

NHI Dialogue



Quarterly Health Magazine of Cardio Diabetes Research Society

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Treat Diabetes - The Yogic Way



THE SPIRITUAL HEALTH



A green tea extract
nearly cost your liver.



Tippler's Paradise Lost?
Alcohol Not Necessarily Good for the Heart?



**NATIONAL
HEART
INSTITUTE**

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Editorial

Voice

Dear readers!

It has been a journey so pleasant and satisfying since the first issue of your Dialogue way back in 2005, that we keep expecting new additions all the time. In this new year issue we present 'Spiritual Health ' article . Please keep sending your more suggestions .

Let us start this year with a positive note ! Happy Lohri, Republic day !!

Yours

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HOW CAN DIABETES AFFECT MY SKIN?

Dr. V. K. Gujral – Sr. Consultant Diabetes NHI

If you are a diabetic, you have a 30 percent chance of developing some kind of skin disorder.

Diabetes can hurt your skin in two ways :

- If your blood glucose is high, your body loses fluid. With less fluid in your body, your skin can get dry. Dry skin can be itchy, causing you to scratch and make it sore. Also, dry skin can crack. Cracks allow germs to enter and cause infection. If your blood glucose is high, it feeds germs and makes infections worse. You may get dry skin on your legs, feet, elbows, and other places on your body. Drinking fluids helps keep your skin moist and healthy.
- Nerve damage can decrease the amount you sweat. Sweating helps keep your skin soft and moist. Decreased sweating in your feet and legs can cause dry skin.

What can I do to take care of my skin ?

After you wash with a mild soap, make sure you rinse and dry yourself well. Check places where water can hide, such as under the arms, under the breasts, between the legs, and between the toes.

Keep your skin moist by washing with a mild soap and using lotion or cream after you wash.

Keep your skin moist by using a lotion or cream after you wash. Ask your doctor to suggest one.

Drink lots of fluids, such as water, to keep your skin moist and healthy.

Wear all-cotton underwear. Cotton allows air to move around your body better.

Check your skin after you wash. Make sure you have no dry, red, or sore spots that might lead to an infection.

Velvety plaques in the neck and/or armpit suggest diabetes. This condition -- acanthosis nigricans -- could be benign or be caused by obesity. But it is very often a sign of diabetes. In rare cases acanthosis



nigricans occurring in other places, such the hands or lips, may indicate an internal cancer.

Necrobiosis lipoidica diabetorum :

As the name suggests, it's a distinctive sign of diabetes, but it is rare. It can first appear as a dull, reddish colored patch but then become shinier with a distinct border. Sometimes the affected skin may crack and become itchy or painful.



Bacterial and fungal infections :

Diabetics are often more prone to bacterial and fungal infections of the skin, including staphylococcus or staph infections, yeast infections, and athlete's foot.

Infections may also occur in skin folds, such as under the arms or the breasts, or less commonly, in the mouth, the fungal infection known as thrush. Increased serum glucose hinders the immune system's ability to fight off infections. In the case of athlete's foot, for example, tiny macerations form in the toe web spaces, increasing the possibility of another skin infection.

Diabetes can cause your skin, including the skin of your feet, to be dry when you have :

- *Higher than normal blood glucose levels pull fluids from your body, causing dry skin.*
- *Diabetic neuropathy can cause you to sweat less which can be drying to your feet.*
- *Peripheral arterial disease (PAD) causes dry feet because it affects the arteries that "feed" your legs and feet.*

Other causes of dry skin and feet may be :

- *Low humidity*
- *Dry heat in winter months*
- *Thyroid problems*
- *Athlete's foot*

What you can do for softer, supple skin :

- Keep your blood glucose and blood pressure in your target range.
- Read and follow The Do's and Don'ts of Footcare.
- Use a humidifier in areas with low humidity and during the winter months.
- Be a detective. Talk with your healthcare provider about other causes for dry skin, such as those listed above. Once you've detected what the problem is, together you can make up a plan to improve your skin.
- Age healthfully. There's nothing you can do to turn back the clock, but you can prevent complications and live a healthier life by managing your diabetes. You can also keep your skin moist but applying your moisturizer while your skin is damp to "lock in the moisture."

For diabetics, dry, itchy skin can be more than just a seasonal nuisance. It can also be the first sign of danger.

The nerve damage and other problems caused by diabetes can make more issues in developing skin conditions. Some symptoms are signals that are warning signs for serious underlying health issues. Those that need immediate attention.

Baby Boomers with Diabetes often experience itchy skin, particularly in their lower legs.





Skin Care for Diabetics

Most skin conditions can be treated or prevented entirely by taking good or better care of your skin and managing your diabetes responsibly.

