

FOR YOUR INFORMATION:

MAIN SERVICE AREAS

Our main service points are:

i.- Accident and Emergency Unit which operates on 24 hours basis

ii.- Anaesthetic Unit with routine epidural analgesia for pain-free labour

iii.- Ambulance services

iv- Cancer treatment services using a Linear Accelerator and other equipments

v - Dental and Maxillofacial services

vi.- Dietetic services

vii.- Ear, Nose and Throat (ENT) Speech Therapy and Audiology Treatment Services including cochlea implantation

viii Family Planning and Reproductive Health services

ix .- Family Medicine; GOPD, GPOPD and VIP/ Private Wing

x. - Haemodialysis services for patients with kidney malfunction

xi. - In-Patients Wards comprising VIP/Private Wing, Semi-Private & Open ward

xii.- Intensive Care Unit (ICU) to cater for serious medical and surgical cases

xiii. -In-Vitro Fertilization (IVF) Services

xiv. -Labour Ward/Theatres for deliveries and infant care facilities

xv. - Laboratory services in microbiology/ parasitology, haematology/ blood transfusion/ morbid anatomy/ histopathology, chemical pathology, immunology, etc

xvi. - Medical Physics

xvii - Medicine Department

xviii. - Non-Clinical Services such as Administration, Engineering, Finance, etc

xix. - Nuclear Medicine with fully functional Gamma Camera

xx. - Nursing Services

xxi. - Obstetrics and Gynaecology where endoscopic surgery is performed

xxii. - Ophthalmology

xxiii - Oncology and Radiotherapy

xxiv.- Paediatrics and neonatal care services for sick children

xxv. – Pain Management & Palliative Care

xxvi - Pharmacy

xxvii - Physiotherapy services

xxviii- Psychiatry services

xxix- Radio-Diagnostic services using ultra-modern X-ray machines such as mammography, 16 -Slices CT-Scan, Magnetic Resonance Imaging (MRI),etc.

xxx.-Surgery: General, Orthopaedic, Neurosurgery and Spine where a full range of minor and major operations including endoscopic, knee and hip replacement procedures are performed

xxxi - Urology services including Trans-urethral prostatectomy .

THE NUCLEAR MEDICINE

The Nuclear Medicine Department offers the following medical investigations:

CARDIOVASCULAR SYSTEM

Gated Stress Myocardium Perfusion study, Venography, Lymphangiography, Stress MUGA, Resting MUGA

GASTROINTESTINAL TRACT

Blood Pool study for GI Bleeding, Gastro-Oesophageal Reflux study, Gastric Emptying, GER and Gastric Emptying, Hepatobiliary Scan, Meckel study, Salivary Gland study.

TUMOUR IMAGING

Gallium Scan, 1-131 MIBG Scan

Parathyroid Scan, Scintimammography

BRAIN

HMPAO Brain SPECT, Radionuclide Cisternography for CSF Leak, SPECT for Brain Tumour recurrence, MIBI Brain SPECTm, ECD Brain

SKELETAL SYSTEM

- Bone Scan
- SPECT Bone Scan
- Bone Marrow Imaging
- Infection Imaging
- P-32 Therapy for Bone Metastasis
- Strontium Therapy for Bone Metastasis

RESPIRATORY SYSTEM

- Lung Ventilation/Lung Perfusion

THYROID IMAGING

- 99MTC Thyroid, 1-131 Uptake and 1-131 Whole Body scans
- 1-131 Therapy for Thyrotoxicosis
- High dose 1-131 Therapy for Thyroid Cancer

GENITOURINARY SYSTEM

- ❖ DTPA Scan and GFR
- ❖ Captopril DTPA study for screening of Renal Hypertension
- ❖ DMSA Scan
- ❖ Renal Transplant Evaluation
- ❖ Testicular Scan

INFECTION IMAGING

- ❖ Leucocyte Scan for infection

SERVICOM WORK ETHICS

- Proper dressing and appearing responsible
- No loitering in the corridors
- Keep offices and toilets clean
- No closing before time
- Be guided by the concept of quality service delivery
- Always be on your seat
- Response to request from clients must be processed within (15) working days by schedule officers, or acknowledgements sent within 48 hours if the matter is complex
- All matters pertaining to ad-hoc and special assignments should be handled within the specified period
- Attend to customers/clients politely and specify time targets for attending to them
- Reasons for delays should be explained politely.

