

National Institute of Pathology

(Indian Council of Medical Research)



NEWS Letter

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HYPERTENSION AND WORLD HEALTH DAY 2013

(Dr. Anju Bansal)

The theme for World Health Day on 7th April 2013 is hypertension. World Health Day is celebrated to mark the anniversary of the founding of World Health Organisation in 1948. Each year, a theme is selected for World Health Day that highlights a priority area of public health concern in the world. Why the WHO chose hypertension, is for its immense public health importance and devastating effects.

Hypertension is technical name for high blood pressure. Normal adult blood pressure is defined as a systolic blood pressure of 120 mm Hg and a diastolic blood pressure of 80 mm Hg. However, the cardiovascular benefits of normal blood pressure extend to lower systolic (105 mm Hg) and lower diastolic blood pressure levels (60 mm Hg). Hypertension is defined as a systolic blood pressure equal to or above 140 mm Hg and/or diastolic blood pressure equal to or above 90 mm Hg. Normal levels of both systolic and diastolic blood pressure are particularly important for the efficient function of vital organs such as the heart, brain and kidneys and for overall health and wellbeing.

Worldwide, high blood pressure is estimated to affect more than one in three adults aged 25 and over, or over one billion people. Globally, cardiovascular disease accounts for approximately 17 million deaths a year, or nearly one third of the total deaths occurring in the world every year. Of these, complications of hypertension account for 9.4 million deaths worldwide. Hypertension is responsible for at least 45% of deaths due to heart disease and 51% of deaths due to stroke. Since nearly 80% of deaths due to cardiovascular disease occur in low- and middle-income countries, focusing on hypertension is very relevant to our country. It accounts for 57 million disability adjusted life years (DALYS) or 3.7% of total DALYS. It also increases the risk of conditions such as kidney failure and blindness. Global Burden of Disease Study 2010 (GBD 2010) identified Blood pressure as the biggest global risk factor for disease. Treating raised blood pressure and maintaining it below 140/90 mmHg is associated with a reduction in cardiovascular complications. Hypertension is one of the most important contributors to heart disease and stroke – which together make it , the world's number one cause of premature death and disability.

The prevalence of hypertension is highest in the African Region at 46%, while the lowest prevalence at 35% is found in the Americas. Overall, high-income countries have a lower prevalence of hypertension - 35% - than other groups at 40%.

High-income countries have begun to reduce hypertension in their populations through strong public health policies such as reduction of salt in processed food and widely available diagnosis and treatment that tackle hypertension and other risk factors together. In contrast, many developing countries are seeing growing numbers of people who suffer from heart attacks and strokes due to undiagnosed and uncontrolled risk factors such as hypertension.

At national level there are six important components of any country's initiative to address hypertension

- 1-an integrated primary care programme
- 2-the cost of implementing the programme
- 3-basic diagnostics and medicines
- 4-reduction of risk factors in the population
- 5-workplace-based wellness programmes
- 6-monitoring of progress.

At individual level everyone can take five concrete steps to minimize the odds of developing high BP and its adverse consequences.

- Healthy diet:
 - ◆ promoting a healthy lifestyle with emphasis on proper nutrition for infants and young people;
 - ◆ reducing salt intake to less than 5 g of salt per day (just under a teaspoon);
 - ◆ eating five servings of fruit and vegetables a day;
 - ◆ reducing saturated and total fat intake.
- Avoiding harmful use of alcohol i.e. limit intake to no more than one drink a day
- Physical activity:
 - ◆ regular physical activity and promotion of physical activity for children and young people (at least 30 minutes a day).
 - ◆ maintaining a normal weight: every 5 kg of excess weight lost can reduce systolic blood pressure by 2 to 10 points.
- Stopping tobacco use and exposure to tobacco products
- Managing stress in healthy way such as through meditation, appropriate physical exercise, and positive social contact.

There is a plethora of drugs available to control BP. Hypertension does not come alone and 80-85% patients of hypertension have one or more associated risk factors or co- morbidities. These morbidities are the most important determining factor for choosing a drug. Therefore there is a patient for every drug rather than there being a drug for every patient. In the minority who have standalone hypertension age, race, sex and obesity are important factors guiding the choice of drugs.