- * Once a week, thoroughly inspect your skin especially your lower legs and feet for persistent or unusual sores, bruises, pain, or any other symptoms, and if you find any, inform your doctor at once.**
- * Keep your skin clean and avoid chafing by applying talcum powder, especially to such places as the armpits and groin.**
- * Avoid very hot baths and showers and use a gentle moisturizer regularly, especially where you sweat.**
- * Don't scratch! Scratching that itch can create tiny openings in the skin, making you more prone to infection and serious skin issues.**
- * Don't smoke. You are too green to burn and It can worsen several diabetic skin diseases.**
- * Wear gardening gloves or work gloves to protect your hands during rough activities, and always wear shoes, even indoors.**
- * See a dermatologist about any skin conditions that you can't cure on your own. Do not wait for it to go away.**

NEWZ U CAN USE



Newly Identified Brown Fat Stem Cells Hold Possibilities for Treating Diabetes, Obesity –

Publication Date : 12/27/2013

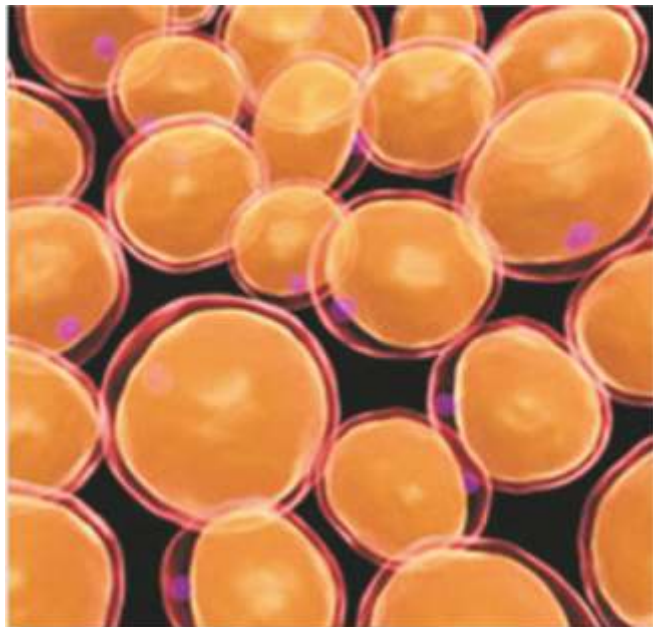
Obesity and diabetes have become a global epidemic leading to severe cardiovascular disease. Researchers at the University of Utah believe their recent identification of brown fat stem cells in adult humans may lead to new treatments for heart and endocrine disorders, according to a new study published in the peer-reviewed journal Stem Cells.

The study was led by Amit N. Patel, MD, MS, director of Clinical Regenerative Medicine and Tissue Engineering and associate professor in the Division of Cardiothoracic Surgery at the University of Utah School of Medicine.

Prior to Patel's study, it was thought that brown fat stem cells did not exist in adults. Children have large amounts of brown fat that is highly metabolically active, which allows them to eat large amounts of food and not gain weight. Patel notes, adults generally have an abundance of white fat in their bodies, which leads to weight gain and cardiovascular disease but this is not seen in brown fat. As people age the amount of white fat increases and brown fat decreases which contributes to diabetes and high cholesterol.

“If you have more brown fat, you weigh less, you're metabolically efficient, and you have fewer instances of diabetes and high cholesterol. The unique identification of human brown fat stem cells in the chest of patients aged from 28 to 84 years is profound. We were able to isolate the human stem cells, culture and grow them, and implant them into a pre-human model which has demonstrated positive effects on glucose levels,” says Patel.

The new discovery of finding brown fat stem cells may help in identifying potential drugs that may increase the body's own ability to make brown fat or find novel ways to directly implant the brown fat stem cells into patients.



Source : University of Utah Health Sciences

NEWZ U CAN USE

Distracted Driving and Risk of Road Crashes among Novice and Experienced Drivers

N Engl J Med 2014; 370:54-59 January 2, 2014 DOI: 10.1056/NEJMs1204142

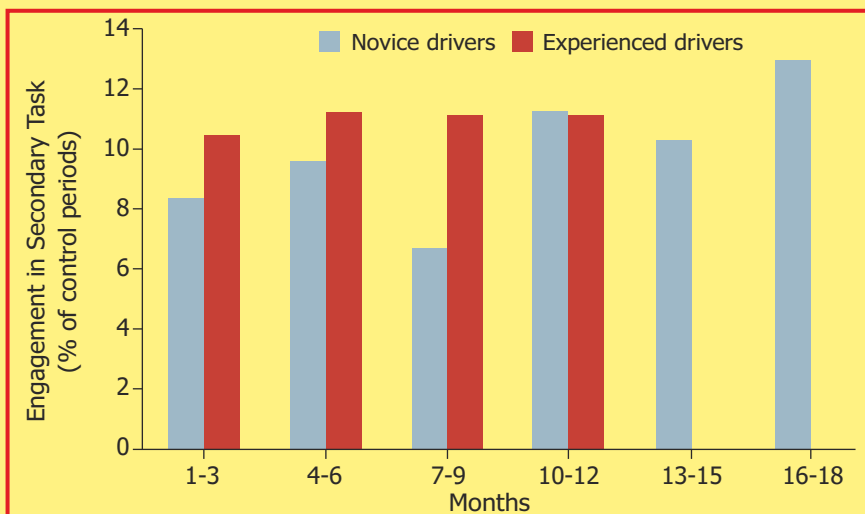


BACKGROUND : Distracted driving attributable to the performance of secondary tasks is a major cause of motor vehicle crashes both among teenagers who are novice drivers and among adults who are experienced drivers.

METHODS : We conducted two studies on the relationship between the performance of secondary tasks, including cell-phone use, and the risk of crashes and near-crashes. To facilitate objective assessment, accelerometers, cameras, global positioning systems, and other sensors were installed in the vehicles of 42 newly licensed drivers (16.3 to 17.0 years of age) and 109 adults with more driving experience.

