

MEDITIME

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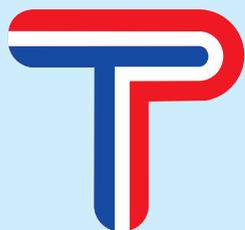


Know Your Bones

Touching Lives, Delivering Promises

Happy
2021
New Year

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MEDITIME

A Medical Bulletin from TIME Pharmaceuticals (P.) Ltd.

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Editorial



As the sequel of movie, CORONA RETURNS is in the door step. It is already having its super-shows in major cities of India with daily above 2 Lakhs positive cases and almost 1500 deaths (till report of April 17, 2021). No doubt, this sequel has released and will be house full in Nepal if we stop following the basic preventive measures which had been followed during the beginning of the Corona time. The new mutants had been reported in Nepal also. So, in this case, we need to learn from our past experiences and implement the precautionary measures presently to prevent from spreading the disease.

The arrival of safe & effective COVID-19 vaccines is a major development in the Coronavirus pandemic. An effective COVID-19 vaccine will help protect people who come in contact with the virus from becoming infected. Nepal began vaccinations in January 2021 after receiving first lot from Astrazeneca/Oxford Vaccine from neighboring India, which was mainly focused to health and security workers as the first phase. Similarly, the second phase targeted those who are most vulnerable to developing severe illness from COVID including elderly and people with comorbidities. Similarly, vaccines from China also helped to resume the vaccination campaign. Vaccines triggers the immune system to start making antibodies and prepares to attack against viral infection. Till date, 1.7 million people are benefited from the vaccine. Thus, the vaccination as well as the SMS (S-Social distancing, M-Mask use, S-Sanitize hands) campaign should be carried out simultaneously to defeat the CORONA RETURNS. Though the active cases and death rate is low in South Asia (except Bhutan), the Citizens should not treat as "There is no COVID", otherwise it is likely to take a serious toll in Nepal causing difficulty to handle with our existing healthcare facility.

TIME Pharmaceuticals salute the tireless effort shown by our health care professionals in this 1 year period for caring patients amidst COVID. We, being the part of society, tried to maintain the supply chain from our end in spite of economic turbulences.

The previous and this issue of MEDITIME is primarily focused in COVID. In this issue, we are supported with the articles related to COVID as well as orthopedics which are the issues of the current society. We feel honored to share the information from our valued doctors with our readers. I thank fully acknowledge all medical fraternities for your continuous support for MEDITIME, and wish similar support with valuable feedback and suggestion for improvement in it.

Lastly, I take this opportunity to wish Happy New Year 2078. May this new year bring lots of joy, happiness, good health and safety.

With Best Regards,


Sudarshan Lal Shrestha
Editor in Chief

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Nepal braces for new wave with vaccine drive

Nepal is one of the first country in the region to start a mass COVID-19 vaccination drive. But the first phase saw a moderate turnout with only half of the doctors, nurses, FCHVs, security personnel and cleaners prioritized by the government inoculating themselves because of the safety concerns and inaccessibility. This forced the Health Ministry to expand the first phase to also include civil servants, diplomats, bankers and journalists so that it could use up the 1 million doses of COVISHIELD vaccines donated by India. On March 7, country inoculates people above 55 years of age with the vaccines. On April 7, Nepal has also inoculated Chinese vaccine after the Chinese government donated COVID-19 vaccines with a batch of vaccines giving a major boost for Nepal to continue its vaccination campaign against the pandemic.



Vaccine is made from a weakened version of a common cold virus (known as an adenovirus) from chimpanzees. The vaccine, once injected into a person, prompts the immune system to start making antibodies and prepares it to attack any coronavirus infection, as the common cold virus has been modified to look more like a coronavirus. It, however, cannot cause illness.

Assisting in fight against COVID-19 pandemic, one lakh doses of vaccine for Nepal Army being provided by Indian Army had arrived in Kathmandu on March 29. Country is all set to launch the second phase of the inoculation drive. The government plans to vaccinate 72% of its population aged 15 years and above.

Even as Nepal completes the first phase of its COVID vaccine drive to inoculate frontline health workers and other high-risk groups, new hyper-spreading variants of the coronavirus as well as vaccine denial have raised concerns about the efficacy of the campaign. Public health experts, however, say the government must continue its vaccination to reach as many vulnerable people as possible with a better communication strategy and more aggressive promotion.

Reference: nepalitimes.com, kathmandupost.com, xinhuanet.com

Throwback: How COVID-19 has resulted in the increase of bone related problems

Bones provide structure to our body, act as a protective case for our organs and also help in storing calcium. There are a number of activities that affect your bone health.

The pandemic has hit all of us unexpectedly when we weren't even ready for anything of this sort. The nationwide lockdown was announced and all schools, college, offices and everything else were shut down for almost a year. This resulted in a lot of health-related issues. Let's see how it affected our bone health.



Factors that led to increased bone problems during the pandemic:

No physical activity : Because of the curfews and lockdown period, people could not step out of their homes and go to the gym for regular workouts. Nobody could go out for morning or evening walks. This made all of us couch potato. People started experiencing bone related problems and severe pain in their joints because of no mobility.

Vitamin D deficiency : The main source of vitamin D is sun. Nobody was allowed to step out of their houses which resulted in vitamin D deficiency. To get rid of this deficiency, we must sit in the sun for at least 30 minutes so that our body easily absorbs all the vitamin D. Vitamin D deficiency causes many bone diseases like osteoporosis which can be extremely troublesome.

Sudden weight gain : Many people, who were skinnier and maintained a healthy weight prior to the pandemic, gained weight suddenly due to lack of workout and imbalanced diet. This sudden increase in weight causes pressure on the bones and makes them weak. This way, their bones become prone to diseases and breakage.

The pandemic has affected us in many ways, but now is the time to recover from it and stay safe, stay healthy.

Reference: timesnownews.com

किन दुख्ख टाड?