REFERENCES

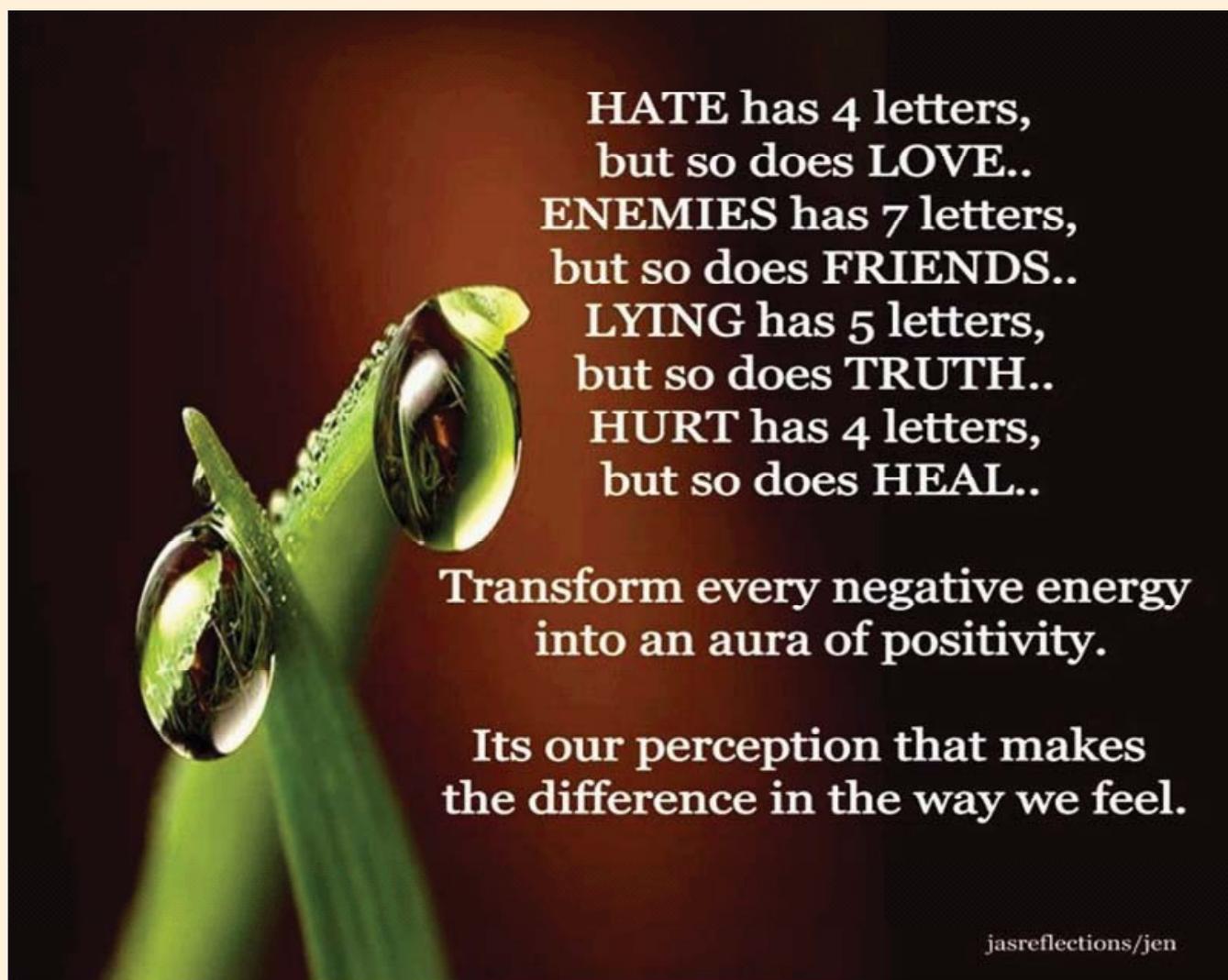
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The Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure- U.S. Department of health and human services, National Institutes of Health, National Heart, Lung, and Blood Institute, 2003