RESULTS : During the study periods, 167 crashes and near-crashes among novice drivers and 518 crashes and near-crashes among experienced drivers were identified. The risk of a crash or near-crash among novice drivers increased significantly if they were dialing a cell phone (odds ratio, 8.32; 95% confidence interval [CI], 2.83 to 24.42), reaching for a cell phone (odds ratio, 7.05; 95% CI, 2.64 to 18.83), sending or receiving text messages (odds ratio, 3.87; 95% CI, 1.62 to 9.25), reaching for an object other than a cell phone (odds ratio, 8.00; 95% CI, 3.67 to 17.50), looking at a roadside object (odds ratio, 3.90; 95% CI, 1.72 to 8.81), or eating (odds ratio, 2.99; 95% CI, 1.30 to 6.91). Among experienced drivers, dialing a cell phone was associated with a significantly increased risk of a crash or near-crash (odds ratio, 2.49; 95% CI, 1.38 to 4.54); the risk associated with texting or accessing the Internet was not assessed in this population. The prevalence of high-risk attention to secondary tasks increased over time among novice drivers but not among experienced drivers.

CONCLUSIONS : The risk of a crash or near-crash among novice drivers increased with the performance of many secondary tasks, including texting and dialing cell phones. (Funded by the Eunice Kennedy Shriver National Institute of Child Health and Human Development and the National Highway Traffic Safety Administration.)



Tippler's Paradise Lost?

Alcohol Not Necessarily Good for the Heart?

A. Kundu , O. P. Yadava* C.E.O. & Chief Cardiac Surgeon***
Consultant Cardiac Surgeon National Heart Institute, New Delhi**

A lot of us have, at some time or the other, been counseled by self-styled “familiar” as well as actual family physicians about the potential health benefits of the consumption of alcohol, especially as regards the heart. Many a heart patient has asked of his primary care-giver, if he can continue to enjoy his daily evening tipples. Quite often, an initial negative response gets mutated into the affirmative after a bout of plaintive insistence on the part of the patient! Reports have come in about the ability of moderate amounts of alcohol to work wonders on our cardiovascular health. But is there really any substance in such claims? Or is it just a concerted effort by lovers of “Chivas” to ensure their daily evening fix has medical sanction? These and other queries will be subsequently examined threadbare. But before going further, it is forewarned that the final conclusion may not be pleasant to the latter group!

ARE THERE ANY POTENTIAL HEALTH BENEFITS FROM CONSUMPTION OF ALCOHOL?

Research is being carried out to examine the benefits of alcohol consumption. Many of these potential benefits have been attributed to the role of anti-oxidants present in some beverages, especially red wine, the marginal increase in HDL (“good”) cholesterol and anti-clotting properties. All these have a beneficial effect on cardiac as well as overall health. But to put a dampener on these points, all these health effects can also be achieved by regular physical activity, dietary precautions and certain medications like aspirin. HDL cholesterol can also be raised by prescribing drugs like niacin, although the indications for this are very specific.

DOES RED WINE REALLY BENEFIT THE HEART?

Over the past several decades, many studies have been published in scientific journals about how drinking alcohol may be associated with reduced deaths due to heart disease in some populations. Some researchers have suggested that the benefit may be due to wine, especially red wine. Others are examining the potential benefits of components in red wine such as flavonoids and other antioxidants in reducing heart disease risk. Some of these components may be found in other foods such as grapes or red grape juice. The link reported in many of these studies may be due to other lifestyle factors rather than alcohol. Such factors may include increased physical activity and a diet high in fruits and vegetables and lower in saturated fats. Indeed, the mere consumption of a glass of wine might be psychologically distressing to some! No direct comparison trials have been carried out to determine the specific effect of wine or other alcoholic beverages on the risk of developing heart disease or stroke.

WHAT ARE THE RISKS TO THE HEART ASSOCIATED WITH ALCOHOL?

Excessive consumption of alcohol leads to elevated levels of triglycerides (a type of cholesterol) in the blood. It can also lead to high blood pressure, heart failure and increased calorie intake. The latter may lead to obesity, itself a risk factor for development of heart disease and diabetes. Other problems associated with excessive alcohol intake are cardiac rhythm disorders, sudden cardiac death and alcoholic cardiomyopathy (a disorder affecting the heart muscle function consequent upon excessive alcohol intake).

AMERICAN HEART ASSOCIATION (AHA) RECOMMENDATIONS

Alcohol consumption must be in moderation. Broadly, this works out to an average of one to two drinks per day for men, and one per day for women (with due apologies to the feminists!). More accurately, one drink translates to about 350ml of beer or 120ml of wine. However, drinking more alcohol increases the risks of high blood pressure, stroke, obesity, liver disorders, suicides and accidents. Also, it is impossible to predict which people will go on to become chronic alcoholics in the long run.

Therefore the AHA DOES NOT recommend the commencement of the consumption of alcohol for any health benefits. If already a drinker, consumption must be limited to the ceiling recommended above.

Pre diabetes is a condition when your blood sugar level triggers higher than normal, but not so high that we can justify it as type 2 diabetes.