कारण, लक्षण र उपचार

प्रा. डा. पशुपति चौधरी

बिपी कोइराला स्वास्थ्य विज्ञान प्रतिष्ठान
हाडजोर्नी विभाग प्रमुख



मेरुदण्डको संरचना (Vertebral Column)

मानव शरीरको मेरुदण्ड ३३ वटा हाडले बनेको हुन्छ र यो गर्धनदेखि कम्मरसम्म जान्छ । मेरुदण्डलाई भर्तिब्राईबाट बनेका ५ वटा खण्डमा विभाजित गर्न सकिन्छ। गर्धनको ७ वटा सर्भिकल भर्तिब्राई, १२ वटा थोरासिक भर्तिब्राई, ५ वटा लम्बर, ५ वटा स्याकरल र ४ वटा कक्सिजियल भर्तिब्राई । यी भर्तिब्राई लिगामेन्ट, मांसपेसी, फसेट जोर्ने र इन्टरभर्तिब्रल डिस्कहरूद्वारा एक आपसमा जोडिएका हुन्छन् ।

इन्टरभर्तिब्रल डिस्कहरूले मानव शरीरको मेरुदण्डको उचाइ बढाउन मद्दत गर्नुका साथै मेरुदण्डमा पर्ने बललाई कम गर्न वा तल फार्नका लागि कुशनको रूपमा काम गर्छ । मेरुदण्डले स्पाइनल कर्ड र स्पाइनल स्नायु जराहरूलाई आफूभित्र समावेश गर्नुका साथै संरक्षण गर्ने काम समेत गर्छ ।

स्पाइनल कर्ड स्नायुहरूको लामो पातलो र टुवुलर स्ट्रक्चर हो, जुन चाहिँ ब्रेन स्टिमको मेडुला ओबलोङगटाबाट सुरु भएर पहिलो लम्बर भर्तिब्रासम्म फैलिएको हुन्छ ।

टाडको दुखाइ

टाडको दुखाइ विशेषतः तल्लो भाग दुख्ने समस्या सर्वसाधारणमा हुने आम समस्या हो । लगभग ८०% वयस्कहरूले आफ्नो जीवनकालमा कम्तीमा एक पल्ट टाडको तल्लो भाग दुख्ने समस्याहरूको सामना गरिरहेको चिकित्साशास्त्र अध्ययनहरूले देखाउँछन् । अझ भन्नु पर्दा ४०-५० वर्ष उमेर पुगेका ९०% मा यो समस्या देखिन्छ । त्यसमध्ये ८०% बिरामीहरू १-३ महिनाभित्र सामान्य उपचार पद्धतिले निको हुन्छन् भने मात्र ५-१०% बिरामीलाई शल्यक्रिया आवश्यक हुन्छ ।

टाड दुख्दा हुने प्रभाव

१. कामबाट वन्चित हुनु
२. उर्वरतामा कमी हुनु
३. मानसिक रूपले उदासिनता उत्पन्न हुनु

टाड दुख्ने महत्वपूर्ण कारण

विशेषतः टाडको तल्लो भाग दुख्ने धेरै कारणहरू छन् तर तिनीहरूमध्ये महत्वपूर्ण कारण यसप्रकार रहेका छन्:

- शारीरिक रूपले गाह्रो काम गर्नु जस्तै: भारी उचाल्नु वा तान्नु
- लामो अवधीसम्म उभिएर काम गर्नु
- पिठ्युलाई बिराम नदिने कुर्सीमा लामो अवधीसम्म बस्नु
- शारीरिक रूपमा उदासिन हुनु
- मोटोपना
- धूम्रपान र रक्सी सेवन गर्नु
- नमिलेको खाटमा सुत्नु

टाडमा दुखाइको उत्पत्ति

१. मेरुदण्ड भित्र
 - हाड वा इन्टरभर्तिब्रल डिस्कबाट
 - स्नायुबाट
२. मेरुदण्ड बाहिर
 - आन्द्रा, भुँडी, शरीरका भित्री अंगहरू
 - रक्तका नशाबाट
 - मानसिक समस्या
 - गर्भावस्थामा

टाड दुखाइका कारण

- बालबालिका र युवाहरूमा बाङ्गिएको मेरुदण्ड
- कामको बढ्ता बोभ
- मेरुदण्ड चिप्लिनु
- मेरुदण्डको हड्डी सर्नु
- मेरुदण्डको हड्डी भाँच्चिनु
- हाड कमजोर हुनु
- मेरुदण्डको जोर्नी खिइएर जानु
- नशा च्यापिनु

टाड दुखाइका लक्षण

- टाडको मांसपेसीमा तनाव भई धेरै बेर एउटै आसनमा बस्न नसक्नु
- लामो समयसम्म उभिँदा वा बसिरहँदा टाडको मांसपेसी दुख्नु
- कम्मरको पछाडिको भाग, नितम्ब र खुट्टाहरू भ्रमभ्रम गर्नु
- लामो समयसम्म हिँड्न गाह्रो हुनु
- खुट्टा, नितम्बको वरिपरि अचेत हुनु, कमजोर वा पिडा हुनु
- छिटो थकाइ महसुस हुनु
- दिसा, पिसाब नियन्त्रण नहुने वा बन्द हुनु

टाडको दुखाइ कति बेला गम्भीर हुन्छ?

- टाडको दुखाइ खुट्टातिर सरेमा
- युवा अवस्थामा बिहान साह्रो दुखाइ भएमा
- खुट्टामा भ्रमभ्रम, लाटोपना भएमा
- खुट्टा निदाउने, बल नपुग्ने, दिसा-पिसाब रोकिने भएमा
- ज्वरो लागेमा

टाड दुखाइका जटिलता

टाड दुख्ने समस्याका सामान्यतया कुनै जटिलता हुँदैनन् । यद्यपि निम्नलिखित जटिलताहरू आउन सक्छन्:

१. इन्टरभर्तिब्रल डिस्क डिस्प्लेसमेन्टको कारणले स्पाइनल स्नायुहरू कम्प्रेसन हुँदा मांसपेसी कमजोर हुने दिसा वा पिसाबको नियन्त्रणमा कमी हुने, निरन्तर दुख्ने र अचेत हुने हुन सक्छ ।
२. वृद्ध उमेरको कारणले स्पाइनल स्टेनोसिस उमेर बढेसँगै इन्टरभर्तिब्रल डिस्क र भर्तिब्रल जोर्नीहरू खिइने कारणले स्पाइनल क्यानललाई साँघुरो बनाउँछ, जसले स्पाइनल स्नायुहरूमा प्रेसर दिन सक्छन् ।

ढाड दुखाइका अनुसन्धान

ढाड दुखाइको अनुसन्धान गर्न इन्टरभर्टिब्रल डिस्क, फासेट जोर्नीको खियावट, स्पाइनल क्यानलको चौडाइ, स्पाइनल कर्ड र स्पाइनल स्नायु एवं जराहरूको स्थिति मूल्यांकन गर्न एक्स-रे, एमआरआई र सिटी स्क्यान जस्ता परीक्षणहरूको आवश्यकता पर्छ ।

एक्स-रे गर्नु कुन बेला आवश्यक हुन्छ?