<http://www.framinghamheartstudy.org>



INSTITUTIONAL ACTIVITIES/CONFERENCES/ PROCEEDINGS/SEMINARS/TRAINING COURSES ORGANISED/ATTENDED

- ❖ Dr. Sunita Saxena, Director attended Technical Committee meeting of ICMR held on 3rd January, 2013 at ICMR, New Delhi.
- ❖ Dr. Sunita Saxena, Director attended Technical Committee meeting of ICMR held on 7th January, 2013 at ICMR, New Delhi.
- ❖ Dr. Sunita Saxena, Director attended Selection Committee meeting for scientist C post held on 13th January, 2013 at Central JALMA Institute for Leprosy & Other Mycobacterial Disease, Agra.
- ❖ Dr. Sunita Saxena, Director attended the meeting of Scientific Advisory committee of National Institute for Research in Environmental Health, Bhopal on 23rd January, 2013
- ❖ Dr. Sunita Saxena, Director attended as panelist on Panel discussion titled “Ethical, Legal, Social Economic & Technical issues in Genetic Analysis and Road map for establishing Cancer Genetics Unit in India held on 25th January, 2013 organized by Tata Memorial Centre, ACTREC, Mumbai.
- ❖ Dr. Sunita Saxena, Director attended Condemnation Board meeting of ICMR held on 31st January, 2013 at ICMR, New Delhi.
- ❖ Dr. Sunita Saxena, Director attended meeting of the Bio – Safety Committee held on 5th February, 2013 at Institute of Molecular Medicine, Okhla, New Delhi.
- ❖ Dr. Sunita Saxena, Director, attended Pre SAC meeting of Institute of Cytology & Preventive Oncology, Noida held on 11th February, 2013.
- ❖ Dr. Sunita Saxena, Director attended meeting for formal discussion on independent evaluation of performance of ICMR regarding the activities to be carried over to XII Plan on 15th February, 2013 held in ICMR, New Delhi.
- ❖ Dr. Sunita Saxena, Director delivered lecture on “Integrated Genomic Approaches to identify Molecular Signature of Esophageal Cancer in North East India in 32nd Annual Convention of Indian Association for Cancer Research on “Emerging Trends in Cancer Research : Road to Prevention & cure” & International Symposium on Infection & Cancer held during 13-16 February, 2013 organized by Dr. B.R. Ambedkar Centre for Biomedical Research, University of Delhi.
- ❖ Dr. Sunita Saxena, Director delivered guest lecture in depth interaction and brain storm session on “Understanding of Biological complexities through integrated biology” organized by M/s Agilent Technologies, Gurgaon on 18th February, 2013.
- ❖ Dr. Sunita Saxena, Director attended Project Review committee Meeting for Cellular and Molecular Biology and Genomics held on 27th February, 2013 at ICMR New Delhi.
- ❖ Dr. Sunita Saxena, Director attended Project Review committee meeting on Oncology held during 5th – 7th March, 2013 at ICMR, New Delhi.