Signs and Symptoms of Pre diabetes

Pre diabetes can take a long time to transform finally as diabetes. It has been generally observed that pre diabetes will eventually convert to diabetes but, at the same time, there are greater possibilities to revert back to normal if, taken care seriously. People suffering from pre diabetes may show same symptoms as in diabetes but, they will be erupting occasionally like:

Excessive thirst

Tingling sensations in feet and fingers

Excess Hunger

Frequent Urination

Irritability

Frequent infections

People - In Risk Zone : Some individuals are at more risk of prediabetes than others due to presence of these factors -

- Being overweight
- Family history of pre diabetes
- Waist hip ratio - The person with 'fat tire'
- Depression and stress

Causes : Pre diabetic is a person suffering from little high sugar than normal patients. The reason behind high sugar is entry of glucose into the blood cells due to disturbance in the mechanism of insulin. Thus, sugar is circulating in the blood stream but unable to penetrate into cells and tissue, to produce energy. The exact reason for this is uncertain but it is considered that overweight and fatty tissues along with sedentary lifestyle are the correlating factors.

Screening and Diagnosis of Pre diabetes :

Pre diabetics will never know by their own about their high blood sugar. If they are suffering from the mentioned factors which indicates risk zone, they should periodically go for routine check up and should be cautious enough about the given signs and symptoms. Once they crossed the age of 45, they must routinely visit a doctor and ask for its diagnosis.

There are three types of blood tests to determine whether you are suffering from pre diabetes or not, they are as follows:

Fasting blood glucose test : A fasting blood sugar level under 100 milligrams of glucose per deciliter of blood (mg/dl) is considered normal. If your blood sugar level is 100 to 125mg/dL, you have pre diabetes - also called impaired fasting glucose (IFG). If you are suffering from prediabetes then the fasting blood sugar as well as post prandial blood sugar will fluctuate easily.

Oral Glucose Tolerance Test (OGTT) : After fasting for at least eight hours, FBS (fasting blood sugar) is checked and then an oral dose of 8 ounce sugary syrup is administered. The blood glucose level is checked after an hour and if it reaches 144-199 mg/dl after two hours, you have impaired glucose tolerance.

HbA1C : this is the measure of mean blood glucose of previous 2-3 months, is not affected by the fasting or post meal sample on that given day. Values between 5.7% - 6.4% are indicative of Pre diabetes

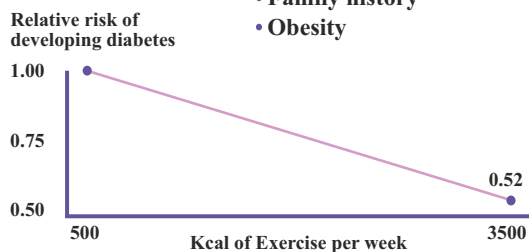
Prevention of Pre diabetes

Unlike diabetes, pre diabetes is a reversible condition with the administration of proper medication and life style modification. Thus pre diabetes can be prevented with right diet and exercise.

EXERCISE AND RISK OF DIABETES

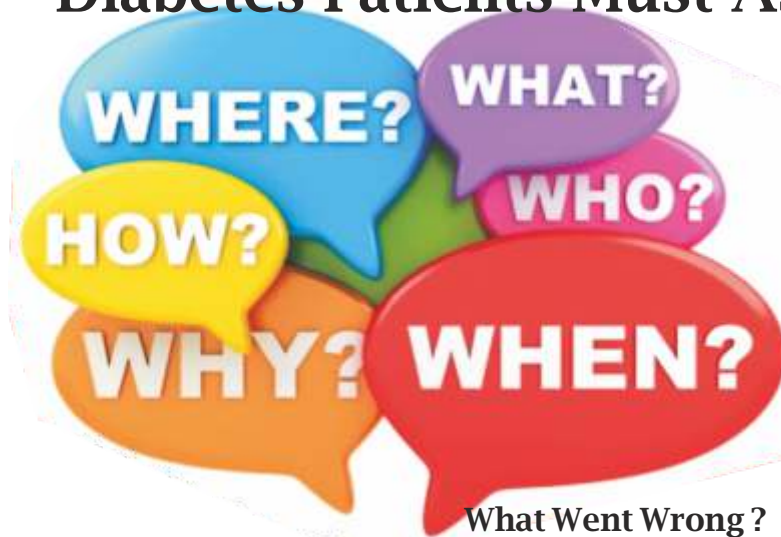
Decrease risk of developing diabetes by 50% in those with high risk defined by:

- High blood pressure
- Family history
- Obesity



working with your doctor, follow your treatment plan. It can help you to keep your pre diabetes from worsening and developing into type 2 diabetes.

Questions Newly Diagnosed Type 2 Diabetes Patients Must Ask



Why Me ?

Genes and environment play a role in whether a person gets diabetes or not. Diabetes is not your fault. You have done nothing to cause it to happen; but what you can do now is learn how to take control of your health as best you can. At first, you may not really believe the diagnosis—and you may bargain with the doctor for a few more months so you can lose some weight or start exercising. Denial is common, but when reality sets in, you may feel the anger of being burdened with “a terrible disease.” Anger may turn to feeling overwhelmed, or depressed. These feelings are natural coping mechanisms. You will come to a stable point, where you will be open to learning how to manage your health and diabetes. With knowledge and a positive attitude, you can lead a long, high quality life.

There Must Be Some Mistake ?

The lab results could be repeated, for your peace of mind. There are very definitive standards for the diagnosis; it is not a judgment call by your doctor. A fasting blood test of 126mg/dl or higher on two occasions, or a HgA1c test of 6.5 percent or higher.