DRESS CODE (SERVICOM)

The following are the modes of dressing for men and women Public Servants:-

FOR MEN

- Complete agbada with cap.
- Kaftan with cap
- Complete Suit
- Long sleeve shirt and trouser with tie
- Long sleeve shirt and trouser with tie (with or without coat)
- French suit

FOR WOMEN

- Skirt suit
- Complete suit (with ladies tie or without)
- Buba and Iro
- Wrapper and Blouse
- Trouser and shirt or trouser and blouse(not jeans)
- 'Agbada' (free wear)
- Long Skirt and Blouse

Dress decently to project and maintain your personality!

Dress moderately to protect your dignity!!

Dress responsibly to promote the public Service!!!

**AN INTERVIEW WITH THE
CONSULTANT NEUROLOGIST
NATIONAL HOSPITAL ABUJA, PROF.
S.A. BWALA ON STROKE UPDATE**

Sir, Could You Brief Us On The Latest Information About Stroke?

Stroke could be defined as a sudden Neurological deficit in the Neuron system lasting more than 24hrs due to blockage or bursting of the arteries supplying blood to the brain.

Statistics have shown that stroke is the leading cause of disability in adult globally and it is the second major cause of death globally.

It was also established that among patients with stroke diagnosis, 30% die within a month, 30% are disabled for life, while 40% recover fully and go back to their normal life.

The American heart and stroke Associations being the bodies that set guidelines for global practice on stroke related issues are considering a review of the 24 hours limit of stroke diagnosis to one hour or even without a time limit. This is due to the advancement in technology. Machine like MRI (Magnetic Resonance Imaging) makes it possible and easy to detect a stroke in a shortest period.

Who Are At Risk Of This Dreaded Ailment?

It has been established globally that the following categories of people are more Susceptible to this dreaded menace.

- (a) Hypertensive patients
- (b) The elderly
- (c) Diabetic patients
- (d) Those with high cholesterol and
- (e) Black race, because of genetic disorder.

What Are The Ways Of Managing A Stroke?

In Europe, Brain Scan has been made a conditionality for all suspected stroke cases. Germany Championed a mobile Brain Scanner stationed in strategic areas in every locality for quick diagnosis and medication right away.

The standard for global practice is that treatment of stroke should commence within the first 3 hours to four and a half hours.

Furthermore, it has been established that the treatment of blood pressure could reduce the chance of having stroke by 30%. Treatment continuation reduces the chance again by another 30% In line with this; The World Health Organization has recently given 140

90

as the normal range of blood pressure.

For better result, Diuretics calcium channel blockers could be administered on black people while treating a stroke.

Sir, What Call Do You Have On The Government?

Stroke could be reduced to barest minimum if the Federal Government would embark on a free test and medication for blood pressure. Brain Scan should be made available and affordable. The public should be educated on the need for routine screening and government is expected to make this routine screening accessible at home, at work and in public places. Stroke reference centre /units should be established in hospitals like National Hospital, Abuja and others.

What Advice Do Have For The Public?

Individuals should avoid too much salt in meals, tobacco and alcohol. They should also measure their blood pressure frequently, have enough exercise and adopt a generally healthy life style in order to be free from a stroke. **Prevention is better than cure.**

NHA NEWS

MICROBIOLOGIST ADVICES ON THE USE OF ANTIBIOTICS

Dr Kenneth C. Iregbu, A Consultant Clinical Microbiologist with the National Hospital Abuja

has advised on rational use of anti-biotics in surgical prophylaxis. He gave the advices recently at the National Hospital during a Continuing Medical Education programme.

Dr Iregbu said, inappropriate use of antibiotic prophylaxis (Treatment for preventing disease) can increase morbidity and mortality rates. A study shows that about One Million patients suffer surgical site infection yearly in the United States and results in \$1.5 billion addition in health care cost.

The Microbiologist, who described timing in the administration of antibiotics as very critical, further advised that prophylaxis should not be administered beyond 24hours. He also indicated that for a better result against resistant organisms, it is most appropriate to use narrow spectrum than broad spectrum antibiotics.

Earlier in his presentation, the Consultant emphasized that diabetic patients, clean contaminated and contaminated surgeries all need prophylaxis while dirty surgery needs full treatment and not prophylaxis.

CHAIRMAN MTC CHARGES DOCTORS ON SELFLESS SERVICE.