- ❖ Dr. Sunita Saxena, Director invited as a speaker in National Conference on “Women’s Health and Nutrition – A Community Based Approach” and deliver lecture on “Status of Breast cancer in Indian Women: Risk and Awareness” on 8th March, 2013 at Vigyan Bhavan, New Delhi.
- ❖ Dr. Sunita Saxena, Director attended Scientific Advisory Committee meeting of the Institute of Cytology & Preventive Oncology held on 2nd April, 2013 at ICPO, Noida.
- ❖ Dr. Sunita Saxena, Director attended Nasi Scopus Young Scientists Award 2012 meeting held on 4th April, 2013 at Stanford Bio design Centre, AIIMS, New Delhi.
- ❖ Dr. Sunita Saxena, Director participated in the viva-voce examination for Ph.D. of Ms. Thoudam Regina Devi held on 11th April, 2013 at BITS, Pilani.
- ❖ Dr. Sunita Saxena, Director attended a Selection Committee meeting for award of ICMR Post Doctoral Fellowship (PDF) 7th Batch held on 17th April, 2013 at ICMR, New Delhi.
- ❖ Dr. Sunita Saxena, Director attended IVth meeing of the Project Review Steering Group to review the progress of the project on “Development of PC based fully automatic Batch analyser for Clinical Chemistry” held on 30th April, at BMRC-205, Vellore Institute of Technology, Vellore, Tamilnadu.
- ❖ Dr. Sunita Saxena, Director attended meeting of Expert Group held on 13th May, 2013 at ICMR, New Delhi.
- ❖ Dr. Sunita Saxena, Director attended meeting on translational research projects of NJIL & OMD, Agra held on 15th May, 2013 at ICMR, New Delhi.
- ❖ Dr. Sunita Saxena, Director attended meeting of Expert Advisory Committee on development of Protocols for Treatment and patient care in Hospital and Trauma Centres/ Blocks of the six new AIIMS held on 20th May, 2013 at Nirman Bhavan, New Delhi.
- ❖ Dr Avninder P Singh, Scientist ‘C’ gave an invited talk on ‘Neurocutaneous Melanosis’ at the NEUROPATH 2013 conference held at GB Pant Hospital Delhi on 1-2 Feb 2013.
- ❖ Dr Avninder P Singh, Scientist ‘C’ was invited to attend and was felicitated with a Indo-US research fellowship certificate at IUSSTF conclave hosted by DST from March 15-17 at Pune.
- ❖ Dr Avninder P Singh, Scientist ‘C’ participated in panel discussion on interface in dermatology at CUTICON 2013 held on 16th June at EROS International and organized by IADVL.
- ❖ Mr. Praveen ‘Participated in symposium “Imunology Day Celebration” at AIIMS New Delhi, 27-4-2013.
- ❖ Presentation on “Pamstation 12- A complete multiplex solution for looking at cell signaling/ measurement of the activity of both cellular and recombinant kinases by **Martijn Dankers, PamGene**, Netherland on 15th May 2013 at National Institute of Pathology, Delhi.
- ❖ On the eve of Republic Day Flag Hoisting was done at NIP terrace on 25th Jan 2013.
- ❖ Ms. Shanti P. Latha participated in IACR 2013 held at V.B. Patel Chest Inst., Delhi Univ. on 13-16 Feb. 2013.

- ❖ Ms. Meena Lakhanpal participated in HGM-ICG-2013 and presented paper entitled "Polymorphism in HLA class I & Class III sub region is associated with an increased risk of Nasopharyngeal carcinoma in Northern India at Maria Bay sands, Singapore from 13th April- 18th April 2013.
- ❖ Ms. Asheema Khanna participated in IACR 2013 and presented poster entitled Dynamic network analysis of mToR signaling in anti lymphoblastic leukemia.
- ❖ Mr. Ashish Bhushan participated in IACR 2013 and presented poster entitled "Methylation profiling of Tumor Suppressor Genes in Esophageal Cancer in High risk Northeast India Population.
- ❖ Ms. Nitu Kumar participated and presented poster in IACR 2013 entitled "Role of cytokines in recurrence – free survived of Bladder Cancer patients.
- ❖ **The 13th Smt Pushpa Sriramachari Foundation day Oration was delivered by Dr. M.K. Bhan, Distinguished Scientist, DST and Former Secretary, Dept. of Biotechnology, on 7th June 2013, at the Institute.**