- चोटपछिको साह्रो दुखाइमा
- केहीगरी कम नभइरहेको वा बढ्दै गरेको दुखाइमा
- ५० वर्ष उमेर पुगेका वृद्धवृद्धा
- अत्याधिक व्याकुल बिरामीमा
- बाहिरबाट मेरुदण्ड बाङ्गिएको खण्डमा
- नशा च्यापिएको शंका भएमा
- चोटपछिको सामान्य दुखाइ २ साताभन्दा बढी रहिरहेमा

एमआरआई कति बेला आवश्यक?

- नशा च्यापिएको शंका भएमा
- क्यान्सरको शंका भएमा
- इन्फेक्सन भएमा

ढाड दुखाइको निदान विधि वा उपचार का पद्धतिहरू

ढाड दुख्ने समस्याको कारणको निदान वा उपचार बिरामीको चिकित्सा इतिहास, देखिने लक्षण एवं चिकित्सकीय शारीरिक जाँच परिणामको आधारमा गरिन्छ ।

ढाड दुख्ने समस्याको उपचार निम्न लिखित प्रक्रियागत अनुसार गर्न सकिन्छ:

- केही दिनको आराम गर्ने
- शारीरिक क्रियाकलापमा कमी
- कठोर परिश्रम एवं मिहिनेत गर्न मनाही
- शारीरिक चिकित्सा (Physiotherapy)
- दुखाइ कम गर्ने औषधी (खाने चक्की, मलम र सुई)
- शल्यक्रिया

ढाडको दुखाइको अध्ययन गर्ने अनुसन्धानकर्ताहरूका अनुसार ढाड दुखाइ भएको ठाउँमा चिसो राख्दा सन्धोको अनुभव हुन्छ । बरफका टुक्रा कपडामा

पोको पारेर विस्तारै दुखेको ठाउँमा ५-१० मिनेट राख्नुपर्छ। यसले मांसपेसीमा रहेको तनाव कम हुन्छ, यो एक दुई दिन गर्न सकिन्छ । त्यसपछि तातोपानीले सेक्दा राम्रो हुन्छ, यो तरिका अल्टरनेट पनि गर्न सकिन्छ ।

शारीरिक थेरापी

१. हिट थेरापी: मनतातो पानीले दिनको २ वा ३ पटक सेक्दा वा मेसिनको सेकाइले ढाडको मासुमा रक्त सञ्चार बढाएर आराम पुऱ्याउछ ।
२. कोल्ड थेरापी: चोट लागेको ठाउँमा चिसो बरफले सेकाइ गरेमा दुखाइ र सुन्निएको कम हुन्छ ।
३. ढाडको कसरत: नियमित रूपमा ढाडको कसरत गरेमा ढाडको मासु तन्किन्छ, मेरुदण्डको जोर्नीमा आराम हुन्छ, दुखाइ कम हुन्छ र च्यापिएको नशा जोगिने सम्भावना हुन्छ ।

शल्यक्रिया

विभिन्न लक्षण देखा परेमा, गम्भीर रूपमा स्नायु कम्प्रेसन भएमा, स्पाइनल अस्थिरता वा डिफर्मिटी भएमा शल्यक्रियाको आवश्यकता पर्न जान्छ । गम्भीर स्नायु कम्प्रेसनले मांसपेसी कमजोर बनाउँछ, निरन्तर खुट्टाहरू अचेत बनाउँछ, दिसा वा पिसाब थैलीको नियन्त्रणमा कमी आउँछ । शल्यक्रियाको सहायताले यसमा सुधार ल्याउन सकिन्छ । ५-१० प्रतिशत बिरामीमा मात्र शल्यक्रिया आवश्यक हुन्छ ।

सामान्य शल्यक्रिया

यो विधिमा मेरुदण्डको जोर्नीमा सुईको माध्यमले औषधी दिनुपर्ने हुन्छ ।

जटिल शल्यक्रिया

सामान्य उपचारले काम नगरेमा वा नशा च्यापिएर दिसा-पिसाब रोकिएमा वा खुट्टा लाटो हुँदा, जटिल शल्यक्रिया आवश्यक हुन जान्छ । खासगरी cauda equina syndrome एउटा अर्थोपेडिक इमर्जेन्सी हुँदा ६ घन्टाभित्र शल्यक्रिया नगरे आजीवन खुट्टा नचल्ने सम्भावना हुन्छ ।

ढाडको दुखाइबाट कसरी जोगिने र यसलाई गर्नुपर्ने स्याहार-सुसार:

धेरै दिन आराम गर्ने र सक्रिय नहुनाले ढाड दुख्ने समस्याबाट आराम हुन्छ भन्ने सोच गलत हो । तसर्थ : सम्भव भएसम्म छिटोभन्दा छिटो आफ्नो गतिविधिलाई पुनः सुरु गर्नुपर्छ ।

- शारीरिक र पेशागत थेरापीहरूबाहेक दैनिक क्रियाकलापमा सहभागी हुने
- स्पाइनको सही आसन कायम गर्ने
- एउटै आसनमा धेरैबेर नबस्ने
- घर वा बाथरूममा एउटै हातले भारी सामान नउठाउने
- कुर्सीमा बस्दा अडेस लगाएर सिधा बस्ने
- धेरै तनाव नलिने
- निहुरेर धेरै काम नगर्ने वा भारी वजन शरीरभन्दा धेरै टाढा राखेर नउठाउने
- काम गर्दा वा दैनिक क्रियाकलापहरूमा उपयुक्त आसन बनाउने
- आत्मविश्वास सिर्जना गर्ने
- जागिरमा असन्तुष्टी एवं गाह्रो भएमा जागिर परिवर्तन गर्ने
- नियमित व्यायाम गर्ने
- सन्तुलित आहार भएको खाना खाने
- लामो समयसम्म कठोर आसन वा सामान आसनमा काम नगर्ने

चिकित्सकको सल्लाह कति बेला लिने ?

ढाडको दुखाइ सामान्यतया छोटो हुन्छ र घरेलु उपचार र चिकित्सकको सल्लाह बमोजिम दुखाइ कम गर्ने औषधी खाँदा निको हुन्छ । तर निम्न लिखित अवस्थामा चिकित्सकीय सल्लाह लिन जरूरी हुन्छ :

- दैनिक जीवनका क्रियाकलाप नै गर्न नसकिने गरी ढाड दुखेमा
- ढाडको दुखाइ बढ्दै गएमा
- औषधी खाँदा समेत निको नभएमा
- आराम गर्दा वा उत्तानो पर्दा पनि दुखेमा
- खुट्टामा भ्रमभ्रम वा कमजोरी भएमा वा हिँड्दा गाह्रो भएमा
- दिसा वा पिसाबको नियन्त्रण नभएमा
- ढाड दुखेसँगै ज्वरो आएमा ।

SARS-CoV-2 Pandemic: Effect on Orthopedic Services & Academics

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Corona viruses (CoVs) commonly cause relatively mild respiratory illness in humans and animals. However, within two decades, mankind experienced three highly pathogenic and deadly human corona virus infections, SARS-CoV (2002), MERS-CoV (2012) and SARS-CoV-2 (2019). Compared to mortality rate of SARS-CoV (> 10%) and MERS-CoV (35%), SARS-Cov-2 has a lower mortality rate but is more contagious. Current pandemicity of SARS-CoV-2, later named as COVID-19 by WHO in February 2020, has infected about 132 million and caused more than 2.9 million deaths in more than 200 countries, and about 280 thousands are infected and more than three thousands died till date in Nepal. After a period of low incidence for about three months its number is increasing as a second wave. And its number is expected to escalate in another 2-3 months, challenging health systems. Europe, USA, Brazil, even India is experiencing third wave of the infection with new strains.