The Chairman Medical Advisory Council-Training Committee National Hospital Abuja, Dr A. C. Umezulike has recently charged Medical personnel to render selfless Service to humanity, honestly, humbly and sincerely. In his words of advice, the Doctor said “No

body will pay you enough and you can't satisfy the patient, so only God can pay you.”

He then urged them to be loyal to the constituted authorities while discharging their duties professionally.

POST OPERATIVE PAIN RELIEF REDUCES MORBIDITY

Effective post operative pain relief reduces morbidity of patients. Dr. Edem Nehemiah a Chief Consultant Anesthetist and also a Pain Management Specialist National Hospital Abuja disclosed this recently during a training programme conducted by MAC training Committee at the National Hospital, Abuja.

In his presentation, the Doctor explained that post operative pain results from surgical incision which when treated adequately could make the patient recuperate early. It would also hasten patients' discharge and hence reduces patient's bill.

Dr. Nehemiah who enumerated various methods of relieving Post Operative Pains, indicated that Post Operative Pain Service (POPS) is a new concept in Pain Management. He emphasized that ketamine intravenous analgesia (pain reliever) was not suitable for hypertensive patients. He also indicated that under treated or untreated acute pain could lead to cardiovascular, respiratory, gastrointestinal, neuro- endocrine/ metabolic, musculo skeletal system, and psychological problems.

OROPHARYNGEAL AIRWAY SAVES LIFE

The use of Oropharyngeal Airway could save the life of an unconscious patient. This was made known recently by Dr. Shola Jamgbadi, a Senior Consultant Anesthetist National Hospital, Abuja while presenting a paper entitled “management of Airway in an unconscious patient” during a training organized by MAC training Committee at the National Hospital, Abuja.

Dr. Jamgbadi who identified the unconscious patient as being planned to be unconscious or unplanned, emphasized that clearing the oropharynx of secretions and solid matter and the insertion of the Oropharyngeal air way can be life saving pending the take-over by the appropriate medical personnel. He also identified LMA, Combi Tube, Combi gel, Larygeal max airway as other forms of airway adjuncts.

He further identified the challenges of the life saving procedure as: presence of trained personnel, availability of relevant drugs, suction machine, airway adjuncts etc. He then described flexing the neck, extension of the atlanto- occipital joint and lifting of the angles of the mandible as important maneuvers in the management of the airway in unconscious patient.

MAXILLOFACIAL SURGEON DISCOURAGES MEDICAL TREATMENT ABROAD

Travelling abroad for medical treatments is largely due to lack of synergy of medical practitioners. This was made known recently by a Consultant Oral and Maxillofacial Surgeon, state House Medical Centre, Abuja Dr Seidu Adebayo Bello, during an update course for Dental Practitioners held in National Hospital, Abuja.

Dr Seidu said Medical Practitioners in the country could develop credibility for their practice if group practice is developed.

Earlier in his presentation, the maxillofacial surgeon gave visual examples of successful maxillofacial surgeries carried out in the country.

GYNAECOLOGIST ADVICES MOTHERS ON BREASTFEEDING

The Paediatrics Department of the National Hospital, Abuja has recently organized sensitization talks on breast feeding to mark this year's breast feeding Week. While commenting, The Head of Department Obstetrics and Gynaecology, National Hospital, Abuja; Dr Olayinka Olaniyan explained that breast feeding is something that is ordained by nature and as such should not be overlooked but to ensure its complete implementation. He also indicated that the first yellow fluid helps the baby to prepare for

effective weaning as it contains antibodies that fight diseases. Breast feeding makes babies behave in a human way, prevents women from having breast cancer and also serves as a natural form of contraceptive for women because most lactating mothers don't menstruate until they wean their babies.

The importance of breastfeeding cannot be over emphasized as such it is one of the oldest most celebrated events in the world. The World Health Organization being the organizer of this programme encourages optimal and strict adherence to exclusive breast feeding for infants in the first six months of birth as it stimulates babies' immune system. This year's campaign for World Breast Feeding Week was themed: "Understanding the Past – Planning the Future".

SEDENTARY LIFE STYLE LEADS TO CARDIAC ARREST

A consultant Cardiothoracic Surgeon at National Hospital, Abuja Dr Yahaya Baba Adamu has called on Nigerians to have a yearly Medical check up and to avoid sedentary life style so as to be free from cardiovascular diseases. The Surgeon who is the Assistant Secretary of the Nigerian Cardiac Society made the call recently at the National Hospital, Abuja. He further stated that risk factors for cardiac arrest include smoking, high blood pressure and consumption of fatty diet.