JOURNALS CLUB

- ❖ Nishikawa et al. Environmental Health Perspectives vol.120-1 Jan. 2012 Presented by **Shashi N. Kumar on 8-1-13.**
- ❖ The Malaria Parasite Progressively Pirmantles the host Erythrocyte Cytoskeleton for efficient Egress Molecular and Cellular Proteomics Presented By **Namita Singh on 15-01-13.**
- ❖ H. Pylori and Disease Presented by **Dr. Manju Bhamu on 5-02-2013.**
- ❖ Architecture of the major component of the type III secretion system export sapparatus.Paatrizia Abrusci et al. Journal: Nature structural and molecular Biology Published online 09 Dec.2012 Presented by **Javeed Ahmed on 12-2-2013.**
- ❖ Benzene Metabolite 1,2,4- Benzenetriol induces Halogenated DNA and Tyrosines Reresenting Halogenative Stress in the HL-60 Human Myeloid Cell Line. Takuro Breast milk Is a Novel Source of Stem Cells with Multilineage Differentiation Potential Presented By **Hemlata Chouhan Journal: Stem Cells Date: 19.02.13.**
- ❖ Reactive astrocytes promote the metastatic growth of breast cancer stem-like cells by activating Notch signaling in brain. Presented by **Ms. Meena Lakhanpal on 5-3-13.**
- ❖ Elevated Pro inflammatory Cytokine Production by a Skewed T Cell Compartment requires Monocytes & Promotes Inflammation in Type 2 Diabetes. Presented By **Amirta Vats Journal J. Of Immunology on 12-03-13.**
- ❖ The Overexpression of hypomethylated miR-663 induces chemotherapy resistance in human breast cells by targeting heparin sulphate proteoglycan 2 (HSPG2). Haiyan Hu et al. Journal of Biological Chemistry Feb 22 2013. Presented By **Shreshtha Malviya on 2-04-13.**
- ❖ IL Mediates immunopathology in the Absense of IL10 following Leishmania major infection Presented By **Himanshu Kaushal on 16-4-13.**
- ❖ Protein complex directs haemoglobin to hemozo information in plasmodium falciparum Presented By **Vanila Sharma. On 23-4-2013.**
- ❖ A Versatile Proline/alanine transporter in the unicellular pathogen Leishmania donovani regulates amino acid homeostasis and osmotic stress responses. Dan Zilberstein et al., The Biochemical Journal, Jan 2013 Presented By **Deepak Kumar Deep on 30-04-2013.**
- ❖ Genomic Response in mousse models poorly mimic human inflammatory diseases. Stanford Genome Technology Centre, Stanford University, Palo Alto, January 2013. Presented By **Parveen Kumar on 07-05-2013.**
- ❖ Dendritic Cell-induced Activation od latent HIV-1 Provirus in Actively Proliferating primary T lymphocytes. Presented by **Kumar Avishek Srivastava on 4-6-13.**



HISTOPATHOLOGY LAB NIP



Grossing the Specimen



Processing Tissue



Embedding the Tissue



Cutting Paraffin Sections



Microscopic confirmation of appropriate staining



Frozen Section Cutting



Histopathology Data Entry

TISSUE CULTURE LAB NIP



Hybridoma Culture Work



Packing of Plasticware for culture

ANIMAL HOUSE



विश्वास करना मनुष्य का एक गुण है और
अविश्वास दुर्बलता की जननी है।

सामाजिक उत्थान के लिए जरूरी हैं अच्छे संस्कार

अनिता शर्मा

हमारे ऋषि-मुनियों ने मानव जीवन को पवित्र और मर्यादित बनाने के लिए संस्कारों का आविष्कार किया। धार्मिक ही नहीं। वैज्ञानिक दृष्टि से भी इन संस्कारों का हमारे जीवन में विशेष महत्त्व है। हमारे समाज को सुसंस्कृत तथा संस्कारी बनाने के लिए ही संस्कारों को स्थापित किया गया है, इन्हीं संस्कारों के कारण भारतीय संस्कृति महत्त्वपूर्ण और अद्वितीय है। मनुष्य की मृत्यु हो जाती है लेकिन उसके सुसंस्कार बाद में भी उसे लोगों के बीच जीवित रखते हैं। इसलिए संस्कारों का जीवन में शाश्वत महत्त्व है और यह समाज के लिए अनिवार्य है। जीवन की आपाधापी, अतिव्यस्तता, धार्मिक व सामाजिक मूल्यों की अवहेलना, चारित्रिक गिरावट, असामाजिकता, संवेदनहीनता, अनुशासनहीनता, भ्रष्टाचार, अहम, बड़ों की अवज्ञा आदि बुराइयों के चलते हम सामाजिक पतन के कगार पर पहुँच गए हैं। आज मनुष्य अपने आप को सर्वज्ञानी समझने की भूल करन लगा है।