What Went Wrong ?

You may have certain higher risks for developing type 2 diabetes, and some of them being genetic. If you have a parent or sibling with diabetes, over 45, and of African American, Asian, American Indian or Pacific Islander, you are at higher risk genetically. A female is at higher risk if she has had gestational diabetes or a baby over 4Kgs. at delivery. Additional risk factors are: being overweight, waist circumference higher than 35 inches in women, 40 inches in a man; high cholesterol; inactivity and if you smoke.

What Kind of Diabetes Do I Have ?

You may have certain higher risks for developing type 2 diabetes, and some of them being genetic. If you have a parent or sibling with diabetes, over 45, and of African American, Asian, American Indian or Pacific Islander, you are at higher risk genetically. A female is at higher risk if she has had gestational diabetes or a baby over 9 pounds at delivery. Additional risk factors are: being overweight, waist circumference higher than 35 inches in women, 40 inches in a man; high cholesterol; inactivity and if you smoke.



Spike in Harm to Liver is Tied to Dietary Aids

A green tea extract nearly cost your liver.

Michael Stravato for The New York Times, by Anahad O'Connor, December 21, 2013

When Christopher Herrera, 17, walked into the emergency room at Texas Children's Hospital one morning last year, his chest, face and eyes were bright yellow — “almost highlighter yellow,” recalled Dr. Shreena S. Patel, the pediatric resident who treated him.

Christopher, a high school student from Katy, Tex., suffered severe liver damage after using a concentrated green tea extract he bought at a nutrition store as a “fat burning” supplement. The damage was so extensive that he was put on the waiting list for a liver transplant.

“It was terrifying,” he said in an interview. “They kept telling me they had the best surgeons, and they were trying to comfort me. But they were saying that I needed a new liver and that my body could reject it.”

New data suggests that his is not an isolated case. Dietary supplements account for nearly 20 percent of drug-related liver injuries that turn up in hospitals, up from 7 percent a decade ago, according to an analysis by a national network of liver specialists. The research included only the most severe cases of liver damage referred to a representative group of hospitals around the country, and the investigators said they were undercounting the actual number of cases.

About 55,000 dietary supplements, largely unregulated, are sold in the United States. CHESTER HIGGINS JR. / THE NEW YORK TIMES

While many patients recover once they stop taking the supplements and receive treatment, a few require liver transplants or die because of liver failure. Naïve teenagers are not the only consumers at risk, the researchers said. Many are middle-aged women who turn to dietary supplements that promise to burn fat or speed up weight loss.

“It's really the Wild West,” said Dr. Herbert L. Bonkovsky, the director of the liver, digestive and metabolic disorders laboratory at

Carolinas HealthCare System in Charlotte, N.C. “When people buy these dietary supplements, it's anybody's guess as to what they're getting.”

Though doctors were able to save his liver, Christopher can no longer play sports, spend much time outdoors or exert himself, lest he strain the organ. He must make monthly visits to a doctor to assess his liver function.

Americans spend an estimated \$32 billion on dietary supplements every year, attracted by unproven claims that various pills and powders will help them lose weight, build muscle and fight off everything from colds to chronic illnesses. About half of Americans use dietary supplements, and most of them take more than one product at a time.

Dr. Victor Navarro, the chairman of the hepatology division at Einstein Healthcare Network in Philadelphia, said that while liver injuries linked to supplements were alarming, he believed that a majority of supplements were generally safe. Most of the liver injuries tracked by a network of medical officials are caused by prescription drugs used to treat things like cancer, diabetes and heart disease, he said.

But the supplement business is largely unregulated. In recent years, critics of the industry have called for measures that would force companies to prove that their products are safe, genuine and made in accordance with strict manufacturing standards before they reach the market.

But a federal law enacted in 1994, the Dietary Supplement Health and Education Act, prevents the Food and Drug Administration from approving or evaluating most supplements before they are sold. Usually the agency must wait until consumers are harmed before officials can remove products from stores. Because the supplement industry operates on the honor system, studies show, the market has been flooded

with products that are adulterated, mislabeled or packaged in dosages that have not been studied for safety.

The new research found that many of the products implicated in liver injuries were bodybuilding supplements spiked with unlisted steroids, and herbal pills and powders promising to increase energy and help consumers lose weight.

“There unfortunately are criminals that feel it's a business opportunity to spike some products and sell them as dietary supplements,” said Duffy MacKay, a spokesman for the Council for Responsible Nutrition, a supplement industry trade group. “It's the fringe of the industry, but as you can see, it is affecting some consumers.” More popular supplements like vitamins, minerals, probiotics and fish oil had not been linked to “patterns of adverse effects,” he said.

The F.D.A. estimates that 70 percent of dietary supplement companies are not following basic quality control standards that would help prevent adulteration of their products. Of about 55,000 supplements that are sold in the United States, only 170 — about 0.3 percent — have been studied closely enough to determine their common side effects, said Dr. Paul A. Offit, the chief of infectious diseases at the Children's Hospital of Philadelphia and an expert on dietary supplements.

“When a product is regulated, you know the benefits and the risks and you can make an informed decision about whether or not to take it,” he said. ***“With supplements, you don't have efficacy data and you don't have safety data, so it's just a black box.”***

The new research, presented last month at a conference in Washington, was produced by the Drug-Induced Liver Injury Network, which was established by the National Institutes of Health to track patients who suffer liver damage from certain drugs and alternative medicines. It includes doctors at eight major hospitals throughout the country.