DERMATOLOGIST WARNS AGAINST THE USE OF PERFUMES

A Consultant Dermatologist with the National Hospital Abuja, Dr Falodun Olanrewaju has recently cautioned on indiscriminate use of perfumes, deodorants and perspirants which he said could lead to allergic or irritant dermatitis. Dr Falodun explained that though perfumes or deodorants are regarded as symbols of status, the chemicals used in producing them could irritate the skin; as such moderation should be exercised while using them. He then advised individuals who react to perfumes or deodorants to use simple good creams and remain clean instead.

ARTICLES/WRITE UPS

HEALTH HAZARD OF GSM CELL PHONES

By

**Dr Jawa, Zabah Muhammad MBBS, MSc,
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European Board certified in Nuclear Medicine,
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Head, Nuclear Medicine, National Hospital Abuja

A mobile GSM cell phone is an electronic device that is capable of making and receiving telephone calls over a radio wave. This is made possible by connecting to a cellular network provided with a mobile phone

operator, allowing access to the public cell phone network. In addition to telephony, modern mobile phones also support a wide variety of other services such as text messaging, MMS, email, Internet access, short-range wireless communications (infrared, Bluetooth), business applications, gaming and photography etc.

The first hand-held mobile phone was demonstrated by Dr Martin Cooper of Motorola in 1973 which weighs about 1kg, since then there have been significant improvements in GSM cell technology and usage world wide.

The principle of operation of mobile phone is complex, however, in the process of sending and receiving calls the cell phone releases energy called the radiofrequency radiation (RF). The RF radiation is believe to be the major cause of many of the health hazards associated with usage of mobile cell phones. RF radiation produces heat that is capable of causing damage to human body tissue depending on the amount the user is exposed. Consequently, radiation effects depend on the RF radiation dose, the time span over radiation dose delivered – longer duration is more damaging, the Part of the body exposed and the age of the user, the younger the user, the more severe the body tissue damage. RF radiation induced-tissue damage can follow immediately after exposure or may be years after exposure. Some damage can be

transmitted to the user's future generations through genetic alterations and derangement.

Factors that increase the risk of RF radiation damage to human tissue are;

1. Duration and Frequency: Duration refers to how long the user stays on the cell phone, while frequency refers to the number of calls made. The longer the duration and frequency of calls, the higher the amount of RF radiation emitted from the cell phone and the higher the risk of tissue damage and health consequence. However, duration of calls seem to be more risky than frequency. Clinical research has shown that the use of cell phone for more than 30 minutes every day increases the risk of brain cancer by 40-50%. Again, call duration seem to be riskier than number of call made each day.

2. Sending or making calls (Speaking): RF radiation is higher when speaking on the phone than when listening.

3. Amount/number of cell phones in environment (cell phone traffic): the more the number of cell phones carried by an individual and the amount of cell phone around the environment, the higher the RF radiation.

4. Distance from cell tower/ station: The farther you are from the nearest cell phone station, the higher the power needed to maintain a connection by the cell phone and the higher the RF radiation emitted by the cell

phone. This is because; greater distances from the cell phone tower cause the cell phone to emit greater amounts of RF radiation.

5. Quality of cell phone transmission: the poorer the quality of cell transmission and network service the higher the RF radiation and the higher the risk of body tissue damage.

6. Size of cell phone: the bigger the cell phone the higher the amount of RF radiation. Smaller cell phone produces less RF radiation.

7. Storage: where an individual stores his/her phone determines the chances of body damage. Cell phone placed closer to sensitive body organs e.g. Breast, testicles, increases the risk of cancer in those organs.

It is very important to note that Children are more at risk from the effect of cell phone damage because their Immune or defense system is less matured and their developing skulls are smaller and thinner and radiation is able of penetrate more deeply.

The usage of cell phone during pregnancy significantly increases the risk of giving birth to children with behavioral abnormalities and impaired hearing.

Health effects associated the with usage of GSM cell phones include;

1. Brain cancer.

2. Cancer of the inner ear

3. Cancer of the salivary gland (organ that produce saliva)

4. Skin cancer and damage, especially skin over the area where phone is placed during calls.

5. Infertility; Cell phone is associated with reduce sperm count in males and ovary abnormalities in female especially if the cell phone is stored close to the these organs.

