

'Once it is lost, sight cannot be recovered'

Charity's cot death warning over sleep products

HEALTH

with
Dr Zak
Uddin



With World Glaucoma Week running from March 11 to 18, Dr Zak stresses the importance of regular eye checks

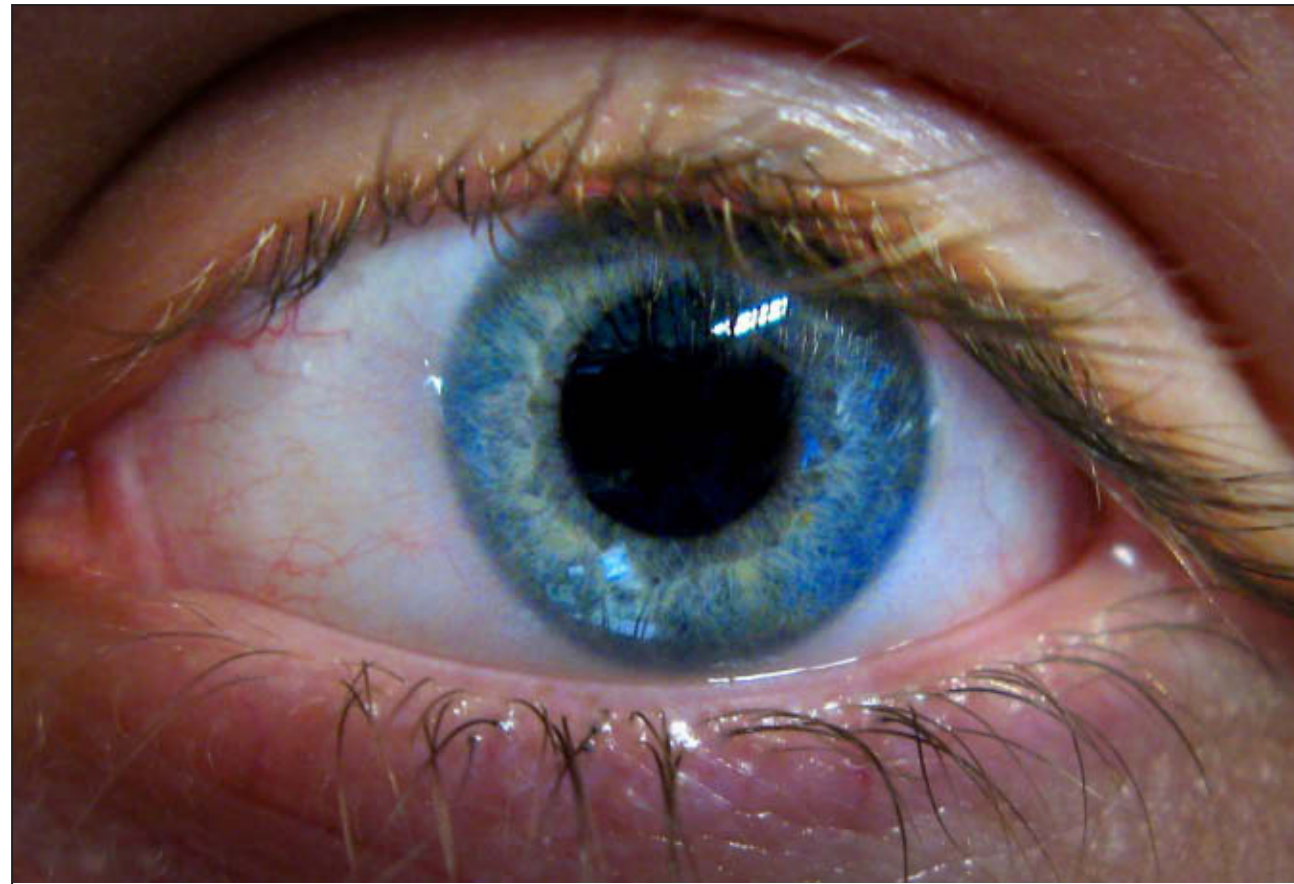
Of all the five senses, arguably your sight is the most important to independent living. However figures from a leading high street optician show that up to a third of individuals had not been for a routine vision test in the last two years, despite four fifths of those asked being aware that such a simple assessment could prevent sight loss.

Glaucoma is one of the leading causes of blindness worldwide, with an estimated two per cent of the UK population older than 40 having the disease.

The eye constantly produces a fluid which needs to drain away at a steady rate to maintain a healthy pressure in the eye. Blockage of drainage channels prevents this from happening.

The excess fluid causes increased pressure within the eye, with damage to the nerve at the back of the eye, known as the optic nerve. This is responsible for sending signals from the eye to the brain, which processes them into the images we see.

As blockage of the drainage



TEST: If you have not had a sight test for more than two years, Dr Zak advises booking one as a matter of priority, as early detection of glaucoma is crucial

Picture: JOHN STILLWELL/PA

channels often happens over several years, you may not initially notice any deterioration in your sight at all or there may be subtle changes, most often blurring of your peripheral vision. Most people are diagnosed in their 70s and 80s.