Wild bat is the natural host of Corona viruses, and civet, camel and pangolin are said to be the intermediate hosts for spread of SARS-CoV, MERS-CoV and SARS-CoV-2 respectively in which some mutation or recombination of viral gene takes place. SARS-CoV-2 virus particle phylogenetically belongs to genera Betacoronavirus (capsulated RNA virus with core nucleocapsid). The spike (S) protein in the capsule binds to ACE2 (Angiotensin Converting Enzyme-2) receptor (abundant in lung and cardiac tissue) of the host cell allows it to enter and infect cells where it replicates and affect new cells. L strain of COVID-19 virus is aggressive and spreads rapidly; while the S type might remain milder. Clinical spectrum can be: asymptomatic (1.2%); mild to medium cases (80.9%); severe cases (13.8%); critical case (4.7%); and death (2.3%). Children under 10 years have more asymptomatic infection (15.8%).

COVID-19 patients are the source of infection, and the virus is transmitted mostly through respiratory droplets and direct contact. At this stage of community transmission, theoretically, all individuals are at risk of infection. However, major risk factors are old age, male and co-morbidities. The diagnosis is based on sign and symptoms with high index of suspicion. The chest x-ray or chest CT can show features of pneumonia. However, all COVID-19 cases do not develop pneumonia and all pneumonia is not caused by it. Laboratory blood tests and Potential biomarkers level, Serological tests (Serum IgM and IgG antibody), antigen test and nucleic

acid test (RT-PCR and CRISPR) are helpful for diagnosis and monitoring of the disease. Unfortunately, none of the test has 100% sensitivity, thus diagnosis can be more accurate on adjunct of the serological tests to nucleic acid test.

According to WHO interim guidance, clinically COVID-19 cases can be: 1. Moderate (mild symptoms including fever, cough, headache, or soreness from cough but no pain), 2. Severe (inflammation of lungs, extreme breathlessness, pain in the chest, fast heartbeat, or unwell appearance and low blood pressure), and 3. Critical cases (features of Acute Respiratory Distress Syndrome (ARDS). Cardiovascular, renal, and neurological complications may also occur in COVID. Disseminated intravascular coagulation (DIC) is a grave complication causing multi-system failure. Leaked blood through endothelial lesion in lungs vessels triggers generalized inflammation and fuels cytokine storm. Children may develop Paediatric Inflammatory Multisystem Syndrome (PIMS). Though too early to comment on long term effect of COVID-19 infection fatigue, dyspnoea and decreased quality of life are the most common persistent symptoms (long COVID).

There is no treatment approved for COVID-19 till date. Therefore, the treatment strategy is supportive care only. However, several virus-based and host-based treatments have been introduced to manage severe ARDS. Asymptomatic or mild cases can be treated at home provided the infrastructure and clinical monitoring facilities are adequate. If not they should be treated in isolation to break the chain of transmission. Moderately sick cases need hospital treatment with Oxygen therapy (low to high flow) in prone and Antiviral treatment. Chloroquine competes for the ACE receptors of host cells and inactivates virus by decreasing acidity in cell endosomes. However, risk of dysrhythmias has limited its use. Treatment of severe and critically ill cases need intensive care and the aim is to provide supportive treatment, active prevention and treatment of complications, management of chronic medical diseases, and prevention of secondary infections and to support multiple organ functions. Convalescent plasma transfusion reduces the viral load. Plasmapheresis, IL6 inhibitor and immunomodulator (Tocilizumab) is used in case of cytokine storm. Corticosteroid use should be limited to specific co-morbidities and during respiratory distress. Antibiotics are given to treat existing infection or to prevent secondary infection; however unnecessary or inappropriate use should be

avoided. Psychotherapy for patients who develop high level of anxiety is very useful.

A vaccine which is safe and effective should be made available globally to return to the pre-pandemic normalcy. Transmission - mitigation strategies (physical/social distancing, frequent hand wash and use of proper mask) implemented in most countries has prevented most citizens from being infected during current pandemic time. However, epidemiologically this will paradoxically leave a large un-immune population susceptible to additional waves of SARS-CoV-2 infection. Development of corona virus vaccines is historically not easy. Further, there is a concern that vaccination, as with natural corona viral infection, may not induce long lived immunity. In corona virus, S protein elicits neutralizing antibody and is a major target antigen for vaccine development. Laboratories in different countries have come up with various types of vaccines and, it is available globally. Despite of apprehension of side effects of the vaccine many countries have given to their people fixing a priority. Hopefully, by the end of 2021 most of the people will be vaccinated against COVID-19.

Socioeconomic impact of current COVID-19 pandemic is extremely dreadful. Unavailability of specific medical treatment and the fast spread of information /misinformation about the ongoing pandemic have created an annoying infodemic and that causes unnecessary worldwide panic. Unprecedented physical and social distancing, quarantine and border closing measures has caused sudden and profound economic hardship, with marked decrease in global trade and local small business activity. If the same situation persists, full ramifications may be more

painful. Orthopaedic academics and services are badly affected by COVID-19 pandemic. It has changed the clinical discourse of patients in every medical discipline. Fear of transmission has limited hospital visits of sick people; patient's care is compromised by social distancing. Persistent use of protective measures like PPE by health personnel has made them early tired and fatigue. Unprecedented use of resources in COVID patient care and increasing trend of health personnel being infected has created severe depletion in hospital resources and manpower. In such situation many non-COVID and elective cases have been compelled not to seek medical services. Thus, they present in advanced stage of the disease. During this pandemic, orthopaedic departments have to calibrate and recalibrate operative services. Trauma, tumors and infections are put in top priority. Spinal conditions with neurology are considered as semi-urgent cases for operation. Avoidance of aerosol-generation procedures and involvement of less number of surgeons and proper use of protective measures might reduce the chances of disease transmission. Less number of patients and operation has limited clinical exposure and thesis work of residents. Bed side teaching and class room group teaching is being replaced by virtual classes. This might be an opportunity, in long run, to improve academic activities by hybridizing the web-based and live learning process.

