

Tehran Times Health Desk

MASHAD — The 2nd Razavi International Cardiovascular Congress is to be held in Razavi Hospital, Mashad, Khorassan Razavi Province, from July 22 to 24, 2009.

Sponsored by the Euro-Asian Bridge, the Iranian Society of Cardiac Surgeons, and the Iranian Heart Association, the congress is to update physicians, specialists, general practitioners, and nurses on the cardiovascular diseases, scientific secretary of the congress said at a press conference in Mashad on Tuesday.

According to Ahmad Rajaii Khorassani, more than 50 international medical figures from 20 countries around the world, including India, Canada, Turkey, Britain, France, Pakistan, Azerbaijan, Uzbekistan, Argentina, Switzerland, Rumania, Croatia, the U.S. and Germany are to attend the three-day event.

Presided by the Iranian Society of Cardiac Surgeons' Director Mohammad-Ali Yusefina, the congress is to be taken part by Director of the World Society of Cardiothoracic Surgeons Sotiriose N. Prapas from Greece, Inventor of Batista Procedure Rendas Jose Vilela Batista from Brazil, and Head of Iran Heart Association Feridoun Nouhi. All of them are to give lectures to the congress.

Head of Cardiothoracic Surgery at Colorado University in the U.S. Fredrik L. Grover, Surgery Professor at University Hospital in Switzerland Marko Ivan Turina, Professor of Cardiothoracic and Vascular Surgery at the University of Texas Houston in the U.S. Hazim J. Safi, Federico Benetti from Argentina, Raphael de

Mashad to host 2nd Razavi Intl. Cardiovascular Surgery Congress



A heart surgery in the Razavi Hospital, Mashad

Geest from Belgium are among other international members to deliver lectures to the congress.

Khorassani described hybrid aortic surgery, current problems in heart transplantations, cardiopulmonary resuscitation, and surgery of heart failure, surgical treatment of complex and complicated thoracic aneurysms, and surgical treatment of aortic arch aneurysms as the main topics of the incoming congress.

Putting stress on the importance of preventing heart diseases, Khorassani lamented, "There is still 20% of heart patients in the world die of heart attacks before reaching hospitals."

Khorassani, who is also head of heart department at Razavi Hospital, called for concerted efforts to reduce the rate in the near future.

The congress is to introduce the newest methods of cardiovascular surgery and the science of care

and rehabilitation of heart disease patients to the participants, Razavi Hospital Manager Saeed Abdolhosseini told reporters.

The newest methods of diagnose and treatment of heart diseases will also be exchanged among the attendees of the congress, Abdolhosseini added.

Some workshops for surgeons in training heart surgery in OPCAB method and some others for rehabilitation staff and percussionists as well as a

total of 6 panels, alive heart surgeries and video conferences are among the sideline programs of the congress, the hospital manager explained.

The resurgence of off-pump coronary artery bypass (OPCAB) surgery is rapidly changing surgical practice. After an initial phase of 'healthy skepticism', the impetus of some developed countries toward OPCAB surgery is remarkable.

Hardly any OPCAB procedure was carried out before 1995 in the U.S., however, by 1999 more than 11 000 (10%) coronary operations were performed on the beating heart. It is estimated that this percentage to reach over 75% by 2010 worldwide.

The First Razavi International Cardiovascular Congress was held in the Razavi Hospital, Mashad, Khorassan Razavi Province, from December 11 to 13, 2008.

Attended by about 20 medical figures from about 15 countries around the world, the first congress emphasized just on aortic diseases.

And compared to the last year, there was a 100% increase in number of articles sent to the secretary of the congress, Abdolhosseini said, highlighting the tremendous welcome given to the 2nd Razavi Intl. congress by the surgeons from around the world.

HEALTH TIP

Eating out with a diabetic child

It's easy to monitor what your diabetic child eats at home when you're the one preparing the meals. But it gets trickier when the family eats at a restaurant.

The American Academy of Family Physicians offers these suggestions for dining out with a diabetic child:

Ask questions about what's in a particular menu item, and how it's cooked.

Ask for healthier substitutions. For example, swap out fries for a salad or vegetable.

Look for dishes that are grilled, steamed, broiled or baked instead of fried.

Skip high-fat salad dressings, sauces and gravies.

Split a large dish with your child to limit portion size, or box up half and take it home.

Teach your child how to make healthy decisions by involving the child in the ordering process.

