

## Al Shifa News & Important Events:

**Iftar party** was organized for general public on 3<sup>rd</sup> of June 2017 and more than 200 people were attended the party. Syed Umari sb Aamir JIH delivered brief lecture related to importance of Ramzan. Later Front Office with billings and Annexe – Al Shifa were also organized iftar party in different ashra.



## Public Awareness Program & Free Health Camp for Elderly or Senior Citizens:

Special Awareness program for Geriatric/ Elderly people was imparted through RWA, Abul Fazal no. 4 on May 14, 2017.



A Free Healthcare camp for Elderly or Senior was conducted on May 21<sup>st</sup> 2017 at Shaheen Bagh area, the Camp was organized with the collaboration of Human Welfare Foundation. Camp was consisted of Lady Urologist Dr. Paul, MS, Dr. Saroj Kumar, MD (Geriatric Medicine-AIIMS) with Clinical Psychologist & Dieticians. Camp Started at 8:30 A.M. and finished at 12:30 PM.



**Nursing Day:** May 12 was celebrated as Nursing Day by all Nursing staff. Brg. Zafar Ali & Dr. Khalil encouraged & thanks to all nursing staff for their sincere performance and hard labour.



**Advance Cardiac Life Support (ACLS) & Basic Life Support (BLS)** Training/Orientation by American Heart Association are being conducted in the month of July 4-6, 2017. About 22 candidates Doctors, Nurses & paramedical are registered under this program in order to improve the quality services of doctors, nursing & paramedical.



**CPR training for Al Shifa staff:** By Dr. Salik Raza, MD, Consultant, Chest and respiratory



## Appointment on Call!!

Save your precious time by calling ahead of time, for all super specialties! Endocrinology, Neurology, Nephrology, Urology, Geriatric (Elderly) Medicine, High risk Baby clinic, Dermatology, Psychiatric & Clinical Psychologist, & ENT Consultant, Please call: 9599080496 and 011-26981420 for appointment



## Editorial

Vitamin D is a fat-soluble vitamin that's essential for proper absorption of calcium in the digestive tract, and it helps maintain blood levels of calcium and phosphate. So, getting enough vitamin D is necessary for bone health throughout the life -- vitamin D deficiency can lead to rickets in kids and osteoporosis in adults.

**65 to 70 percent** Indian are vitamin D deficient and another 15 % have insufficient Vitamin D. 70% urban women have Vitamin D deficiency (TNN- updated Mar 17<sup>th</sup> 2017). Crude data for the last one year in Al Shifa Pathological lab shows that around 80% patients had Vitamin D deficiency.

People don't get much vitamin D from food. The body makes vitamin D when skin is exposed to UV rays from the sun. It only takes a few minutes of sun exposure every day to get vitamin D, but if you live in a place where it gets no sunlight (as most of the buildings in Abul Fazal & Shaheenbagh), there's a good chance you won't get enough sun exposure for several months in a year.

Under public awareness program, all essential area are taken into consideration: Deficiency among adults, benefit of Vitamin D for kids and role of Vitamin D in the derma of kids and adults.

### Special Free OPD for Senior Citizen (Elderly)

Saturday (5th, 12th, 19th, 26th August) from 11.30 am to 1.00 pm

Consultant: **Dr. Saroj Kumar Yadav**, M.D (Geriatric).

Please call: **9599080496** and **011-26981420** for appointment

## Dental Department: "Protect your smile"

### DID YOU KNOW?

- **50%** of people surveyed were **not concerned** about prevention and caring of dental hygiene.
- Almost **30%** do not use any oral products
- **75%** toothpaste users brush once or less in a day
- About 50% rural populations do not use a toothbrush for cleaning the teeth. (A survey conducted by Colgate co.)
- 60% of people are likely **not** to visit a dentist.



Al Shifa Dental dept is equipped with latest dental chair with professional dentist surgeon & Orthodontists.

**Dental OPD starts at 10:00 AM to 8:00 PM**

## Al Shifa Rehabilitation Centre:

Al Shifa Hospital expanded Physiotherapy centre to a Rehabilitation Centre that includes Physiotherapy & Occupational therapy. A high quality services are provided with the help of Well Qualified Professional Therapists with the high quality modalities like IFT, US, SWD and exercise's instruments like shoulder wheel, Pulley, Quadriceps chair, Swiss ball, parallel bar, and hand, wrist & ankle exerciser &. Services are available from 9:00 AM to 9:00 PM. Monday thru Saturday. OP/IPD & home care services are also provided.



## Al Shifa Cardiac Department:

The Cardiology Department, under Dr Arif Wahab (D.M Cardiology) is now providing all state-of – art investigations on elective and emergency basis, routinely doing all types of 2D echo including adult and paediatric Echo, contrast Echo and Stress Echo.TMT and Head Up Tilt Test are also done on a routine basis. Recently holter monitoring and ambulatory B.P monitoring to our extensive list of non-invasive cardiac investigations is added. Temporary and permanent pacemaker facilities would be added to our hospital in near future.