With increasing understanding on the virus, epidemiology of infection and mitigation strategies spread of the disease can be slowed to flatten the curve. Global effort to explore preventive measures, possible therapies and proper management of socio-economic issues will eventually return the world to a "new normal."

के हो नयाँ म्युटेन्ट?

SINEX साथी जानकारी

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अन्य भाइरसजस्तै कोरोना भाइरस पनि एक व्यक्तिबाट अर्कोमा सर्दा केही परिवर्तन हुन्छ । यसरी परिवर्तन हुनुलाई 'म्युटेसन' भनिन्छ । म्युटेसन हुँदा भाइरसको स्वरूपमा ठूलो परिवर्तन भने हुँदैन र भाइरसको स्वभाव पनि परिवर्तन हुँदैन । यद्यपि केही म्युटेसनमा भने मानव कोषमा भाइरस प्रवेश गराउन सहयोगी भूमिका खेल्ने प्रोटीन बढ्छ, जसको कारण म्युटेन्ट भएको भाइरस बढी संक्रामक हुन्छ ।

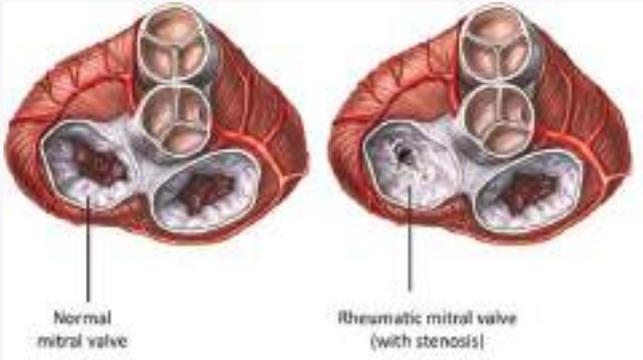
कोरोना भाइरसजस्ता भाइरसविरुद्धको खोपले हाम्रो शरीरमा एन्टिबडीको विकास गरी मानव कोषमा भाइरसलाई पस्न दिँदैन । यस्तोमा कोरोनाको नयाँ प्रकारले भने खोपको प्रभावकारिता कम गराउन सक्छ ।

के हो बाथ ज्वरो र यसबाट कसरी बच्ने ?



डा. सन्तोष भुषाल
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सामान्यतया: बाथ रोग भन्नाले जोर्नी दुख्ने रोग भनेर बुझ्न सकिन्छ, तर बाथ ज्वरो अर्थात मेडिकल भाषामा भन्नु पर्दा "Acute Rheumatic Fever" प्रायः बच्चाहरूमा देखिने मुटु, हाडजोर्नी र स्नायु प्रणाली सम्बन्धी रोगको समिश्रण हो । बच्चालाई घाँटी दुख्ने समस्या (Pharyngitis/Tonsillitis) को बेलामा उपचार नहुँदा वा अधुरो उपचार हुन गएमा यसको केही हप्तामा यो रोगको प्रभाव देखा पर्दछ ।



यस रोगमा विशेषत हातखुट्टाका टुला जोर्नी दुख्ने, अनियन्त्रित शारीरिक हलचल (Chorea: हेर्दा नाचेको जस्तो लाग्ने हलचल), रातो-रातो देखिने दाग आउनु, ज्वरो आउनु वा ज्वरो आएर निको भएको शरीरमा सानो डल्ला देखा पर्ने लक्षणहरू देखिने गर्दछन् । यस रोगको मुख्य असर भनेको मुटुको भल्भ खराब हुने (Rheumatic Heart Disease) भएको हुनाले समयमै रोगको सही पहिचान र उपचार हुन सकेमा दीर्घकालीन मुटुरोग बाट बच्न सकिने देखिन्छ ।



आजभोलि विभिन्न संघसस्था द्वारा विभिन्न विद्यालयमा Rheumatic Heart Disease स्क्रिनिंग कार्यक्रम संचालित

हुँदै आएको पाइन्छ र यस कार्यक्रमले यो रोगको पहिचान र उपचारमा निकै ठूलो भुमिका खेलेको हुन्छ । यस्तो खोजमुलक कार्यक्रमलाई राज्य स्तरबाटै सञ्चालन हुन सकेमा अझ सबल हुने आशा गर्न सकिन्छ ।



सबैजना अभिभावकले आ-आफ्नो बच्चालाई हुने घाँटी दुख्ने समस्याको उचित उपचार गर्ने र यदि माथि उल्लेखित समस्या देखिएमा तुरुन्तै विशेषज्ञको सेवा लिन सक्ने हो भने यस रोगबाट निश्चय रूपमा नै बच्न सकिने छ । यो रोग लागि सकेको अवस्थामा आवश्यकता अनुसार मुटुरोग/बाथ रोग/स्नायु अर्थात नशारोग विशेषज्ञको सल्लाह लिनुपर्दछ ।

GEL हैन EMULGEL रोजौ

THE EMULGEL TECHNOLOGY

Emulgel

Diclofenac

Lipid

Skin

EMULGEL का लाभहरू:

- छालामा जहिरो प्रवेशसँगै दुखाईको स्थानमा औषधीको वितरण बढ्ने
- विशेषजरी दुखाई नै हुने स्थानमा ज्यादा प्रवेश हुने
- औषधीका कणहरू स्थिर रहने
- सजिलै कलिनो र छालाबाट हटाउन सकिने

Salif EMULGEL

बाथरोग : युरिक एसिड मात्र बाथ रोग होइन

डा. सन्दिप अधिकारी

अर्थोपेडिक सर्जन, अरनिको हस्पिटल, उर्लाबारि



धेरै मानिसमा “युरिक एसिड” (Uric Acid) लाई मात्र बाथरोग हो भन्ने भ्रम छ । खासमा बाथरोग भन्नाले कुनै पनि जोर्नी (Joint) को समस्या बुझिन्छ । कुनै कारणले शरिरको कुनै पनि जोर्नीमा कुनै किसिमको प्रतिकूल अवस्था आउनु नै बाथ रोग हो । बाथरोग विभिन्न प्रकारका हुन्छन् । सय वटा भन्दा बढी प्रकार रहेको बाथमा युरिक एसिड (Uric Acid) बाथ एउटा प्रकार हो । सजिलोको लागि बाथरोगलाई मुलतः तीन प्रकारमा विभाजन गर्न सकिन्छ :