6. Hearing loss

7. Loss of memory, excessive cell phone usage has been associated with loss of memory especially remembering number (numerical amnesia)

8. Sleep disorders, excessive usage of cell phone has been associated with inability to initiate and sustain sleep.

9. Other illness and disorders associate with cell phone usage are loss of concentration, irritability, and headache.

The reason for health concern;

1. The number of mobile phone users worldwide is about 3.3 billion by the end of 2010, a total penetration rate of 49 percent.

2. Africa showed the greatest increase in cell phone use, and more than two-thirds of all cell phone subscribers now come from developing

countries. Cell phones account for nearly 90 percent of all telephone use in Africa.

Every time you use a cell phone, you are exposing your body to RF radiation.

Reducing the risk of health hazards of cell phone

1. Reduce call duration and frequency, do not stay longer than 20minute on a single call and reduce frequency of making or receiving calls to about 10-12 times in a day. Turn off your cell phone more often. Reserve it for emergencies or important matters. Use text message and email.

2. Reduce the number of cell phone you carry, if possible carry only one cell phone. Turn your cell phone off when not in use: As long as your cell phone is on, it emits RF radiation intermittently, even when you are not actually making a call.

3. Do not store your cell phone in sensitive areas of the body e.g. breast and genital regions. Do not sleep with your cell phone or store them under your pillow.

4. Use your cell phone only where reception is good.

5. Use Safer Headset Technology e.g. Bluetooth

6. Cell phone radiation shields. These are small plastic devices that you can stick on

your cell phone and it has the capacity to reduce your exposure to RF radiation

7. Children and pregnant women should never use cell phone except when it is absolutely necessary.

Recommendation

I strongly recommend and encourage the general public particularly children and pregnant women to limit their exposure of RF radiation emitted from cell phones by reducing call time and carry only one cell phone, by making calls where reception is good, by using hands-free devices or speaker options, or by texting.

AUTISM

By WAHAB S. Romoke

Speech Therapist National Hospital Abuja

Autism is a complex developmental disability that typically appears during the first three years of life as a result of a neurological disorder that effects normal functioning of the brain, impacting development in areas of social interaction, communication and imaginative skills. Both children and adults with autism show difficulties in verbal and non verbal communication social interaction and leisure or play activities.

The cause of autism is still unknown; however, autism is five times more common than Down

syndrome and three times more common than juvenile Diabetes. There is no medical test for Autism. Diagnosis is usually based on observed behavior and testing. Every 2nd of April is World Autism day.

TRIADS OF IMPAIRMENTS ARE:-

- Lack of social skills
- Communicative difficulties
- Repetitive behavior

THERE ARE OTHER NOTICEABLE SIGNS AND THEY ARE AS FOLLOWS.

- Lack of gestures'
- Repetitive movement or posturing of body
- Lacks of warm, and joyful expression
- Unusual prosody
- Lack of response to name
- Lack of appropriate eye gaze
- Repetitive movement with objects
- Lack of sharing interest or enjoying others
- Handles or spin objects
- Copies words like a parrot (echolalia).
- Does not play with other children
- Inappropriate laughing and giggling

Further more, no particular treatment that fits all but autism can be managed through special education, behavioural and medical Management. The autistic children are often advised to be placed on special diet:

- Gluten free Diet (GF)

➤ Casein free Diet (CF)

As the gluten and casein free diet are implemented, improvement in autism symptom are often noted as the diet evolves and progresses for some children. Finally, early intervention and special education however does improve the quality of life of autistic individuals.

ROLES OF HEALTH RECORDS OFFICERS IN HEALTH INSTITUTION.

BY ADIO RASAQ ADETONA, HEALTH RECORDS DEPARTMENT
NATIONAL HOSPITAL ABUJA.

Preamble:

Health Records is the accounts of health problems that brought the patient to the hospital, the doctors observations, investigations made and treatments given to bring patient back to health written in medical point of view. Records can be paper, film, photograph, drawing-plan etc. We have manual and electronic records. It is records if it is meaningful and useful.

The Health Records Department is the Health information centre of the hospital mainly responsible for taking custody, control and retrieval of patients' health records. The department is not only the first and last port of call, but it is equally an image builder of the

hospital. Its services cut across all specialties and this explains why the department is a pivot over which other departments revolve in any hospital.

WHO ARE HEALTH RECORDS OFFICERS

Health Records Officers are the senior members of the department who have undergone four years training in any recognised mono-technic or University, obtained HND or BSc. in health information management, had the mandatory service (NYSC), registered and licensed to practice.