Acute glaucoma is a very different picture, and occurs when the drainage channels become obstructed suddenly and the pressure in the eye rises rapidly.

The hallmarks are an immediately painful, red eye and blurred vision.

Typically sufferers will be unwell with nausea, vomit-

ing and headache. This is a medical emergency and anyone with these symptoms must get themselves to the nearest Accident and Emergency or Eye Casualty Department immediately.

THERE isn't a cause as such for glaucoma, but we know that persons of Asian, African and Caribbean origin are at greater risk.

Similarly a family history of glaucoma, other sight problems, diabetes and high blood pressure also play a part in developing the disease.

Treatment for chronic glaucoma starts with eye drops to lower the pressure in the eye. If this is unsuccessful, laser treatment or surgery may be needed to open up the drainage tubes. The second two methods may also be needed for acute glaucoma.

However, with prevention better than cure, the take home message is to attend regular sight tests.

These last no more than an hour during which photographs of your optic nerves will be taken and your eyesight including peripheral vision tested.

In addition, the pressures

inside your eye will be measured. None of these procedures are painful and if you have a family history of glaucoma, you may qualify for this service free of charge.

Regular checks will not only detect glaucoma, but also other diseases which may not have any obvious symptoms at an early stage.

Timely recognition and treatment is important to maintain vision, as once it is lost, sight cannot be recovered.

If you haven't had a test in the last two years, please make this one of your priorities.

Health matters: Dr Zak answers your questions

Q Four weeks ago I had my gall bladder removed by keyhole surgery; I still have a lot of pain in my stomach and go from diarrhoea to constipation no happy medium.
Jack, 75

A Four weeks is still relatively early on following an operation. In terms of diarrhoea, the gallbladder stores bile acids which are then released to digest fats. If the gallbladder is removed, these acids drip directly from the liver into the intestine, and sometimes the

quantity is not large enough to digest fats, which pass straight through, resulting in diarrhoea. Although you have had keyhole surgery, cuts have been made inside so there will still be some pain from these. However I would emphasise that what you are experiencing appears to be normal and should hopefully settle down by around three months.

Q Since having my baby daughter five weeks ago, I've had pain in my right wrist. It's now in my left as well, and it's really

sore. I'm worried as my nana was diagnosed with rheumatoid arthritis after her last pregnancy.
Laura, 34

A What you are describing sounds like De Quervain's tenosynovitis, also known as "Mummy Thumb". It is caused by the tendons of the thumb rubbing against the tunnel in which they run, and is very common in new mothers, mostly due to constantly picking your baby up under their arms. You may want to try scooping the child up under

their bottom to put less pressure on your thumbs. If this does not help, a splint which immobilises the thumb may provide relief. Sometimes a steroid injection into the tendon is needed to reduce the inflammation. Your description sounds less like rheumatoid arthritis, but if this is a concern, it is worth discussing it with your GP.

If you have a question for Dr Zak, you can email him at askdoctorzak@gmail.com, see his website, doctorzak.co.uk

or find him on twitter @ AskDoctorZak.

Dr Uddin's advice is provided in good faith and in accordance with currently accepted evidence. However, this content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. You should always seek the advice of a GP, or other qualified health provider, regarding a medical condition.

By Jennifer Cockerell
Press Association

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A COT death charity has warned that some popular sleeping products could be putting babies at risk of sudden infant death syndrome (SIDS).

The Lullaby Trust said items such as cushioned sleeping pods, nests, cot bumpers, pillows, duvets and anything that wedges a baby in place do not conform to safer sleep guidelines and can pose a risk to infants under 12 months.

Evidence shows that sleeping a baby on anything but a firm, flat surface, or using soft, heavy bedding, can increase the risk of SIDS.

Such items can lead to overheating or potentially obstruct a baby's airway if they roll over, or their face becomes covered by loose bedding.

The charity warned that many of these products are created by trusted brands, with some manufacturers making inaccurate claims about their safety.

As there are no safety standards that relate to SIDS, it said it is very difficult for parents to know which products are safe for their baby.

Confusion around product safety was highlighted by a recent survey it commissioned, which found two out of five (41 per cent) new parents have bought or are planning to buy a baby sleep nest or pod. As part of Safer Sleep Week, the charity has issued guidance supported by Public Health England (PHE) to help new and expectant parents make safer choices when deciding on sleeping products for their baby.

The charity's chief executive, Francine Bates, said: "As a SIDS charity, we have watched with concern as products that go against safer sleep advice gain popularity."

"It is hard for parents when they are trying to choose from the overwhelming number of baby products on offer and many people make the reasonable assumption that if an item is sold on the high street or made by a recognised brand it is safe for their baby. When choosing sleep items for a baby there are actually just a few key essentials parents need and it isn't necessary to spend a fortune on lots of products or choose more expensive brands."

Professor Viv Bennett, director of nursing at PHE, said: "Ensuring parents have the correct information to keep their baby safe is crucial."