- १) हड्डी तथा जोर्नी खिइने बाथ ।
 - ◆ अस्टियोपोरोसिस (Osteoporosis)
 - ◆ अस्टियोआथाइटिस (Osteoarthritis)
- २) युरिक एसिड बाथ (Hyperuricemia Arthritis)
- ३) अटोइम्युन बाथ (Rheumatoid Arthritis/Lupus)

अस्टियोपोरोसिस (Osteoporosis)
पुरुषमा उमेर बढेर गए पछि र महिलामा महिनावरी सुकेपछि (post menopause) हड्डीको calcium र रेशा (collagen fibers) कम भएर देखिने रोग हो । यस किसिमको बाथ ढाडको मेरुदण्ड, हिप जोर्नी र नाडीको जोर्नीमा बढी देखिन्छ । हड्डी कमजोर हुने अवस्था भएकोले सानो भन्दा सानो चोटमा पनि हड्डी भाँच्चिने सम्भावना हुन्छ ।

अस्टियोआथाइटिस (Osteoarthritis)
भनेको जोर्नीहरूको कुरकुरे हड्डी (cartilage) खिइएर नष्ट हुँदा देखिन्छ । यस बाथले ज्यादा घुँडा, गर्दन, मेरुदण्ड, हातका औंलाहरू आदि जोर्नीहरूमा असर पार्छ ।

युरिक एसिड गाउट, रगतमा हुने एउटा तत्व बढेर जोर्नीमा जम्मा हुने र जोर्नी सुनिने र दुख्ने हुन्छ । ज्यादा गरी खुट्टाको बुढी औंलाको जोर्नी सुनिने र दुख्ने हुन्छ । खानामा एक प्रकारको प्रोटीनजन्य तत्वको मात्रा (प्युरिन) बढी हुँदा युरिक एसिड बढ्ने हुन्छ र यसले ज्यादातर जोर्नीहरूको सुजन गराउने र जोर्नीको भागहरूलाई हानी गर्छ । माछा, मासु (रातो मासु) अन्डा, गेडागुडी, टमाटर, दही तथा मदिराले युरिक एसिडको मात्रा रगतमा बढाउने काम गर्दछ र निम्न उलेखित खानाहरूमा परहेज नगरे (गाउट) युरिक एसिड वाथले सताउने सम्भावना रहन्छ ।

अटोइम्युन (Autoimmune) बाथले शरीरको जोर्नी साथसाथै अन्य प्रणालीलाई पनि असर गर्दछ । यस्तो बाथमा मुटु, आँखा, मृगौला, छाला आदि जस्ता अंगहरूमा पनि असर देखिन्छ । यस्तो किसिमको बाथलाई दीर्घकालीन उपचार चाहिन्छ र कहिलेकाहीँ उच्च श्रेणीको Immune Therapy पनि चाहिन सक्छ ।

सामान्यरूपमा सबै बाथमा शरिरको जोर्नीहरू दुख्ने, सुनिने हुन्छन् । कुन अवस्थाको रोग र रोगको श्रेणी थाहा पाउन विभिन्न किसिमका परिक्षण गरी निदान गर्न सकिन्छ जस्तै: रगत परिक्षण, X-ray, MRI आदि । कुनै पनि बाथ रोगले समाजको जुनसुकै वर्गलाई असर पुराईरहेको हुन्छ र यस्तो अवस्थामा बाथ रोगले व्यक्तिगत तथा सामाजिक प्रत्युत्पादनमा प्रत्यक्ष असर पुऱ्याउँछ । बदलिँदो जीवन प्रणालीले गर्दा स्वास्थ्यमा प्रतिकूल असर पारिरहने र बाथ रोगको विषयमा कोही पनि अछुतो रहन सक्दैन । तसर्थ सम्पूर्ण बाथरोगको रोकथाम निवारण वा न्यूनिकरण गर्न निम्न कुरामा ध्यान पुऱ्याउन पर्ने हुन्छ :

- ◆ धुम्रपान/मध्यपान नगर्ने
- ◆ नियमित व्यायाम गर्ने
- ◆ प्युरिनयुक्त खानाहरू कम सेवन गर्ने
- ◆ शरीरको तौल नियन्त्रण गर्ने
- ◆ नियमित औषधीको प्रयोग गर्ने
- ◆ नियमित चिकित्सकको परामर्श/सल्लाह लिने

For STRONGER & DENSER BONE

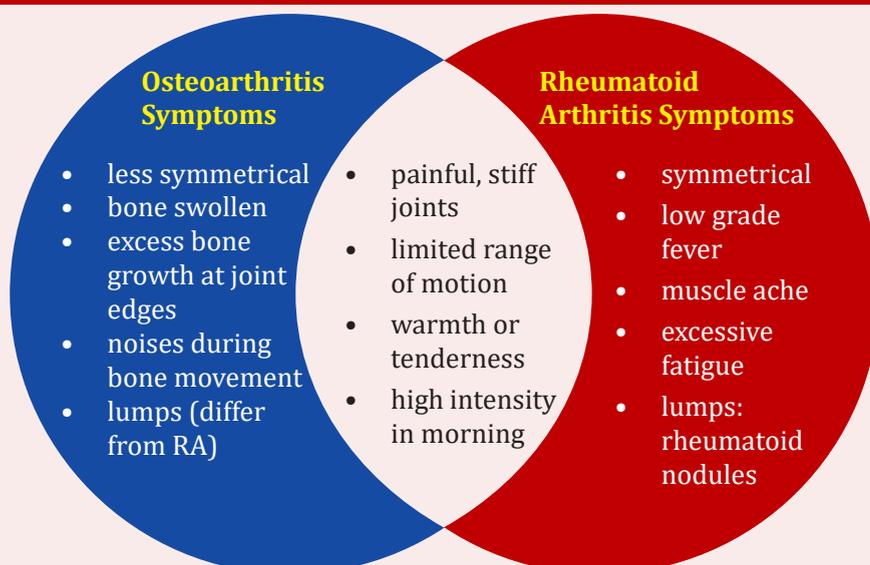
Orosis-D

Calcium Carbonate 500 mg + Vit D3 200 IU Tablets

NOVEL FORMULATION WITH BLEND OF TECHNOLOGY

Is it Osteoarthritis or Rheumatoid Arthritis?

