

Palestinian boy has b'day, no cakewalk for surgeons

EXPRESS NEWS SERVICE

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THE board room in a city hospital was all decked up, the Palestinian and Indian flags decorated the wall along with famous Disney characters.

Dressed in a white kurta pajama, frail Sakier Awad, recuperating after his liver transplant surgery, made a 'politically correct gesture' by offering the first piece of his birthday cake to the Palestinian Ambassador present on the occasion.

Sakier, a Palestinian child, celebrated his sixth birthday today at the Indraprastha Apollo where he is undergoing treatment. The team of doctors who had conducted the operation had two reasons for celebration — it was the birthday of the child who had become the darling of the team during his three-month stay in the hospital and secondly the team was celebrating the success of a very risky surgery.

The child was successfully operated for Budd Chiari Syndrome, a very rare disease in which blood flow to the liver is stopped because of clotting in the blood vessels. "Owing to this, blood flows to other parts of the body resulting in dysfunctioning of the liver. We had to go for transplant from a live donor. In this case, it was the

mother as her anatomy suited that of the child," says Dr Anupam Sibal, senior consultant, paediatric gastroenterology at Indraprastha Apollo.

Sakier's case was overtly complicated as he weighed just 10 kg when he came to the hospital. "After spending 18 months in various hospitals in Palestine, Israel and Jordan, he came to India. Every-

Sakier suffered from a rare disease in which blood flow to the liver stops. After hospitals in Israel and Jordan failed him, Saiker came here. His mother donated 30 pc of her liver for him and when he was cured the Palestinian Ambassador dropped in to wish him good health

body advised me against doing the transplant but I went ahead as his father told me he is prepared to go for a surgery no matter what the results are," says Dr M.R. Rajasekar, senior consultant, transplant

Surgery at the hospital.

After increasing Sakier's weight by about five kg, the doctors performed the surgery two weeks ago. "The surgery was very complicated as his skin was thin we were worried that he should not get a back sore. So we made a bed of inflated condoms and rushed hot air under it," says Dr Sibal.

The doctors were all praises for the commitment shown by the parents. Saiker's father Mohd Salh Awad, a motor mechanic in Hebron, got monetary help from his friends and relatives back home to raise the required Rs 18 lakh for the surgery. Awad refused to take food for five days and munched something only after his son and wife were fed after the surgery.

"I was very anxious as Awad told me that he will see his son only after he begins to walk. He would just sit and pray all the day," says Dr Rajasekar.

The couple who have left their three children with their aging mother are worried after the recent bombing in Hebron. "I have spoken to my children twice in all these months," says Sakier's mother Marium, who is also recovering from the surgery. However, watching her son recover from the long illness is gratifying for her, even if it has cost her 30 per cent of her own liver.



Dr. Sibbal speaks about liver ailment among children



DEHRADUN, July 02: Dr. Anupam Sibbal, senior consultant and child specialist of Apollo Hospital addressing mediapersons here said that as many as 4 lakhs children suffer from serious liver diseases in our country. Every year 15000 babies are born with life threatening liver ailments and 200 children die for want of a liver transplant. India has 4 crore carriers of Hepatitis B and 2 crore carriers of Hepatitis C yet, Hepatitis B vaccination is not provided under the Universal Immunization Programme, and testing of blood for Hepatitis C before blood transfusion is not mandatory by law. While significant medical progress has been made (including establishment of a liver transplant service in New Delhi), unfortunately there is no support organization for children with liver disorders. It is with this objective in mind the CLASP has been set up, in association with Children's Liver Disease Foundation, UK.

The aim of CLASP which means Children's Liver Disease Awareness and Support Programme is to undertake and promote medical and scientific research relating to pediatric liver disorders, to set up guidelines

of common liver disease through expert panels, to advance public education and awareness of pediatric liver disease-their causes, prevention, diagnosis and treatment to organize a "Liver Day" which would allow children with liver disease to interact with other such children and their families thereby providing a forum their triumphs, sorrows and problems, to motivate the government to adopt legislation that would prevent spread of liver diseases in children such as immunization against Hepatitis B and screening of blood for Hepatitis C.