A Health Records Officer Attending to a Doctor's Information Needs



Health Records Library in Developing World



Health Records Library In Developed World

ROLES OF HEALTH RECORDS OFFICERS

Role according to definitions.com on the web is a prescribed or expected behaviour associated with a particular position or status in a group or organization.

Princeton's wordNet defined role as the actions and activities assigned to or required or expected of a person or group.

In essence, Health Records Officers are trained to carry out the following duties and responsibilities in health institutions:

- Organize and manage Health Information Services in a Health care delivery system.
- Co-ordinate the collection, storage and retrieval of health information.
- Organize the preservation of health records and its maintenance.
- Formulate, collate, analyse, present, interpret and disseminate health statistical data.
- Plan a health records department and prepare budget for its running.
- Participate in planning, quality control and evaluation of health care delivery.
- Participate in relevant committees in defining the standard for health records systems.
- Participate in conducting research on epidemiological studies and clinical trials
- Advice on medico-legal aspect of health records, release of information from records and preservation of records etc.
- Standardize health records forms design and control
- Participate in setting health policy and diseases processes
- Provide health specialists with critical insight into the nature of Management and their application to and relationship with the environment in which they operate

Apart from the above statutory roles, Health Records Officers have the following improved customers care and effective service delivery roles to play as a panacea to achieving statutory roles

- Warm reception and prompt registration of new patients
- Prompt retrieval of old patient case notes
- Address patient politely and painstakingly in solving patient's problems.
- Treatment of patient complaints with dispatch and provision of feedback promptly if required
- Concerned about the plight of the patients, ask question from troubled or confused ones and take up responsibility to solve their problem
- Maintaining good interpersonal and interdepartmental relationship to ensure that patient receive prompt and quality care
- Difficult patients who exhaust the tolerant level of the department should be promptly reported to the management

ACHIEVEMENT AND SUSTAINANCE OF THESE ROLES

In order to achieve and sustain these roles, there is need for the following:

- Effective communication management
- Good interdepartmental relationship

- Training and retraining of the staff of the department
- General improvement on working tools and equipment
- Provision of conducive environment for the staff to work and motivation as at when due.

BENEFITS OF THE ROLES TO THE HEALTH INSTITUTION

Nowadays, many organizations have come to realize that their business prospects do not just rely on information handling and information technology at the margin in terms of efficiency, better productivity or lower cost. Rather they have been made to understand that their long-term existence depends on the successful use of information and that their future depends critically upon good management of new information based activities to support management in order to deliver new products and services. This assertion is equally true of health sectors with complex and large volume of information.

Health Institution needs information:

- To take sound clinical judgments
- For performance measurement and improvement
- To disseminate, to inform its clients and public
- To provide standard and qualitative care
- For Research, teaching and education
- To defend in case of litigation
- To plan for development,

- For efficient handling of basic services transaction
- For better combined decisions on requirements and resources
- To monitor project progress
- To avoid duplicated or error-prone activities
- To set targets/goals and evaluate the target /goals set

Therefore, the information needed cannot always be anticipated and normally needs to be aggregated from number of sources. In a health setting, Information is required in an ad-hoc fashion at relatively short notice to help resolve issues or assist in making a specific decision.

This explains why enough health records officers should be available or present in all tiers of our Health Sector so as to bridge the gap already created in the system. The belief that anybody can work in health records department is erroneous and should be discouraged while immediate action is taken to recruit qualified health records officers to fill the gap.

CONCLUSION

The roles played by health records officers in health institution are not only important for effective health care delivery but also necessary ingredients required for the development and sustenance of any health institution. Therefore it is time to allow this

crop of officers to play their roles by creating enabling environment if qualitative and evidence based-medical services are anything to go by.

RECOGNIZING AND CARING FOR RTI IN NIGERIAN CLINICAL SETTING-THE PAEDIATRIC EXPERIENCE

*By DR PATIENCE AHMED
CHIEF CONSULTANT PAEDIATRICIAN NHA.*

Respiratory Tract Infections are diseases of the Respiratory System, which could either be acute or chronic.

Acute respiratory tract infections are a significant cause of morbidity worldwide, Information on the epidemiology and seasonality of these acute infections is important in planning vaccination and treatment strategies. In temperate climates, there are distinct seasonal peaks in the winter months. Despite the absence of a winter season tropical countries respiratory syncytial virus and influenza infections have been observed mainly during the rainy seasons in Asian, African and South American countries.