Phr. Bikash Kafle



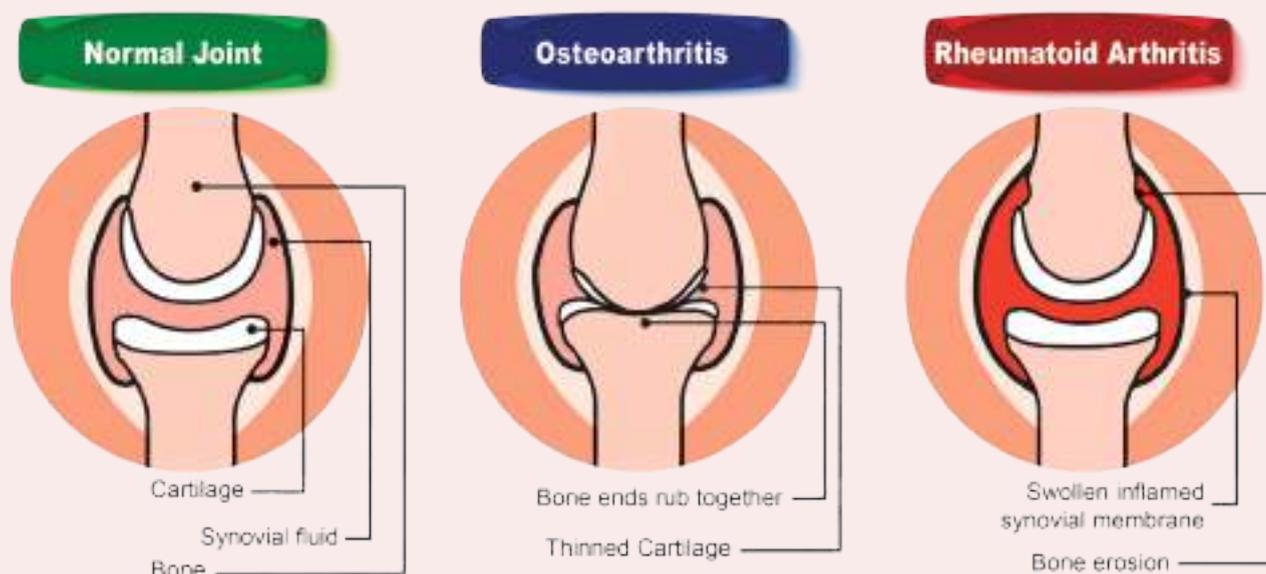
The primary goal in treating both Osteoarthritis (OA) and Rheumatoid Arthritis (RA) is to: reduce pain, improve function and minimize damage to our joints.

In many cases, OA is easier to treat than RA because it usually affects fewer joints and does not involve systemic symptoms. The progression of RA is more difficult to predict than that of OA. With modern research and treatments, the outlook for people with both OA & RA has greatly improved.

References: MyHealth. Alberta.ca
Network, heathline.com

Differences: Osteoarthritis & Rheumatoid Arthritis

| Characteristic | Osteoarthritis | Rheumatoid Arthritis |
|-------------------------------|---|---|
| Risk factor | Repetitive movements and joint pressure, such as in sports | Genetic and environmental factors, including cigarette smoking |
| Diagnosis | X-ray test, history & physical exam | Blood test (RF test) with X-ray test, history & physical exam |
| Starting Age | It usually begins later in life | It may begin any time in life |
| Speed of onset | Slow, over years | Relatively rapid, over weeks to months |
| Pattern of joints affected | Symptoms often begin on one side of the body and may spread to the other side, such as knees, hips, back, neck, thumbs and big toes | Often affects small and large joints on both sides of the body (symmetrical), such as both hands, either wrists or elbows, and the balls of both feet |
| Duration of morning stiffness | Usually lasts less than 1 hour. Stiffness returns at the end of the day or after periods of activity | Usually lasts longer than 1 hour |
| Medications approached | NSAIDs, Analgesic gels, joint injections, food supplement | NSAIDs or steroids, DMARD |





FEBUMIN

Description

Brand Name: FEBUMIN 40/ FEBUMIN 80

Generic: Febuxostat 40 mg & 80 mg Tablets

Therapeutic Category: Antihyperuricemic Agent

Class of Drug: Xanthine Oxidase Inhibitors

Pharmacodynamic Properties

Febuxostat is a xanthine oxidase inhibitor which selectively inhibits xanthine oxidase, the enzyme responsible for the conversion of hypoxanthine to xanthine to uric acid and thereby decreasing uric acid. At therapeutic concentration it does not inhibit other enzymes involved in purine and pyrimidine synthesis.

Pharmacokinetics

Absorption: ≥ 49 %

Distribution: Protein Binding: 99.2 % (primarily to albumin)

Metabolism: Extensively metabolized by conjugation via uridine diphosphate glucuronosyltransferase (UDPGT) enzyme system and oxidation via cytochrome P450 (CYP) system.

Elimination: Eliminated by both hepatic and renal pathways

Indication

For the chronic management of hyperuricemia in patients with gout.

Pregnancy Category: C

Dosing

For Chronic Gout:

Initial dose: 40 mg OD

Increased to 80 mg OD after 2 weeks if serum uric acid <6 mg/dl is not achieved

Gout flare prophylaxis of at least 6 months is recommended.

| Patient Group | Dose Consideration |
|----------------------|---|
| Elderly | No dose adjustment required. |
| Renal impairment | No dose adjustment is necessary in patients with mild or moderate renal impairment. |
| Hepatic impairment | Mild-Moderate hepatic impairment: no dose adjustment required. Severe hepatic impairment: limited information available. |
| Pediatric population | Safety and efficacy in children aged below the age of 18 years have not been established. |

Side Effects: Nausea, Arthralgia, Rash & Liver function abnormalities

Contraindications

Contraindicated in patient being treated with Azathioprine, Mercaptopurine & Theophylline.

Warning & Precautions

History of Major Cardiovascular Disease: A higher rate of cardiovascular thromboembolic events was observed in patients treated with Febuxostat with history of major CV disease. Monitor for signs and symptoms of MI and stroke

Gout Flares: Increase in gout flares can be observed during the initiation of Febuxostat. In order to prevent this concurrent prophylactic treatment with an NSAID or Colchicine is recommended

Hepatic Effects: Liver enzymes can be elevated. Measure liver tests promptly in patients who report symptoms that may indicate liver injury.

Storage: Store below 25°C



Newly Launched

Lodip-L

Amlodipine Besilate 5 mg +
Losartan Potassium 50 mg

“**44.2%**

of the adults in **NEPAL** are
considered to have
Hypertension”

(JAMA, 2017)

Half of all the
Strokes are caused by
High Blood Pressure

स्वस्थ रहनु अब

ABCDE जस्तै सजिलो छ :



Avoid alcohol



Be physically active



Cut down on salt & sugar



Donot use tobacco or cigarettes



Eat plenty of fruits & vegetables



Controls pressure

with perfection **Lodip-L**





ROCIN-B

Description

Brand Name : ROCIN-B

Generic : Mupirocin 2 % w/w + Beclomethasone 0.025 % w/w Ointment

Therapeutic Category : Topical Antibiotic + Topical Corticosteroid

Indications

Dermatoses & Eczema with associated Secondary Bacterial Infections

Mechanism of Action

Mupirocin : Exerts its action by reversibly binding to isoleucyl transfer RNA synthetase and inhibits the enzyme activity. This enzyme is necessary for the synthesis of proteins in the bacteria. Inhibition of isoleucyl transfer RNA synthetase results in inhibition of protein synthesis and produce microbicidal action.