The investigators looked at 845 patients with severe, drug-induced liver damage who were treated at hospitals in the network from 2004 to 2012. It focused only on cases where the

investigators ruled out other causes and blamed a drug or a supplement with a high degree of certainty.

When the network began tracking liver injuries in 2004, supplements accounted for 7 percent of the 115 severe cases. But the percentage has steadily risen, reaching 20 percent of the 313 cases recorded from 2010 to 2012.

Those patients included dozens of young men who were sickened by bodybuilding supplements “They become very jaundiced for long periods of time,” he said. “They itch really badly, to the point where they can't sleep. They lose weight. They lose work. I had one patient who was jaundiced for six months.”

Tests showed that a third of the implicated products contained steroids not listed on their labels.

A second trend emerged when Dr. Navarro and his colleagues studied 85 patients with liver injuries linked to herbal pills and powders. ***Two-thirds were middle-aged women, on average 48 years old, who often used the supplements to lose weight or increase energy. Nearly a dozen of those patients required liver transplants, and three died.***

It was not always clear what the underlying causes of injury were in those cases, in part because patients frequently combined multiple supplements and used products with up to 30 ingredients

But one product that patients used frequently was green tea extract, which contains catechins, a group of potent antioxidants that reputedly increase metabolism. The extracts are often marketed as fat burners, and catechins are often added to weight-loss products and energy boosters. Most green tea pills are highly concentrated, containing many times the amount of catechins found in a single cup of green tea, Dr. Bonkovsky said. In high doses, catechins can be toxic to the liver, he said, and a small percentage of people appear to be particularly susceptible.

There is this Misplaced belief that if something is natural, then it must be safe and it must be good,

The Fat Trail



WHO Expert Consultation proposed a new BMI cut-off of

23.0 kg/m² for public health action in **Asia**. The use of this cut-off, however, was not directly supported by data on mortality, since deaths from any cause were lowest among men with BMI of 24.0 to 24.9 and women with a BMI of 25.0 to 26.9 kg/m² in a representative group of Chinese subjects.

Clinical use of bioelectrical impedance analysis (BIA) in subjects at extremes of BMI ranges or with abnormal hydration cannot be recommended for routine assessment

of patients until further validation studies prove for BIA algorithms to be accurate in such conditions. Multi frequency and segmental BIA may have more advantage in these conditions³² over single frequency BIA included in the present study. Since hydration studies were not undertaken in our subjects, we were not able to clinically prove whether our subjects possess abnormal hydration, even though we assured that no subject was taking diuretic drugs.

Asian Indians have higher upper-body adiposity and higher visceral fat for a given BMI when compared with the Western population. In our population, an interaction between upper-body adiposity and general adiposity increased the risk at lower tertiles of BMI in both men and women. The cutoff values derived for WC and WHR were also lower than those suggested in earlier studies. Use of WC as an index of upper-body adiposity appeared to be more sensitive than WHR, as shown by the interactions between WC and BMI in either sex.

In summary, the healthy BMI for an urban Indian is <23 kg/m², and cutoff values for WC were 85 cm for men and 80 cm for women, and for WHR they were 0.89 for men and 0.81 for women. It may be appropriate to use WC as an index for upper-body adiposity.

Body Fat Percentage Chart

Ideal body fat percentage for Men

Age(yr)	Excellent	Good	Fair	Risky
20-24	10.8	14.9	19.0	23.3
25-29	12.8	16.5	20.3	24.3
30-34	14.5	18.0	21.5	25.2
35-39	16.1	19.3	22.6	26.1
40-44	17.5	20.5	23.6	26.9
45-49	18.6	21.5	24.5	27.6
50-54	19.5	22.3	25.2	28.3
55-59	20.0	22.9	25.9	28.9
60+	20.3	23.4	26.4	29.5



Ideal body fat percentage for Women

Age(yr)	Excellent	Good	Fair	Risky
20-24	18.9	22.0	25.0	29.6
25-29	18.9	22.1	25.4	29.8
30-34	19.7	22.7	26.4	30.5
35-39	21.0	24.0	27.7	31.5
40-44	22.6	25.6	29.3	32.8
45-49	24.3	27.3	30.9	34.1
50-54	25.8	28.9	32.3	35.5
55-59	27.0	30.2	33.5	36.7
60+	27.6	30.9	34.2	37.7

THE SPIRITUAL HEALTH - Dr. A. P. Arora, Sr. Cardiologist NHI

Spirituality is unique to each individual. Your "spirit" usually refers to the deepest part of you, the part that lets you make meaning of your world. Your spirit provides you with the revealing sense of who you are, why you are here and what your purpose for living is. It is that innermost part of you that allows you to gain strength and hope.

For some, spirituality may be equated with traditional religions such as, Hinduism, Christianity or Buddhism. For others, it may mean growing in your personal relationships with others, or through being at peace with nature.

