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LITERATURE REVIEW

Prevalence of Tobacco Use and Awareness of Risks Among children in Jaipur

V. Singh, R.Gupta JAPI 2006, 54, 609-612

Smoking and tobacco use are a major public health issues in developing countries. We performed an epidemiological study to determine the prevalence of smoking and tobacco-use and awareness of risks of tobacco use among school children. Students in randomly selected schools in Jaipur were studied. Students in classless 9-12 (age 13-18 years, boys 2866, girls 939) were enrolled. Medical social workers filled in information regarding presence of smoking and other forms of tobacco use among these children. Details of presence of tobacco use among family members, awareness of harms of tobacco and proactive role of children were also inquired. Fifty nine boys (2.1%, 95% confidence interval 1.5% to 2.6%) and 16 girls (1.7%, 0.9% to 2.5%) agreed to current tobacco use. Smoking cigarettes or bides was present in 43 boys (1.5%, 72.8% of users) and 8 girls (0.8%, 50.0% of users). Smoking or tobacco use was present in immediate family of 1208 boys (42.1%) and 304 girls (32.4%) (P<0.001) but was significantly more in family of children who used tobacco (boys 51/59, 86.4%, girls 11/16, 68.8%). 2842 boys (99.2%) boys and 934 girls (99.5%) were aware that tobacco use is harmful and similar proportions disliked it. More than 90% students were aware of its importance in causing respiratory diseases and the majority of boys and girls, respectively, knew of its potential to cause general debility (55.7%, 54.1%), hear disease (56.8%, 58.3%), cancer (64.6%, 64.6%), impotence 40.9%, 23.2%), ulcer of stomach (48.1%, 46.4% and death (68.2%, 68.1%). 76.4% boys. And 75.7% girls considered quitting to smoke beneficial and 77.1% boys and 75.8% girls knew that passive smoking is bad. 75.7% boys and 75.0% girls would insist that no-one smokes in their presence. 1592 boys (55.5%) and 507 girls (54.0% remembered seeing tobacco related advertisement in news-paper and could recall name of the brand. 57.2% boys and 62.4% girls agreed to participate in a tobacco-awareness and cessation program, however only 5.2% of the students had attempted tobacco-control among family or peers. There is low prevalence of smoking and tobacco use in school children in Jaipur. Awareness of harmful effects of tobacco is high.

Risk of Live Kidney Donation-Indian Perspective

Manisha Sahay, G Narayen, Anuradha , JAPI .VOL. 55. April 2007

Introduction : Live kidney donation is an established form of organ donation but carries the risk of an unnecessary surgery in a normal individual for the benefit of the recipient. Ong term effects of nephrectomy have not been studied in Indian donors so far the aim of this pilot study was to review the effects of kidney donation on morbidity (renal function, BP and proteinuria), psychosocial outcome and mortality. Fifty donors who had nephrectomy 3 months to 20 years prior formed the material of this study. Medical history (donor age at nephrectomy, duration post-nephrectomy, family history), physical examination including anthropometry and systolic and diastolic blood pressure (SBP andDBP) measurement pre and post nepherectomy were recorded. Evaluation of renal function included pre and post-nepherectomy ruinalysis, determination of microalbuminuria, serum creatinine, blood urea, 24 hr urinary protein and creatinine estimation and calculation of creatinine clearance. Renal length was measured by ultrasonography. Quality of life (QOL) was assessed by a standard questionnaire. Donors with co-morbidities not related to nephrectomy were excluded from the analysis. Data was statistically analyzed. Twenty two donor (44%) were males and 28 (56%) females. Parents constituted the majority 39 (78%); 10 were siblings (20%) and 1 was a spousal donor. The mean age at donation was 41.26 -+ 8.12 years (25-54.16 years).Since kidney donation a mean time interval of 63 months (3-264 months) had elapsed. There was a mean rise of 9.96 mm Hg in SBP and 7.18 mm Hg in DBP. Hypertension was noted in 23(46%). 20 donors (40%) developed microalbuminuria (MAU) post nephrectomy and 7 (14%) developed overt proteinuria (>300 mg/day). Mean GFR pre and post nephrectomy was 102.74+- 6.91 m1/min and 74.54+- 14.64 ml /min with a mean reduction of 28.2 +- 13.57 ml/min. There was no significant change in serum creatinine after donation (0.97 +- 0.09 mg/dl vs 1.22 +- 0.82 mg/dl). There was an increase in renal length of 1.14 +- 0.73 cm. None of the donors regretted donation.This pilot study reaffirms the safety of live kidney donation. There was a fall in GFR with consequent increase in renal length postenephrectomy. The long term implications of the minimal increase in proteinuria and rise in blood pressure need to be evaluated in larger cohort of donors over a longer period of the time. This study inderscores the need for initiating a donor registry to achieve this objective. ©