Beclomethasone: It inhibits synthesis of prostaglandin and leukotrienes which is responsible for pain and inflammatory response.

Dose

- Use the ointment twice or three times a day for 1 to 2 weeks or consult with doctor

Adverse Drug Reaction

Most side effects do not require any medical attention and disappear as your body adjusts to the medicine. Most common effects are:

- Burning, stinging or pain on the application site
- Itchy and dry skin

Precautions

- Use it on all the affected areas.
- If you use it twice a day, try to leave a gap of 8 to 12 hours between doses.
- Generally use upto 1 week, contact your doctor if it does not improve within 2 to 4 weeks (or 5 days for a child or when using it on your face).
- Avoid any contact with your eyes, nose or mouth.

Contraindications

- Allergic reaction to Beclomethasone and/or Mupirocin in the past
- Acne or rosacea

Pregnancy and Breast Feeding

- Do not use this medication if you are pregnant and planning to get pregnant
- Do not use this medication if you are Breast feeding

Presentation

5 gm Tube

Intime, Xectin, Nafin, Safin, Ec, Sinex

Word Game

Which brand of Time Pharmaceuticals is

- Emulgel with enhanced delivery and deeper penetration?
- An NSAID preferred for gouty arthritis?
- Antifungal with dual mode of action?
- An oro-dispersible tablet in Menthol flavour for allergic rhinitis?
- Antidepressant indicated for Bulimia Nervosa?

Now arrange the initial letter, from all answers & write a leading brand of TIME Pharmaceuticals. _ _ _ _ _

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| O | K | R | O | C | I | N | B | H |
| Q | S | A | L | I | F | Z | P | E |
| F | A | I | N | T | I | M | E | R |
| U | M | O | N | A | F | I | N | E |
| Z | A | E | G | A | M | E | D | C |
| O | X | E | C | T | I | N | M | T |
| N | W | R | A | B | E | P | R | A |



Lucky winner will Get Surprise Gift From

TIME Pharmaceuticals

INTERESTING FACTS ABOUT BONES



1. Babies are born with 300 bones but there are 206 bones in adults.
2. The smallest bone in the body is in your ear i.e. Stapes.
3. The longest bone in the body is in your leg i.e. Femur.
4. More than half of your bones are in your hands and feet.
5. "Hyoid bone" is only one bone which isn't connected to any other bones.
6. Most people have 12 ribs, but some have 13.
7. Bones are strong, but teeth are stronger.
8. Bones are natural healers.
9. There is a joint which doesn't move i.e. joint in cranium.

Congratulations!



Dr. Arun Kumar Karna
DM Cardiologist
Narayani Upachhetriya Hospital



Dr. Manoj Subedi
MBBS, MD, General Physician
Gaighat Hospital, Udayapur



Dr. Sanjay Kumar Rathi
MBBS, General Physician
Itahari Medical, Itahari



Dr. Shraddha Bhandari
Psychiatric
B&C Medical College and Teaching Hospital



Dr. Binay Pravakar Rai
MBBS, General Physician
District Hospital, Siraha



Dr. Jummy Rajkarnikar
MBBS, MD, ENT Specialist
Kirtipur Hospital, Kirtipur



Dr. Meera Shrestha
MBBS, MD, Dermatologist
UCMS



Dr. Riva Kiran KC
MBBS, MD, Obstetrician/Gynae
Koshi Zonal Hospital, Biratnagar

TIME Pharmaceuticals (P) Ltd. welcomes your comments/suggestions/inputs for coming issue of this bulletin.

Last date of response form submission : 31st Jestha 2078 (14th May 2021)

RESPONSE FORM

Name : _____

Speciality : _____

Contact No. : _____

Birthday : _____ Anniversary Day: _____

Comments : _____

Clinical Address : _____

Email Address : _____

Please send this form to:

TIME PHARMACEUTICALS

Office: Bakhundole 03, Lalitpur, Nepal | Phone: 01-5426905
E-mail: marketing@timepharma.com, Website: www.timepharma.com

Moments in TIME



Dr. Nikesh Raj Shrestha
Sr. Consultant, Interventional Cardiologist, DHN



Free Pediatric Health Camp at
Bhaktapur, Sallaghari



Congratulating Dr. Y.B. Rokka for being awarded
for Prabal Jana Sewa Shree Padak



Free General Health Camp at Samarpan
HealthCare Center, Anamnagar



Holi Celebration at Marketing & Liaison Office



Vaccinated with COVID Vaccine

Happy
2018
New Year

नव वर्ष २०७८ को
शुभ अवसरमा सम्पूर्ण
नेपाली दाजुभाई तथा दिदीबहिनीहरूमा
सु-स्वास्थ्य तथा उत्तरोत्तर प्रगतिको
हार्दिक मंगलमय शुभकामना ।

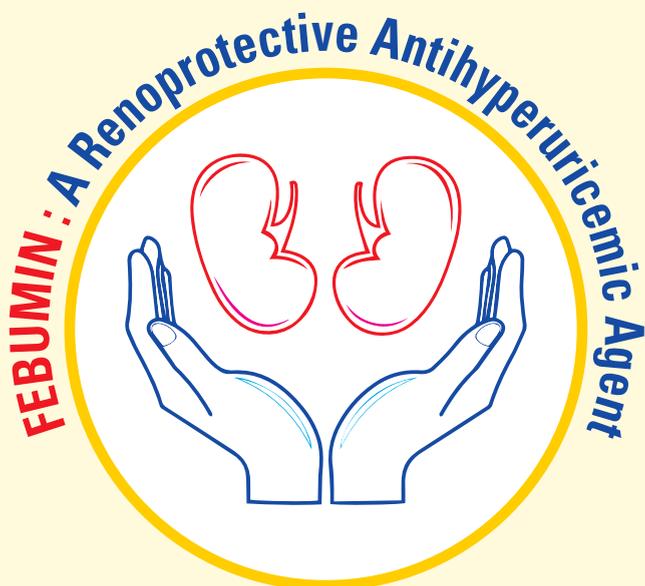




Proudly Launches,

FEBUMIN

Febuxostat 40 mg & 80 mg Tablets



FACT ON HYPERURICEMIA

Hyperuricemia is associated with the development & progression of **Chronic Kidney Disease**. And, lowering the uric acid level can slow its progression.

Medicine, 2019



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