(Source: HealthDay News)

HEALTH TIP

Maternal diet affects infant's long-term bone health

NEW YORK (Reuters) — Women who maintain a healthy, well-balanced diet during pregnancy have children with bigger and stronger bones than women with poorer quality diets, according to the results of a study presented Tuesday at the National Osteoporosis Society Conference in Manchester, UK.

"Our data add to evidence that environmental influences during intrauterine life alter the trajectory of skeletal development in the offspring," study presenter Dr. Zoe Cole of the University of Southampton told Reuters Health.

When the researchers assessed the diets of 198 pregnant women, two general patterns began to emerge. The first was a healthy dietary pattern filled with lots of fruits and vegetables, yogurt, whole wheat bread and breakfast cereals. The second diet pattern was less healthy and included large amounts of foods such as chips and roast potatoes, sugar, white bread, processed meat, tinned vegetables and soft drinks.

Bone assessments of the children made up to age 9 years suggested that consuming a healthy maternal diet was associated with greater bone size and density in the offspring.

"Children born to mothers with the healthiest diets, as identified by in the highest quarter of prudent diet score, during late pregnancy had an 11 percent greater whole body bone mineral content and 8 percent greater whole body bone area than those born to mothers with the least healthy diet, the lowest quarter of this distribution," Cole said.

Even when mothers were grouped by smoking status, vitamin D status and social class, the differences in diet still had a significant impact on their children's bones, the researchers found. The relationship between a healthy maternal diet and healthier bones in offspring remained even after the child's height, weight, arm circumference and birth weight were considered.

"A healthy diet during pregnancy has long lasting effects on the development of the child's bones," Cole said, and this may lower their future risk of osteoporosis, a potentially disabling bone-thinning disease.

Air traffic patterns predict swine flu spread

Countries that received the most airline passengers from Mexico this spring were the most likely to see H1N1 swine flu infection, new research says.

The finding confirms that tracking global flight patterns to determine where an infectious disease may strike next could provide governments and public health officials with a means of preventing and dealing with such threats, according to an analysis by researchers in Canada.

"Infectious diseases don't respect national boundaries, and we live in an incredibly interconnected world," said Dr. Kamran Khan, an infectious disease physician and scientist at St. Michael's Hospital in Toronto. "Yet, infectious diseases do follow airline flight routes. If we can understand how people move around the world, we can understand how infectious diseases are likely to spread around the world."

The findings were published online June 29 in a letter to the editor in the New England Journal of Medicine.

Using an extensive database of global air traffic and passenger itineraries, the research team analyzed information on 2.35 million passengers traveling from Mexico to more than 1,000 cities in 164 nations in March and April 2008. Swine flu emerged this spring, but because passenger data from 2009 was not yet available, the investigators used 2008 flight information, noting that air travel patterns in March and April change little from year to year.

From Mexico, nearly 81 percent of air passengers flew to the United States or Canada, while 8.8 percent went to Central America, South America or the Caribbean Islands, 8.7 percent flew to Western Europe, 1 percent went to East Asia and 0.8 percent flew elsewhere, the researchers found.

The United States received the bulk of passengers from Mexico, with about 1.74 million arrivals, followed by Canada with 149,137 arrivals, France with 47,501, then Spain, Germany, Cuba, Argentina, Italy, Brazil, Guatemala, United Kingdom, Colombia, Japan, Chile, Venezuela, Panama, Costa Rica, Netherlands, Peru and Switzerland.

Cities receiving the most arrivals from Mexico were Los Angeles, New York, Chicago, Miami, Houston and Minneapolis-St. Paul.

Of the top-20 destination countries, only one — Venezuela — had no confirmed cases of swine flu as of May 25, 2009. Japan, Chile and Peru had confirmed swine flu cases, but there was no known association with travel to Mexico, according to the correspondence.

All of the others had confirmed cases of swine flu related to travel from Mexico as of May 25.

"The traffic was so strongly correlated with the importation of this disease," Khan said. "Where people go, infectious diseases of people will follow."

Conversely, the nations that were not among the top-20 destinations for passengers from Mexico had few or no cases of travel-associated swine flu.

"Almost all the imported cases were in the countries with high-traffic volumes of passengers from Mexico," Khan said. "Almost no importations were in the countries with low-traffic volumes."

(Source: HealthDay News)

Kids with type 1 diabetes often overweight

Children with type 1 diabetes are more likely to be overweight than those without the disease, increasing their risk of serious health complications, researchers say.