**Dr. Arif Wahab, MD, DM (Cardio)**  
**OPD: Monday- Friday - 10:00 to 1:00 PM**

### Editors & Planner

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## PUBLIC AWARENESS COLUMN

### Vitamin D Deficiency Among Adults:

*Author: Dr. Abul Faiz, MD (Medicine)*

*Consultant, Al Shifa Hospital*

**Vitamin D**, also known as “Sunshine Vitamin” produced by the body in response to skin being exposed to sunlight (Ultraviolet B rays). It also occurs naturally in few foods and fortified dairy and grain products.

Vitamin D is essential for absorption of calcium through the intestines. Its deficiency leads to impaired intestinal absorption of calcium, which results in decreased level of serum total and ionized calcium level. This in turn gives rise to secondary hyperparathyroidism. This results in increased bone turnover (Bone resorption) and hypophosphatemia (by promoting phosphate excretion in urine). Both these factors result in mineralization defect in the skeleton.

#### Causes of Vitamin D Deficiency:

- Inadequate exposure to sunlight
- Dark Skin colour
- Strict vegan Diet
- Inadequate absorption through intestines (examples are celiac disease, Crohn's disease)
- Inadequate conversion of Vitamin D to its active form (examples are patients with chronic kidney and liver disease ageing people)
- Obesity (People with BMI  $\geq 30$  kg/M<sup>2</sup>)

#### Risk Factors for Vitamin D Deficiency

- Breastfed infants
- Older adults
- People with dark skin
- People with sarcoidosis, TB, Histoplasmosis or other granulomatous diseases.
- People who had gastric bypass surgery
- People who are on anti seizure drugs, glucocorticoids, anti HIV drugs.
- People with lymphoma

#### Symptoms of Vitamin D Deficiency

- Muscle ache and weakness, Muscle twitching
- Light headedness
- Bone pain
- Increased risk of bone fracture
- Depression
- It has found to be associated with advancement of some cancer such as breast, colon, ovarian and prostate cancer
- Unexplained fatigue
- Osteomalacia in adults – characterized by proximal muscle weakness and bone fragility.
- Rickets in children
- Osteoporosis – characterized by reduced BMD

#### Tests for Vitamin D deficiency

Confirmed by measuring 25 (OH) Vitamin D level in the blood. According to office of Dietary supplements (ODS) the results can indicate the following:

- ✓ Deficiency : Less than 12 ng/ml (30 nmol/L)
- ✓ Potential Deficiency : 12-20 ng/ml
- ✓ Normal Level : 20-25 ng/ml

### Prevention and its treatment:

Some steps you can take to maintain healthy vitamin D level include –

- Getting out in the sun without sunscreen on for 15 minutes each day
- Eating foods that are high in Vitamin D
- ✓ Egg yolk
- ✓ Mushroom
- ✓ Beef Liver
- ✓ Fatty Fish (Salmon, Tuna)
- ✓ Cheese
- Purchase and eat foods that are fortified with Vitamin D such as cereals and milk.
- Taking multivitamin that contains Vitamin D.

#### The ODS recommends the following dietary allowances –

- ✓ Age 0-12 months : 400 IU / day
- ✓ Age 1-70 Years (including pregnancy & Lactation) : 600 IU / day
- ✓ Age  $\geq 70$  years : 800 IU / day
- If you have vitamin D deficiency the treatment is with supplements. Check with your health care providers or Doctors who will decide how much how often and how long you need to take supplements.

**Vitamin D Toxicity:** Getting too much Vitamin D can be harmful. Signs of toxicity include nausea, vomiting, poor appetite, weakness and weight loss. Vitamin D toxicity results in hypocalcaemia which can cause confusion, disorientation and problems in heart rhythm (cardiac arrhythmia).

**CRUDE DATA FROM AL SHIFA LAB:** From July 2016 to June 2017 (One year)  
Total Vitamin D test performed: 3504  
Total below standard ( $<20$  ng/ml): 2803 (80%)

#### Vitamin D deficiency Among Children

*Author: Dr. Tarique Ekram, MD, Fellow (NMF)*

*Consultant (High Risk Baby Clinic)*

The prevalence of vitamin D deficiency is 50-90 % in the Indian subcontinent and is attributed to low dietary calcium along with skin color and changing lifestyle. Vitamin D deficiency is observed among breastfed infants at one end with dietary calcium deficiency in older children at the other end. Vitamin deficiency causes rickets in children.

#### Prevention

The most important factor determining the vitamin D status in infancy is the maternal vitamin D status. Though practically difficult, all pregnant women should have their 25(OH) D levels checked during the first trimester of pregnancy. If they are deficient they should be treated with 3000-5000 IU until 25(OH)D is more than  $>20$  ng/dL followed by 400 IU/daily.

Preterm infants should be supplemented from birth with 400-800 IU/day because of inadequate transfer of maternal vitamin D stores and issues associated with prematurity such as poor feeding, gastrointestinal difficulties impairing absorption and sometimes liver and kidney impairment. Universal supplementation particularly in breastfed infants has been suggested.

**Supplementation in newborn period:** For infants who are exclusively breastfed a minimum daily intake of 400 IU/day should be initiated within a few days after birth. Since most of the infant formulas contain 400 IU/L, infants who are on formula feeds also need supplementation unless they consume more than 1000 mL of formula per day.