Dr Sibbal said ninety percent of normal babies have slight jaundice after birth. A slightly yellow baby in the first few weeks of life has been accepted by many observers as a sign of little importance. This is a dangerous state of affairs for few babies in whom this slight jaundice is the earliest sign of a serious disease and the success of treatment depends upon early diagnosis. Failure of early diagnosis among these babies endangers life and leads to prolonged hazardous and stressful treatment.

As many as 90% of healthy babies become jaundiced on 2nd, 3rd or 4th day of life. It is referred to as physiological jaundice.

There is jaundice in healthy babies who are on breast feeding, the urine does not contain the bilirubin pigment. Breast fed babies can have other causes of jaundice, including liver disease.

Dr Sibbal said to control all these things a Yellow Alert

'Timely treatment can help cure children affected by liver disease

■ By Rajendra Diwe

TIMELY treatment of over 100 different types of liver diseases can help cure children affected by it, said Dr. Anupam Sibal, Senior Consultant Paediatric Gastroenterologist and Hepatologist, Indraprastha Apollo Hospital, New Delhi. Dr. Sibal was in city to deliver lecture on liver diseases organised by Indian Paediatric Association, Nagpur Chapter at Hotel Sunny International on Sunday.

A pioneer of Liver Transplantation Department of Apollo Hospital, Dr. Sibal informed that liver transplantation operations is possible in India only at Indraprastha Apollo Hospital, New Delhi. The first operation was done in 1998 and till date about 31 operations were done.

Talking to *The Hitavada* Dr. Sibal said that Biliary Atresia is a situation where no relation between liver and intestine is observed. This is a condition in which inflammation develops within the bile ducts during the time of birth. This condition leads to damage of bile duct and reduces the flow of bile which subsequently causes scarring

(fibrosis) of the liver. The bile ducts outside the liver are always irreversibly damaged preventing flow of bile in gut. It also affects the gall bladder, the cause of which is still unknown. Dr. Sibal informed that jaundice beyond two weeks along with pale stools is the only features which is present early on. 'Jaundice continues to deepen, stools become paler, the appetite decreases and the weight gain becomes unsatisfactory with time.' A number of investigations, which includes blood tests, scans and liver biopsy, are needed before the start of medicines.

Also a pioneer of Yellow Alert, a national awareness campaign on liver diseases, Dr. Sibal said that the purpose of this campaign is to draw attention to liver disease in babies and to promote early referral. "As many as 90 per cent healthy babies get affected with jaundice on the 2nd, 3rd or 4th day after birth. If a baby is born after full term of nine-month then the jaundice clears up in the 7th day. In case of prematurely born babies, jaundice usually clears up by 14th day. If the jaundice persists for more than 14 days then it gets aggravated following infection, blood disorders causing destruction of red blood

cells or other illnesses. In such situation the only alternative remains is liver transplantation. When asked about the prevention methods available, Dr. Sibal said that a golden rule has to be followed that is if a baby is jaundiced two weeks after born, then a urine and blood tests is needed to be done. He also emphasised on the vaccinations. More than

which is nothing for preventing them, he explained. About the forceful vaccination programmes carried-out by the multinational companies for Hepatitis-B, Dr. Sibal said that the commercialisation in this case should be avoided. The vaccines should be supplied by the Government free of cost to the children. There are 25,000 children taking birth every day in India. If the Central Government following WHO recommendations includes vaccination on national immunisation programme then we could to some extent prevent children from this disease, he added. Expressing concern-over total cost needed for liver transplantation, Dr. Sibal said it is due to this that more than 60,000 people die of this diseases in India.

On the side effects registered in foreign countries due to Hepatitis-B vaccination, Dr. Sibal said the side effects are negligible as compared to benefits. Of the 4 crore patients of liver diseases found in India 60-80 per cent cases are of Hepatitis-B. Every year more than two lakh babies are getting affected due to Hepatitis-B. After primary infection it gets 10 to 20 years to ripe the infection which leads to liver cirrhosis or hepatic fail-

ure. In this situation vaccination prevented the babies from getting added.