SELF ASSESSMENT

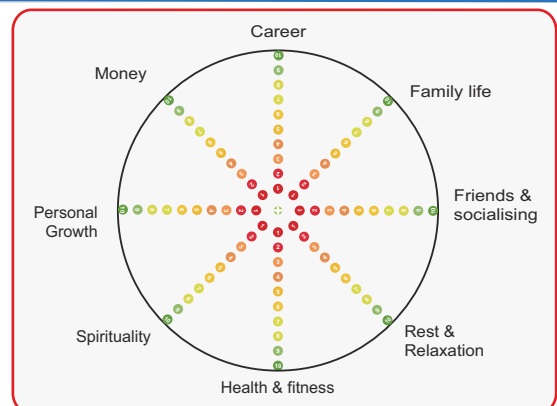
Where are you at in your spiritual life? Take a moment to reflect... do you feel a sense of worth, hope, purpose, commitment or peace? Do you have a positive outlook on life? Or do you experience feelings of emptiness, anxiety, hopelessness, apathy or conflict? These may be signs of spiritual poverty in your life and may be the reason for unhappiness or dissatisfaction.



SELF IMPROVEMENT - Here are some ways to help improve your spiritual health :

- Be quiet. Take time for yourself every day, even if it's just before you go to sleep, or when you're driving home.
- Be open. Spiritual experiences can happen anywhere at any time.
- Practice being non-judgmental and having an open mind.
- Be receptive to pain or times of sorrow. It is often in these times when we discover how spirituality can help us cope.
- Practice forgiveness. ● Pray, meditate or worship. ● Live joyfully.
- Allow yourself to believe in things that aren't easily explainable.

But the first thing to notice about self-improvement is that it's not something that we achieve, it's a life-long process that people go through. Many people choose to go through that process with the help of a coach and actually speeds up self-improvement and here, I'd like to share some techniques with you to help you become your own coach. Now, of course, there are many different coaching tools and techniques available but in this video, I'd like to tell you about a very simple, very effective technique called the wheel of life.



How to find a life balance? In this busy world, so many of us struggle to balance work, home life, socializing, personal development, relaxation, health, fitness, family and so on. So, how on earth do you find the happy medium that you can call balance? Let me share with you some coaching techniques that I hope will help you. First of all, understand that balance doesn't mean that all parts of your life are equal.

You will have times in your life when it's beneficial to focus on one part of your life over another. It's good to know that so you can gently explain to people in different parts of your life that this isn't your priority area at the moment. If you don't have time to go partying right now, it doesn't mean you never will.

Follow Your Passion There's no point knowing what you love to do in life and what makes you feel alive, than to put it on one side, and keep going on the day in, day out drudgery. This is really about discovering things that make you want to wake up every morning and say yeah, 'm really looking forward to do this and be myself, and enjoy what I'm doing. This isn't just about in your work life or your business it's about your personal life as well.

Well, the first thing is to know the things that make you feel alive. It's look at how you can start to implement that on a day-to-day basis. Now, in some areas, it will be easier than others, but again, break it down into bite sized pieces. Within your professional life at work, try and look at how you can integrate more things you love doing. What is it that that helps you, made you start that career or business in the first place, and try to integrate more of that, on a day-to-day basis? Look at people around you, look at how can you get them on board? It might be that some things that you don't enjoy doing, they do. So do a swap, or do an exchange.

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Treat Diabetes - The Yogic Way

M.M. Sharma, Yoga Consultant



Many people seek yogic advice for their various disease conditions and it is often surprising how easy it can be to achieve moderate to good results in a relatively short time by merely modifying the diet and introducing a little exercise and relaxation. At the same time we have found that yoga can do much more than this. It is a powerful system of manipulating our psychophysiology and, in combination with allopathy and other systems of healing, can lead to a deep and complete rejuvenation of the various levels of our being. It is yoga's ability to allow us to manipulate the internal physical and mental states via a practical and scientific system of techniques which is so important and which should be appreciated.

The yogic process is not just therapeutic for it encompasses palliation and prevention of disease and promotes health.

We must not only eliminate disease and regain our health, but we must ensure that we do not, fall sick again and this requires consistent effort for our whole lives. In this way we grow healthier and stronger at all levels of our being. Good health, from the yogic point of view, therefore, is seen not just as something

physical and tangible that once achieved, we can forget about, but more in terms of the ongoing process of total growth, development and evolution.

The whole view of the medical profession today is that, for the most part, asthma and diabetes are incurable conditions that we will have to learn to live with. This attitude subconsciously programs both the doctor and the patient with a defeatist, negative attitude.

Yoga teaches us to change our attitude towards disease, to see it as a learning experience, and at the same time offers us the techniques by which we can not only remove disease, but also manipulate and cultivate our internal body process so as to achieve higher states of awareness and fulfillment.

In diabetes it lowers blood sugar and rebalances imbalanced neural and metabolic processes as well as helping us to become stronger, fitter and happier.

When we add yoga to our lives, it is purifying, strengthening, transformative and liberating, allowing us to make the most of our situation, whether we are asthmatic, diabetic, hypertensive or healthy.

There is an obvious and pressing need for some new approach to the psychosomatic disease situation. Most asthmatics and diabetics, for example, face a progressively deteriorating situation. It becomes increasingly more difficult to participate in the normal activities of life despite the continual use of medication. Yoga claims that it is able to remedy this situation.

In diabetes there are many doctors who state that the disease is incurable and that only insulin should be used.

A recent trail has shown that the need for insulin can often be reduced, if not eliminated, merely by the introduction of physical exercise and high fiber food into the diet.