**Toddlers and adolescents:** Children, who are dark skinned, veiled, exposed to reduce sun light or who have underlying medical condition should receive 400 IU daily to prevent vitamin D deficiency.

### Sources of Vitamin D

**Sunlight:** Most of circulating vitamin D is provided by synthesis from skin exposure to UVB radiation and <10% from dietary sources. Children, particularly infants may require less sun exposure to produce sufficient quantities of vitamin D because of greater capacity to produce vitamin D than older people.

Specker, et al. reported that exposure to sunlight for 30 min/week for infants in diaper and 2 hour /week for fully clothed infants without hat (since infants' scalp contributes a major part of body surface area) maintained vitamin D levels of >11 ng/dL. Asian children require three times the recommended amount of sun light exposure to maintain the vitamin D levels (because of dark skin colour).

**Dietary and supplemental sources of vitamin D:** Oily fish such as salmon, mackerel and sardines, cod liver oil, and liver and organ meats are rich natural sources that are not commonly consumed by children.

Fortified foods are being recognized as an important source of vitamin. Fortification of milk has been found to be a safe, effective and acceptable method. However, in a setting like India, where the per capita milk consumption is very low, consideration for other methods of fortification such as fortification of oil, cereal powders and even salt needs consideration. Since adequate sunlight exposure at solar noon is difficult to achieve because of modernization and existing cultural practices, supplementation and fortification may help in preventing vitamin D deficiency and such public health interventions need serious consideration in the Indian

**High risk Baby Clinic: ANNEXE – Al Shifa Hospital OPD:**  
**Monday to Saturday Time: 8:30 to 11:00 AM**

### Effects of Vitamin D on skin

**Author: Dr. Ujjwala Verma, MD (Dermatology)**  
**Consultant, Al Shifa Hospital**

While vitamin D is most well-known for its role in calcium absorption, it also affects skin conditions, including acne and psoriasis, both of which can be caused by an insufficient amount of vitamin D. Because the body synthesizes vitamin D-3, a form of vitamin D, through exposure to sunlight, you may be tempted to improve your vitamin D levels through sun exposure. If you decide to do so, be aware of potential dangers from too much sun exposure, including sunburns and skin cancer.

**Skin Rejuvenation:** A lack of vitamin D can lead to thinner skin that is more fragile and sagging.

**Healing Wounds:** Vitamin D-3 also helps to regulate anti-microbial proteins, namely cathelicidin, that not only support the natural immunity of the skin but also help with the general repair of damaged tissue.

**Acne and Vitamin D:** While hormonal balance and overall hygiene are primary causes of acne, a poor immune system due to low amounts of vitamin D in your system can also increase oil production in your skin cells and blocked oil-producing cells lead to the ugly blemishes that can afflict you at any time in your life. Sun exposure raises your vitamin D levels as your skin releases a chemical that produces vit. D.

**Vitamin D and Psoriasis:** Psoriasis is a thick, patch like, layer of dry skin cells on the outer layer of the skin. It can be itchy -- there are different kinds of psoriasis -- and the condition is associated with a poor immune system and, in certain instances, low vitamin D levels. The "Journal of Investigative Dermatology" showed that when exposed to ultraviolet-B rays, the element of sunlight that kick starts the vitamin D production system in the body, vitamin D levels increased significantly, and the symptoms of psoriasis disappeared. Similarly, a study in "Rheumatology International" also found that increasing vitamin D levels helped improve psoriasis symptoms.

**Dermatology; ANNEXE – Al Shifa Hospital**  
**OPD: Monday & Thursday Time: 10:00 AM to 12:00**

### An Academic Initiative:

#### Al Shifa Study Centre (ASSC) & Al Shifa Library

Al Shifa administration has decided to open a Study Center for Paramedical Courses. An application was submitted to IGNOU Study Center. Inspection from Regional Office IGNOU had taken place last month with positive comebacks. An initial course for Diploma in Geriatric has been applied.

A library is also being established for students as well as staff. Any donation related to establishment of Library and Study Center is welcome.

**Please contact Dr. Khalil**

Mobile: 9599687437 or email: studycenter@alshifahospital.net

### Hajj Pilgrimage

Insha'Allah, this year 2017 or 1438 H, Br. Abdul Nazar, Director (Adm) & Dr. Syed N. Khalil, Hospital Consultant/Centre Head- Annexe, are leaving for Hajj along with their family. May Allah accept their hajj and make hajj easy on them (Ameen)!

### DONATION

Al Shifa Multispecialty Hospital is one of the most fast growing non-profit Muslim hospitals in North India. Al Shifa is catering the health care service of more than two million middle class Muslim population. We need to expand our beds capacity & enhance some of our departments, please donate.

**DONATION OF ANY AMOUNT IS WELCOME**  
**PLEASE CONTACT**

**981.884.4498 X 157 & finance@alshifahospital.com**

**ANY COMMENTS/SUGGESTION, PLEASE EMAIL TO**  
**SYEDKHALIL@ALSHIFAHOSPITAL.NET**