When asked about the state-of-the-art techniques of Hepatitis-B vaccine ability of anti-biotic for the active vaccine, Dr. Sibal said that the vaccine is available in standardised form no necessity of developing anti-biotic. The three doses of Hepatitis-B vaccine are sufficient to prevent an individual infection.

Dr. Sibal said that through Liver Disease Awareness and Programme (CLASP) which is a Sri Ram Washeshran Devi Bhatia Charitable Trust in collaboration with Children's liver Disease Foundation, Yellow Alert will create a national public figures like Kapil De Khanna, Sunil Shetty etc. will be in this project, he said.

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120 countries all over the world are following the vaccination programme. Though World Health Organisation has instructed that the Hepatitis vaccines should be on the National Immunisation Agenda of the country, Indian Government has not taken up the Hepatitis vaccination on the National Agenda. Terming liver disease as a silent killer, Dr. Sibal stressed the need of Hepatitis vaccination. Informing that over 4 crore people in India is affected from liver disease, Dr. Sibal said that there is no treatment available in case of liver failure. 'Other organs could be repaired except liver. The doses of vaccine costs Rs. 100 for children

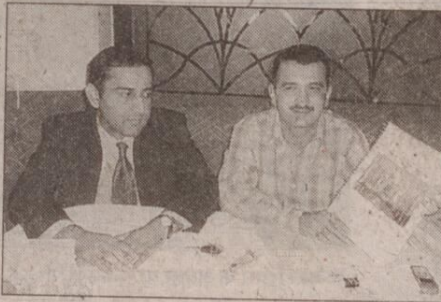
नेत्र-गुर्दे की तरह लिवर प्रत्यारोपण भी

■ हेपेटाइटिस जैसी भयंकर बीमारी से हालात खतरनाक: डा. सिब्बल

नगर प्रतिनिधि, आगरा

जन्म के समय से ही असर दिखाने वाले पीलिया का इलाज नहीं करया गया तो यह बीमारी जिंदगी और मौत का कारण भी बन सकता है। रोगी के ब्लडग्रुप वाले दूसरे इंसान का लिवर प्रत्यारोपित कर चिकित्सकों ने रोगी की जान बचाने में कामयाबी पा ली है।

आंखें पीली हों, पेशाब का रंग पीला हो, शौच सफेद रंग लिये हो तो समझ लो कि पीलिया है। यह हेपेटाइटिस ए और बी स्थिति होती है। लापरवाही के कारण यही हेपेटाइटिस सी और ई तक पहुंच जाती है। जो जानलेवा भी हो सकती है। अपोलो हॉस्पिटल के बाल रोग विशेषज्ञ डा. अनुपम सिब्बल का कहना है कि ये बीमारी सीधे-सीधे लिवर पर असर डालती है। वे यहां पर बाल रोग विशेषज्ञों की कॉन्फ्रेंस में भाग लेने आये हैं। शनिवार को उन्होंने बातचीत में कहा कि जन्म लेने के दो सप्ताह तक अगर शिशु की पीलिया सही न हो तो तुरंत ही डॉक्टर



को दिखाना चाहिये। लिवर प्रत्यारोपण की बाबत उन्होंने बताया कि जिस व्यक्ति का लिवर लिया जाता है, उसके लिवर पर कोई फर्क नहीं पड़ता है। क्योंकि लिवर आठ हिस्सों में बंट होता है। दो से 10 सप्ताह के बीच देने वाले का लिवर स्वतः ही पूर्ववत स्थिति में आ जाता है। वे अब तक 25 सफल आपरेशन कर चुके हैं। इस बारे में आगरा-मथुरा रोड पर करीब चार बीघा जमीन पर 200 शैथ्याओं का हॉस्पिटल तैयार कराया जायेगा। निर्माण कार्य अगले माह के प्रथम सप्ताह में शुरू हो जायेगा। इसमें 22 करोड़ रुपये भवन और 13 करोड़ रुपये उपकरण आदि पर खर्च होंगे। योजना जनवरी 05 में इलाज शुरू करने की है। डा. महेंद्र ने बताया कि सभी तरह की क्लीनिकल और सर्जरी की सुविधाओं से युक्त इस अस्पताल में इलाज का स्तर पूर्णतः अपोलो हॉस्पिटल जैसा होगा।

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