DISEASE BURDEN/PREVALENCE:

- ❖ Acute Respiratory Infection disease burden was estimated at 94 037 000 disability adjusted life years (DALYs) and 3.9 million deaths (WHO, 2002)
- ❖ Collectively, Acute Respiratory Infections cause at least 6% of the world's disabilities and deaths.
- ❖ Acute Respiratory Infections cause 4.25 million deaths each year often among young children and in developing countries.
- ❖ These deaths occur overwhelmingly in the world's poorest countries, where the drivers of ARIs, include malnutrition, pollution, overcrowding, and tobacco use as most prevalent causes of death in children below 5 years.
- ❖ ARI often associated with other life-threatening diseases such as measles. In a community study reports, 62% of all deaths were attributable to ARI but most of these were associated with measles.
- ❖ When measles deaths are excluded, the proportion falls to 24%.
- ❖ With immunization proportion of deaths directly attributable to ARI declines from 23% to 18% and then 15% as under – 5 mortality declines from 50 – 20 and then to 10/100 per year.

(<http://www.who.int/vaccine-research/diseases/ari/en/index.html>)

- ❖ The death rate from pneumonia is 215 times higher in low-income countries than in high-income countries
- ❖ Pneumonia accounts for 20 percent of all child deaths globally, or 1.6 million deaths in 2008, compared to 732,000 children who died from malaria and 200,000 who died from AIDS-related causes.

HOW THE DISEASE SPREADS:

- ❖ Person – to person spread of viruses account for most URIs.
- ❖ Airborne spread-both bacterial and virus infections;
- ❖ Upper Respiratory Infections involve direct invasion of the mucosa lining the upper airway.
- ❖ Inoculation by bacterial or viruses begins when secretions are transferred by touching a hand exposed to pathogens to the nose or mouth or by directly inhaling respiratory droplets from an infection person who is coughing or sneezing.
- ❖ After inoculation, viruses and bacterial encounter several barriers including physical, mechanical, humoral, and cellular immune defenses.
- ❖ Hair lining the nose filters and traps some pathogens.
- ❖ Mucus coats much of the upper respiratory tract, trapping potential

invaders. The angle resulting from the junction of the posterior nose to the pharynx causes large particles to impinge on the back of the throat.

- ❖ Ciliated cells lower in the respiratory tract trap and transport pathogens up to the pharynx; from there are swallowed into the stomach.

- ❖ Epiglottitis (supraglottitis) – Inflammation of the superior portion of the larynx and supraglottic area
- ❖ Laryngitis – Inflammation of the larynx, trachea, and subglottic area
- ❖ Tracheitis – Inflammation of the trachea and subglottic area
- ❖ The lower tract inflammations: Bronchitis, bronchiolitis, pneumonias.

THE VARIOUS INFLAMMATIONS OF URT RESULTS IN:

- ❖ Rhinitis (common cold)
- ❖ Pharyngitis and laryngitis (sore throat)
- ❖ Sinusitis,
- ❖ Epiglottitis
- ❖ Laryngitis, and
- ❖ Tracheitis and special manifestations of URIs.
- ❖ Rhinitis – Inflammation of the nasal mucosa
- ❖ Rhinosinusitis or sinusitis – Inflammation of the nares and paranasal sinuses, including frontal ethmoid, maxillary, and sphenoid
- ❖ Nasopharyngitis (rhinopharyngitis or the common cold) – Inflammation of the nares, pharynx, hypopharynx, uvula, and tonsils
- ❖ Pharyngitis – Inflammation of the pharynx, hypopharynx, uvula, and tonsils

CONCLUSION:

Respiratory Tract Infection remains a significant cause of morbidity and mortality worldwide. Predisposing factors include malnutrition, poverty/overcrowding, environmental hospital setting. Managing these ailments imposes enormous burdens on our resources. Burden of childhood pneumonia should be given high priority.

It is therefore fitting, that the most appropriate and cost effective approaches are employed. Preventive measures include improved living condition, nutrition, vaccination etc.

HUMAN RESOURCES DEVELOPMENT SERIES

by

Rabiah M.B Labaran Management Information
Services Department.

In the last edition, I highlighted good attitudinal traits as key to healthy living and success of an individual.

