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Exclusive Interview with Dr. Anupam Sibal

“Four crore Indians carry hepatitis-B virus”

SPECIAL CORRESPONDENT

DEHRADUN: The liver unit of Apollo Hospital, Delhi is the only centre in the Indian subcontinent that conducts liver transplant operations.

Dr. Anupam Sibal, Senior Consultant Paediatrician, Gastroenterologist and Hepatologist at Indraprastha Apollo Hospital disclosed in a talk with **Garhwal Post**, recently, that about 4 crore Indians carry the Hepatitis-B virus and 2 crore, the Hepatitis-C virus. Roughly about 1 lakh people in India, including children and adults, die for want of a liver transplant every year. As such, liver related ailments pose the greatest threat to the health of Indians, more than AIDS or any other disease.

Dr. Sibal said the common man normally associates liver disease with alcohol. But the actual fact is there are over a 100 kinds of liver diseases in children alone. There was great need, he said, to create awareness about liver diseases mainly because the treatment for a number of these diseases had changed and improved a lot over the years.

The liver centre at the hospital was established in the year 1998 after Dr. Sibal joined Apollo Hospital in the year 1997, on his return from England. He said the first successful liver transplant at the



Dr. Anupam Sibal, at 34 years of age, is the Senior Consultant Paediatrician Apollo Hospital. He did his MBBS from Maulana Azad Medical College, New Delhi and completed his MD from Lady Hardinge College, Delhi. Thereafter, he did fellowship from the University of Birmingham, England.

Dr. Sibal was instrumental in setting up the first liver transplant programme in India. He is the Asian representative on the 8 member International Working Group on Liver Transplantation for the World Congress of Paediatric

Gastroenterology held at Boston, USA. He has lectured extensively in Europe, Australia, South Asia and the Indian subcontinent. He is also the member of the Executive Council of the Commonwealth Paediatric Gastroenterology Association.

A regular commentator on health issues in the print and electronic media, he has compered 200 programmes on TV. His parents are settled in Rajpur, Dehradun.

centre was done in 1988. Since then, the number of transplants conducted at the centre had reached 32, which includes 4 foreigners. Of these, 24 have been successful. This rate of success was as good as in any hospital in the world.

According to Sibal, the treatment at the centre was comparable to the best such centres in the world. Also, the centre was exemplary in that the type of transplants done are being done in only about a dozen centres around the world and none other between Israel and Singapore.

The Liver, the doctor said, was

an amazing organ because it regenerates. As such, only a portion of the donor's liver is used for the transplant. Before the centre was set up, the only option for patients in India in need of a transplant was either to go abroad or to die, he added.

But despite this, the centre can only cater to the transplant needs of a limited number of patients, taking into consideration the large number that suffer from liver diseases and its disastrous effects. It was in realisation of this fact that it was decided to also focus on spreading awareness regarding the preventive aspects of liver diseases.

It was in pursuance of this fact that the foundation, CLASP (Children's Liver Disease Awareness and Support Programme) was established in collaboration with a United Kingdom foundation. CLASP functions by trying to motivate governments to initiate programmes for vaccination against Hepatitis-B. The foundation has been successful in motivating the Delhi government. It will provide free Hepatitis-B injections for all babies born in Delhi. The Government of India has also initiated the programme in a few select districts on a pilot basis.

Another awareness programme taken up by the foundation is against ignoring jaundice in babies. For this the foundation has started a campaign 'Yellow Alert'. Any newborn baby suffering from jaundice, for more than two weeks after birth, should be taken to a doctor otherwise it could lead to serious problems.

Dr. Sibal said that Kapil Dev, Sunil Shetty, Vinod Khanna and Rani Jethmalani are helping out in this campaign. The doctors have distributed 12,000 booklets on this to paediatricians across the country. Dr. Sibal said another important aspect regarding prevention of liver diseases was the need for blood banks to screen for Hepatitis-C infections.

Viral Hepatitis: Prevention is better than (no) cure

The term "hepatitis" means inflammation of the liver. Viral hepatitis is inflammation caused by a virus. Viral hepatitis infections are among the most infectious diseases in the world and are a serious health problem. Hepatitis viruses are categorised into types A to E.

In general, all hepatitis viruses attack the liver, destroy liver cells and disrupt liver function. While hepatitis A and E produce acute illness, hepatitis B, C and D could cause chronic infection and are responsible for severe morbidity and mortality worldwide. Regardless of the exact type of virus involved, many of the clinical signs and symptoms of acute hepatitis infections are the same.

These are fever, dark coloured urine, a bloated stomach that hurts, loss of appetite, extreme tiredness, yellow tinged skin and eyes (jaundice).

Hepatitis A:

This is the commonest type of viral hepatitis seen in India. It is a highly contagious disease which, in some cases, could cause serious illness.

Hepatitis A is mainly spread through fecal contamination and then hand-to-mouth contact. Direct contact with an infected person's feces or indirect contact (due to contamination of food, water, hands or cooking utensils) may result in the virus being ingested, causing infection.

The severity of a hepatitis A infection is usually age-related. Hepatitis A infections usually lead to benign symptoms in infants. With increase in age, the severity of the symptoms also increases.