वर्तमान में जैसे-जैसे इन संस्कारों की अवहेलना होती जा रही है, उतना ही हमारा समाज पतन की ओर जा रहा है। आधुनिक युग में विलासिता की वस्तुएँ जैसे-जैसे बढ़ती जा रही हैं, वैसे ही समाज पथभ्रष्ट होता जा रहा है। पहले हमारे समाज में वसुदेव कुटुंबकम् की प्रथा थी। सभी परिवार एक इकाई की तरह रहते थे। सभी सदस्यों का कार्य व कर्तव्य निश्चित होता था, जिसमें सभी बड़े-बूढ़ों, बच्चों व स्त्रियों को सुरक्षा मिलती थी। सभी का एक आदर-सम्मान होता था। बड़ों के आदर के साथ बच्चों को उनका भय भी होता था। परिवार के नाम पर पूरा गाँव, एक मोहल्ला होता था, जहाँ पर सभी परिवार सभी सामाजिक व धार्मिक कार्य मिलजुलकर करते थे; जिससे हमारी संस्कृति का ज्ञान एक पीढ़ी से दूसरी पीढ़ी तक सहज ही पहुँच जाता था। पर शहरीकरण की भागदौड़ ने उस परिवार-प्रथा को तोड़ दिया है। रोजगार पाने की होड़ में परिवार छिन्न-भिन्न हो गए हैं। ज्यादातर एकल परिवार प्रथा का चलन है। सभी इतने व्यस्त हो गए हैं कि अपने आस-पड़ोस के बारे में भी अनजान रहते हैं। जो संस्कार हमें परिवार से मिलते थे, उनका पतन होता जा रहा है और रही-सही कसर मीडिया, फिल्मों, इंटरनेट, सीरियल, बुद्धु बक्से आदि ने पूरी कर दी है। आजकल बच्चे बड़ों को नमस्कार व प्रणाम नहीं करते, उसे वे अपनी तौहीन समझते हैं। उन्हें वे हाय, हैलो से संबोधित करते हैं। हमारे संस्कारों में बड़ों और महिलाओं का सम्मान करना, किसी को परेशान नहीं करना, किसी का हक नहीं मारना, परेशान की मदद करना, हमेशा मिलजुल कर रहना आदि सिखाया जाता है पर आज यह सब किताबी जुमले होते जा रहे हैं। आज लोग इसलिए परेशान नहीं होते कि वे दुखी हैं, बल्कि इसलिए कि उसके पड़ोसी खुश कैसे हैं? उन्होंने उन्नति कैसे कर ली? किसी भी अखबार को उठा कर पढ़ लें, वह चोरी, डकैती, बलात्कार, छीना-झपटी, दुर्घटना आदि घटनाओं से भरा होता है, जिसे हम खबर व मनोरंजन की तरह पढ़ते हैं और भूल जाते हैं।

लेकिन वह सिर्फ एक घटना ही नहीं, पूरे समाज के गिरते स्तर का चिंताजनक ग्राफ है। हम कभी यह नहीं सोचते कि जिसके साथ यह घटना घटी होगी, उसके जीवन में कितना विपरित असर हुआ होगा? अगर कोई घटना खुद के साथ घटी होती है तभी उस दर्द का पता चलता है और तभी हम समाज को बदलने, कानून-कायदों की दुहाई देते हैं।

जो संस्कार हमारे समाज को पतन की ओर ले जा रहे हैं, उस पर कुछ करने की बजाय नियति का कोप समझकर थोड़े समय बाद ठण्डे पड़ जाते हैं। कभी यह नहीं सोचते कि जो लोग गलत कार्य करते हैं वे भी इसी समाज के हिस्से होते हैं और हमारी तरह ही मनुष्य भी। उन्होंने शिक्षा समाज व परिवार से अलग तो नहीं ली, फिर वे बुरा कार्य क्यों करते हैं? इसका मुख्य कारण यह भी है कि बच्चा सर्वप्रथम अपने परिवार में देखता है कि उसके बड़े छोटी-छोटी बातों में झूठ बोलते हैं। बातचीत में माँ-बहन की गाली देना बड़प्पन समझते हैं, अपना काम निकालने के लिए किसी भी हद तक गिर जाना, शराब व नशा करना अपनी शान समझते हैं। जब बच्चों को बचपन से ऐसा ही वातावरण मिलेगा तो हम अच्छे समाज की कल्पना भी कैसे कर सकते हैं? वे बचपन से ही इन बातों को परंपरा की तरह अपने जीवन में ढाल लेते हैं।