In this series, I have decided to give the writing a new twist so as to captivate the attention of my audience by releasing the lessons in series. This is as a result of the understanding that organizations suffer set back in productivity and output, not because the employee lack the prerequisite qualification or certificates to deliver but as a result of a wide array of attitudinal malaise of either the management, staff or clients in an organization; the reason why this human resource development series becomes handy. I remember the last time an attitudinal week was organized for national hospital staff in the Dome, Abuja in 2006, where staff took time to learn from the lectures, unwind and also

interact freely with the CEO, Management Team and other employees of the Hospital in an interesting and interactive manner. Similar event should be organized in hospitals nationwide to ensure cordial relationship between the employer and the employees. This series became necessary and decisive most especially at this time when most hospital staff in the country are experiencing low morale precipitated by lack of communication and/or miscommunication. On the other hand, SERVICOM offices in hospitals nationwide receive a lot of complaints on lack of effective service delivery. This series will serve as a reminder on the roles and responsibilities of individuals to the organization colleagues and clients which when fully harnessed and fulfilled will lead to job satisfaction, good interpersonal relations and positive responses from the management for a better output generally.

When individuals and groups focus on their responsibilities rather than their rights, their rights will ultimately and divinely come knocking on their doors. This is the real secret of success and happiness. By avoiding the

wrong attitudes and imbibing the right ones, the sky is just the beginning of your success.

Here are some soul searching Questions I want my readers to ask themselves and wet their appetite in preparation for the main dish coming up in our next edition God's willing.

1. What am I here (in this organisation) for?
2. Am I still on the right course?
3. Can I look back and see myself as an achiever/contributor (to my organisation) or a failure so far?
4. Do I still have room to impact/achieve more?
5. What new resolutions do I need to make to impact positively in my Organization/Department/Unit?
6. Remember the time to make that U-turn is now.
7. How do I intend to go about making a difference in my place of work?

Remember people are usually remembered not by the troubles they created and left behind, but by the solutions they were or they created.

Thank you. Until we see again in our next series in the forthcoming edition of National Hospital Newsletter.

SEE YOU THEN.

QUOTES AND WISE SAYINGS

1. "One dictum I had learned on the Battlefields of France in a far distant war: You cannot save the world, but you might save the man in front of you, if you work fast enough."
— [Diana Gabaldon](#)
2. "The patient is the one with the disease"
— [Samuel Shem](#),
3. "Wherever the art of Medicine is loved, there is also a love of Humanity."
— [Hippocrates](#)
4. "It is very expensive to give bad medical care to poor people in a rich country."
— [Paul Farmer](#)
5. "In my opinion, our health care system has failed when a doctor fails to treat an illness that is treatable."
— [Kevin Alan Lee](#)
6. "The food you eat can be either the safest and most powerful form of medicine or the slowest form of poison."
— [Ann Wigmore](#)

AWARDS

The pioneer Head of Department of Health Information Managers' in National Hospital Abuja, the citadel of Health Care Services in Nigeria, Alhaja Amudat Abubakar was recently crowned with an "Outstanding Service Achievement" Award by the Health Information Managers' Association of Nigeria (HIMAN).

Mrs Amudat who served the association in two different capacities as two terms Vice President and two terms Board Member of the association was found worthy in character and in career for this prestigious award which was presented this year 2012, borne out of her extraordinary service, devotion, determination, commitment and willingness to dedicate her talents, skills and abilities to her profession.

Refreshing our memories by going through the history of awards in the hospital, it is pertinent to mention that Mrs. Shetu Ibrahim, a former Head of Nursing, Matron Mbursa Hamidu Bwala of Nursing Services Department, Mr. Thomas Edomsowan an Asst. Director Finance /Accounts, Dr. Jacob Adetayo Hastrup, HoD/MIS and Mr. Ayodele Olatunbosun Valentine, a Senior Executive Officer have also in the past bagged the award of Ambassador for Peace.

CONGRATULATORY MESSAGES

The following members of staff have been blessed with bouncing babies recently:

- ✓ Mr Moses Igbawua (Information) .
- ✓ Mrs Lawal Bunmi (SCBU)
- ✓ Dr Jawa Zaba (Nuclear Medicine)
- ✓ Mal Habib Mohammed (Administration)

The Children were named " Wese", " Beauty", "Aliyu" and " Maryam" respectively.

On behalf of the Hospital Board, and entire staff, the Management of National Hospital Abuja expresses delight and heartily congratulates them on these bounties. May God Almighty grant them the wisdom, foresight and the wherewithal to train the babies appropriately.

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0703 -492 - 8531} “

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