Acute symptoms of hepatitis A last from four weeks to three months and may be debilitating, requiring complete rest and occasional hospitalisation.

A paradox presented in this disease is shifting of the risk of infection to higher age groups, usually accompanied by improvement in living standards. Normally, one infection by the hepatitis A virus builds an immune response towards it, giving protection against a second attack. With improved levels of sanitation and hygiene, it is seen that more and more individuals pass through childhood without contracting the disease, thus rendering themselves more at risk during adolescence and adulthood.

Treatment includes supportive therapy in the form of nutritional supplementation and symptomatic treatment (where you treat symptoms like high fever).

Prevention can be achieved by maintaining high levels of hygiene and avoiding eating or drinking in unsafe areas. Hepatitis A is now preventable by vaccination. A single dose of the vaccine gives protection for a year, and a booster administered after six months from the first injection provides protection for at least 20 years.

Hepatitis B:

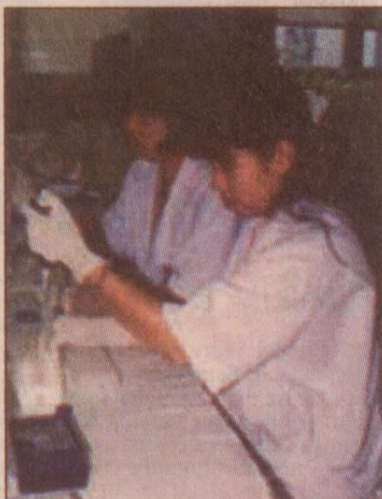
Four crore Indians carry the hep-

atitis B virus. Those infected could develop serious consequences — such as cirrhosis/liver cancer. Hepatitis B is at least a 100 times more infective than AIDS. It spreads like AIDS, is 10 times commoner than AIDS and 90 per cent of babies infected under the age of one year will become carriers, compared with six per cent of children older than seven years, and adults.

About two lakh babies are infected at birth every year. Complications could take 10 to 40 years to develop. It is therefore a silent killer. A safe, effective vaccine is available. Three doses are needed.

WHO recommended in 1992 that all countries should include the Hepatitis B vaccine in their national immunisation programmes by 1997. More than 90 countries have. India however has not.

Treatment is available but is expensive, prolonged and effective in only 50 per cent of cases.



Hepatitis C:

Two crore Indians carry the virus. Eighty per cent of those infected become carriers. About half the carriers will suffer from consequence such as cirrhosis/liver cancer. Hepatitis C spreads like AIDS. There is no vaccine against the virus. The only method of prevention therefore is avoiding contact with the virus.

Hepatitis D:

Hepatitis D needs the hepatitis B virus for survival. Therefore, if hepatitis B infection is prevented, hepatitis D does not develop.

Hepatitis E:

It is generally thought to be transmitted through food and water contamination (as in the case of hepatitis A). The clinical manifestations of hepatitis E are also similar to that of hepatitis A, but generally more severe. Hepatitis E normally produces acute disease.

At present, no vaccine is available and prevention is possible only through proper hygiene and sanitation.

—Dr Anupam Sibal, Senior
Pediatric Gastroenterologist,
Apollo Hospital

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TUESDAY DECEMBER 24, 2002

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The Indian EXPRESS

EXPRESS Newslines

Hepatitis E: Affluent are most at risk

NEW DELHI

TOUFIQ RASHID
NEW DELHI, JULY 17

**A family living in Golf Links, following proper hygiene, hardly exposed to contaminated food or water, suddenly develops symptoms of acute hepatitis. Doctors link the infection to consumption of some contaminated food or water in a marriage party in Saharanpur.*

**A teenaged boy from Greater Kailash was admitted to a hospital after testing positive for Hepatitis E, an acute liver disease. Almost a month later, his father shows the same symptoms.*

These cases of Hepatitis A and E are not unusual, but the common factor in them is that the affluent have contracted the water-borne virus in adulthood.

Experts warn that the disease, which was till recently associated with the lower strata of society only, now puts the affluent more at risk. What is alarming is that the disease can have severe manifestation like acute liver failure, if contracted in adulthood.

"Studies have shown that as the socio-economic status improves, the age of contracting Hepatitis A and

E is likely to increase. This is because affluent people are overcautious and take steps to ensure that their children are not exposed to contaminated food or water. Therefore, they are more likely to catch the disease in adulthood," says Dr Anil Arora, consultant gastroenterologist at Sir Ganga Ram Hospital.

Doctors say the risk factor arises due to lack of immunity in their body. "After early exposure to the virus, the body tends to develop a lifelong immunity which helps in adulthood," says Dr Anupam Sibal, senior con-

sultant, gastroenterology and hepatology, Indraprastha Apollo Hospitals.

Hepatitis-E is the second most common cause of acute liver failure. Of the 200 liver problem patients admitted in Sir Ganga Ram Hospital recently, 40 per cent had Hepatitis-E infection. Doctors warn that filtered water alone can't help and needs to be boiled. "Hepatitis-A has a vaccine which provides lifelong immunity for most, but Hepatitis-E doesn't have a vaccine. So precautions are needed," says Dr Arora.

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