पहले परिवारों में हमारे दादा-दादी और नाना-नानी अपनी कहानियों के माध्यम से आदर्श बातें सिखाते थे कि संगठन और एकता में कितनी शक्ति है पर एकल परिवारों में किसी के पास इतनी फुरसत नहीं कि वह बच्चों के साथ वक्त बिता सके, उनका चरित्र निर्माण कर सके। सभी सिर्फ अपने कार्यों को ही महत्त्व देते हैं। विद्यालयों में आदर्श विद्यार्थी बनने की शिक्षा दी जाती थी पर आज बच्चे सिर्फ पुस्तकों को रटने और अच्छे नंबर लाने की प्रतिस्पर्धा में लगे रहते हैं। हमारे समाज में एक स्त्री व पुरुष का ही नहीं माँ, बहन, बेटी, भाई, पिता आदि सभी का अपना महत्त्व है; पर आधुनिकता के दौर में यदा-कदा ये रिश्ते तार-तार होते रहते हैं। अगर हम अपने परिवार को शुरू से ही अच्छे संस्कार देंगे, भले-बुरे के बारे में ज्ञान देंगे, तभी यह सम्भव है कि समाज के गिरते हालात में सुधार हो।

आज हमारा समाज आर्थिक तरक्की तो कर रहा है पर उसकी कीमत हमारे सामाजिक संस्कारों को चुकानी पड़ रही है। याद रखें, आर्थिक तरक्की भी तभी तरक्की कहला सकती है, जब समाज की सांस्कारिक जड़ें विशुद्ध, गहरी और मजबूत हों। तरक्की की होड़ संस्कारों को मशीन बना देती है, जो परंपराओं को तोड़-कुचलकर येन केन प्रकारेण अपना हित साधने में लग जाते हैं। उन्हें अच्छे-बुरे, अपने-पराए किसी का ज्ञान नहीं रहता। वे बस किसी भी तरह अपनी स्वार्थपूर्ति में लगे रहते हैं। अतः आज जरूरी है कि परिवार आरम्भ से ही सुसंस्कार की नींव मजबूत करे क्योंकि सुसंस्कार की नींव पर ही अच्छे समाज की बुलंद इमारत खड़ी की जा सकती है।



Strategies for Balancing Work and Family

Here are some suggestions for balancing work and family. Different things will work for different families, depending on the individuals and their situations.



Get in touch with your values. Think about what you want from life for you and your family. How does work fit into that?

Set Priorities. Decide, based on your values, what tasks are important and which are less important. This means more than saying your family comes before work. It means deciding what activities come first. Review your priorities every month. Ask yourself whether you are accomplishing your goals.

Take time to shift from work to family. It usually takes 15-20 minutes to shift gears from work to family. Use the time on the way home to clear your head. Try making tomorrow's "to do" list at the close of the work day. Listen to music you enjoy as you travel. Use the drive home to forget about work and concentrate on family. Try to avoid bringing work home. Take a 15-minute break to change clothes and make the shift.

Take care of your physical health. This makes you better able to withstand emotional and physical stress.

Plan and work efficiently. Use schedules to manage your time more efficiently at work - you will find that you accomplish much more during your working hours and may not need to stay back late. Similarly, plan times at home as well. Make the most of time spent together with the family, for instance by working together to accomplish tasks around the house. If you have to drop your kids at school or the bus stop, use that time to chat with them and get closer to them.

Nurture your relationships. Take time to nurture the relationship with your spouse. Support one another in family and job responsibilities. Be willing to listen to each other's concerns about work and family. Take time to nurture your relationships with your children too - and other family members.

Share responsibility for family work. There is much work to be done at home - parenting, housework, managing schedules..... sharing the family work load contributes to feelings of fairness and equity among family members.

Be willing to talk about conflicts and negotiate. Some conflict between schedules is unavoidable. Be willing to discuss concerns and compromise. You might find that you need to try out different schedules, different ways to do household tasks, or reduce some of your less important activities.

Seek support from your employer. Ask your employer about your options for flexibility on the job. For example, perhaps you can work fewer hours some days and make it up later, work part-time, share a job with someone else, or do paid work at home.

Perhaps you can work any time of the day or night, as long as you get the job done. Talk about what is possible in your situation. It may not be much, but find out what you can do.

Build a support network. Talking with others about their work-family stress and how they cope can help us with our own situations. Try establishing a support group at work or in your neighborhood to talk about your feelings and discuss strategies that you've used for managing stress.

(Mrs. Madhu Badhwar)
References: Facebook