The finding is from a major study that explored the weight problems faced by U.S. youngsters with type 1 diabetes, a less common form of the disease that usually shows up in childhood or in young adults. The study, part of the "Search for Diabetes in Youth Study Group," was reported online in the journal *Pediatric Diabetes*.

"The links between type 2 diabetes and excess weight are well documented, but are less clear in type 1," said lead researcher Dr. Lenna Liu of the Center for Child Health, Behavior and Development at Seattle Children's Hospital, in a news release from the journal's publisher.

"Knowing the prevalence of overweight and obesity in children and young people with type 1 and type 2 diabetes is very important as it helps us to identify those individuals -- by age, gender or race/ethnicity -- who face



the greatest risk of the clinical complications associated with excess weight," Liu added.

The researchers examined data from nearly 4,000 diabetic and more than 7,500 non-diabetic children and young people aged 3 to 19. The diabetic patients were evenly split between boys and girls and the group included various ethnic groups.

The study findings showed that, overall, approximately one in eight, or 13 percent, of type 1 diabetes patients were obese. Among black type 1 diabetes patients, 20 percent were obese, while roughly 17 percent of Hispanic and Asian/Pacific Islander patients were obese. White patients with type 1 diabetes had the lowest rate of obesity at 11 percent.

In type 1 diabetes, the body's immune system attacks and destroys certain cells in the pancreas, an organ behind the stomach. Obese patients are at increased risk for heart disease and other serious complications.

(Source: HealthDay News)

Birth weight appears associated with leukemia

NEW YORK (Reuters) — There may be an association between high birth weight and an increased risk of overall leukemia and acute lymphoblastic leukemia (ALL). The increased risk of acute myeloid leukemia (AML) appears to be associated with the high and low extremes of birth weight.

"There is a growing body of evidence indicating that childhood leukemia is initiated in utero," the two study authors reported in the *International Journal of Cancer*.

Dr. Robert W. Caughey of the Harvard School of Public Health and Dr. Karin B. Michels of Brigham and Women's Hospital, Boston, conducted an analysis of 32 studies to examine the association between birth weight, childhood leukemia, plus ALL and AML, two common leukemia subtypes. Included in the analysis were 16,501 cases of all types of leukemia, 10,974 cases of ALL, and 1832 cases of AML.

Compared with normal birth weight, high birth weight was associated with a 35 percent overall increased risk of leukemia, a 23 percent increased risk of ALL and a 40 percent

increased risk of AML.

For every 1000 gram increase in birth weight, the odds ratio for overall leukemia increased by 1.18.

While low birth weight was not associated with overall leukemia or ALL, there was an association between low birth weight and a 49 percent increased risk of AML.

"Our study supports the notion that childhood leukemia is likely to be initiated in utero," Michels said in an email interview with Reuters Health. "Birth weight is a marker for events during pregnancy that may have affected the risk for leukemia in the offspring."

"It will be important to investigate which factors may operate in utero that affect leukemia risk," Michels said. For example, leukemia risk may be affected by epigenetic factors, modifications to genes other than changes in the DNA sequence itself. Epigenetic modifications may include the addition of molecules, like methyl groups, to the DNA backbone and other factors that may indirectly influence the expression of the genome.

Discovery points to regulation of calcium metabolism

A gene variant that contributes to both kidney stones and osteoporosis has been identified by scientists who said the variant offers a promising target for new drugs to better regulate calcium metabolism.

The single-letter variation (SNP) occurs in the gene encoding claudin 14 (CLDN14), a protein expressed in the kidney, according to a news release.

The 60 percent of humans who carry two copies of this SNP on chromosome 21 have a 65 percent greater risk of developing kidney stones than those with no copies of the SNP. It's believed the SNP may account for more than a quarter of kidney stone cases. In women, it is associated with decreased bone mineral density in the hip and spine.

The researchers examined the genomes of about 50,000 people to learn more about the association between CLDN14

and the metabolism of calcium, a key component of bone and of most kidney stones. They concluded that the SNP may contribute to increased calcium excretion in urine, a major risk factor for kidney stones and also a sign of bone loss.

The study appears online June 28 and in an upcoming print edition of the journal *Nature Genetics*.

This research identified "a highly plausible common biological mechanism leading to two diseases. This offers a potentially attractive new pathway for drug discovery, and the next task is to build on our understanding of how this SNP increases the risk of these diseases and how this pathway could be targeted therapeutically to address this risk," Kari Stefansson, CEO of the bio-pharmaceutical company deCODE, said in a company news release.

(Source: HealthDay News)