضوں کیلئے فائدہ مند ہیں جو رمضان المبارک میں روزہ رکھنا چاہتے ہیں۔ لیکن یہ ہدایات ڈاکٹر کے مشورے کا تعمیل نہیں لہذا ذیابیطس کے ہر مریض کو روزہ رکھنے سے پہلے اپنے ذیابیطس کے معالج سے مشورہ کرنا بے حد ضروری ہے۔

ترجمہ: شاہد پروین

ترجمہ: ڈاکٹر زاہد میاں | ڈاکٹر یعقوب احمدانی



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Disclaimer: The newsletter contains information about heart health purely for the sake of creating awareness and is either contributed by the authority on the subject or duly reviewed and validated by the same. The information is not a medical advice, and should not be treated as such.

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