Trails have shown that yoga can reduce blood sugar levels, as well as body weight and the effects of stress and tension, factors which aggravate diabetes. If yoga can do this, then it should definitely become a part of the medical management of diabetes, especially if it can eliminate the need for insulin and oral medications which have their own bad side-effects.

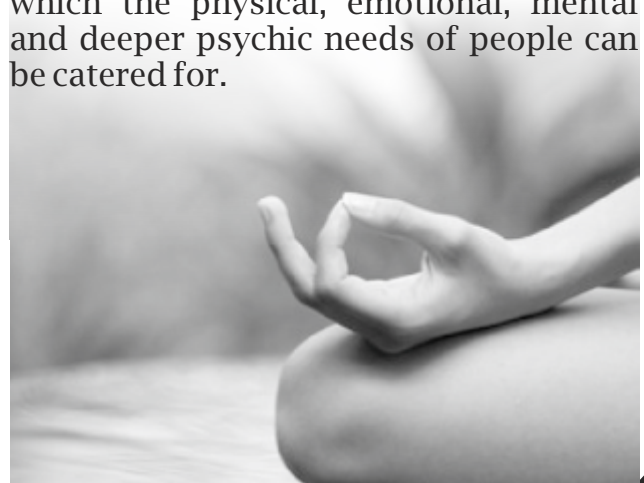
It is unfortunate that people often come to yoga once the disease has progressed and complications have set in. In diabetes, for example, it is paradoxically unfortunate that initially the condition is relatively pain free and does not seem to be so bad to the individual concerned. There is no impetus or compulsion to look for some better method of cure, to examine the lifestyle for its weak points or to improve dietary or exercise habits. People often come to us late in the disease process when it is more difficult for yoga to work.

It is for this reason that everyone should at least know about the yogic process so that if they want to, they can have the opportunity to alleviate their condition using yogic methods! before

complications set in. The earlier we know about yoga and apply it in our lives, the better are our chances of success. It is for this reason that doctors should advise their patients to use yogic techniques under medical guidance for the best possible management of their condition, to avoid complications and to gradually strengthen the body and mind.

Medicine and yoga work together well. If we utilize the best of both systems, both doctor and patient must benefit. One very good way to achieve this aim of friendly cooperation and amalgamation (yoga) of the best of both worlds, is for patients to visit their doctors for regular ongoing medical checkups of their physical health. This will also allow the yoga teacher to know if the yogic methods are working. Suitable adjustments of medicines and yoga can then be made. There can no longer be any doubt that yoga is of benefit in asthma and diabetes. Medicines can only do so much, and they should not be the 'be-all and end-all' of medical treatment.

Yoga classes allow the patient to get more time and attention for his deeper, inner personal needs, to help alleviate social, mental and emotional problems through regulated, systematic and progressive exercise and relaxation programs. When yoga and medicine can work together in this manner, we will be paving the way for a better world, one in which the physical, emotional, mental and deeper psychic needs of people can be catered for.





Free Heart Check up Camps at Almora & Bageshwar Districts in Uttarakhand

Even after two decades of statehood, Uttarakhand is struggling to provide basic health services to its people. Health statistics of Uttarakhand show that it is still much behind other states when we talk about healthcare facilities and services in the state.

Recently National Heart Institute, New Delhi organized two major free heart camps for the marginalized communities in the hill regions of Dinapani, Almora and Bageshwar Districts in Uttarakhand, where more

than 1000 patients were seen and treated under our corporate social responsibility initiatives.

The team was led by Dr. O. P. Yadava, Chief Executive Officer & Chief Cardiac Surgeon, National Heart Institute. Camps were coordinated by Mr. Mahipal Singh Pilkhwai, IT Consultant, National Heart Institute. Dr. Nooman Wani, Dr. Ravi Gujju, Dr. Sibaji Phaujdar, ECG Technicians Mr. Nirmal Kumar Dwivedi, Mr. Pritam Singh and Lab technician Mr. Rashid Ahmad also participated in the camps.

Speaking on the occasion, Dr. O. P. Yadava said, "Although the government of Uttarakhand is taking steps to provide medical care facilities, but we still believe that many families in the region do not have access to new forms of treatment or do not have the financial resources to meet the hefty costs of surgery. With this initiative our mission is to take tertiary care services to the people of the remotest parts of the hill state of Uttarakhand."

Dr. O. P. Yadava also emphasized on the major risk factors for "development of Coronary artery disease and high blood pressure which are highly prevalent in low to middle income groups in the hill

regions viz. Current inactive lifestyle of the people, intake of tobacco/smoking, alcohol, high intake of salt, which is the real cause of high blood pressure and excess consumption of saturated fats and oil. The primary need is to spread awareness about these risk factors which can be controlled to a large extent by changing lifestyle."

According to Mr. Mahipal Singh Pilkhwai, IT Consultant, National Heart Institute and Health Camp Coordinator, "besides meeting the immediate health need of the disadvantaged section of the society, we are aiming at reaching out to at least all Kumaon districts within 2 years time and expect to improve the health seeking behavior among the community. The uniqueness of the model lies in its comprehensive approach where health promotion and prevention are given equal importance, while curative care is administered.

Over 65 patients have undergone complex open heart surgeries at the National Heart Institute under the 'Vyadhi Nidhi' Program in which the hospital performs the surgery free of cost and only the cost of disposables is met by the Govt. of Uttarakhand."

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